1995-1996

Graduate Medical Education Directory

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Preface

The 1995–1996 Graduate Medical Education Directory (8th edition) published by the American Medical Association (AMA) is recognized as the official list of programs accredited by the Accreditation Council for Graduate Medical Education (ACGME).

The Directory provides medical students with a list of accredited graduate medical education (GME) programs in the United States, which aids them in making important professional decisions. State licensing boards, specialty societies, and hospitals refer to the Directory to verify the authenticity of programs presented by physicians who wish to qualify for licensure, certification, or hospital privileges. The Directory provides a unique historical record of accredited GME programs and background information about the ACGME accreditation process.

Directory Description

Section I—Graduate Medical Education Information—summarizes the accreditation policies and procedures followed by the ACGME. Also included is information on regulations for entry of international medical graduates to the United States and admission to US residency programs, appointment to armed services GME programs, the Educational Commission for Foreign Medical Graduates, and the National Resident Match Program.

Section II—Essentials of Accredited Residencies in Graduate Medical Education—provides information regarding the ACGME accreditation process, requirements for institutions sponsoring graduate medical education programs, and program requirements for each of the medical specialties and subspecialties. Program requirements describe curricular content for GME programs and may also address program resources and personnel, program length, and other specifications.

Section III—Accredited Graduate Medical Education Programs—lists GME programs accredited by the ACGME. Section II provides program name, sponsoring institution, primary clinical site (where applicable), participating institutions, program director name, address, and phone number, program length, total positions available, and program identification number. Specialties and subspecialties are listed in alphabetical order. Programs within each specialty or subspecialty are listed in alphabetical order by state and city. A list of accredited transitional year programs offered by hospitals or groups of hospitals is included in this section.

Section IV—Graduate Medical Education Teaching Institutions—lists institutions and organizations that sponsor GME programs, serve as primary clinical sites, and participate to a significant extent in residency training. Teaching institutions are organized by type of affiliation (sponsoring, primary clinical site, and participant) and are listed alphabetically by state and city. Institution listings include the name and address of the institution, medical school affiliations (as verified annually by the deans of accredited US medical schools), a list of the specialties and subspecialties in which the institution provides training, and the institution identification number.

Appendix A—Combined Specialty Programs—provides information on programs that offer combined specialty training. Combined programs are approved by each respective medical specialty board, and the combined training is accepted for board certification. Although the ACGME has accredited each program separately, neither the ACGME nor the Residency Review Committees have reviewed these combined programs.

Appendix B—Medical Specialty Board Certification Requirements—contains information about the American Board of Medical Specialties (ABMS) and its member boards. Included are certification requirements of each ABMS member medical specialty board. Certification is the process by which a medical specialty board grants recognition to an individual physician who has met certain predetermined qualifications, as specified by the board. Certification requirements are also published by and available from each medical specialty board. Questions concerning certification requirements should be directed to the particular specialty board office listed in Appendix B.

Appendix C—Medical Licensure Requirements—contains a summary of licensure requirements for each state taken from the 1995 edition of US Medical Licensure Statistical and Current Licensure Requirements, published by the AMA. Licensure is the process by which an agency of state government grants permission to an individual physician to practice medicine within the jurisdiction of that state. Inquiries concerning licensure should be directed to the individual state licensure office listed in Appendix C.

Appendix D—Graduate Medical Education Programs Offering Shared Residency Positions—provides information on GME programs offering positions that can be shared by more than one resident. Programs are listed by specialty, state, and city of the sponsoring institution.

Appendix E—Medical Schools in the United States—contains a list of US medical schools accredited by the Liaison Committee on Medical Education (LCME). Appendix E provides the identification number, name, and location of each LCME-accredited medical school.

Appendix F—Abbreviations—provides a key to abbreviations used in the Directory.

AMA Annual Graduate Medical Education Surveys

The AMA distributes the Annual Survey of GME Programs to more than 7,000 programs accredited by the ACGME. This electronic survey (on computer disk) collects data on program characteristics such as clinical and research facilities and the work and learning environments residents can expect. GME program directors also provide information about individual residents undertaking residency training.

The Annual Survey of GME Teaching Institutions is an electronic survey distributed by the AMA to approximately 800 institutions that officially sponsor ACGME-accredited programs and to about 700 that participate in GME training by making facilities available to one or more residency programs. Respondents provide information on institutional features, resources, and benefits available to residents, institutional teaching staff, and patients.

AMA Enterprise Information Base

Advancements in technology have allowed organizations to join seemingly disparate data sources into powerful new information resources. Over the past several years, the AMA has organized all of its resident physician-based files onto a single computer platform that provides higher consistency and improved access to information. Thus, the Medical Education Research and Information Database (MERI) and the Census of Graduate Medical Trainees (CGMT) databases were merged with other physician information to form the AMA Enterprise Information Base (AMA EIB). The AMA EIB is the most comprehensive and authoritative database on resident and licensed physicians in existence. The AMA EIB is used to produce portions of the Graduate Medical Education Directory. The AMA EIB is also used to produce the AMA Fellowship and Residency Electronic Interactive Database Access System (AMA-FREIDA), an electronic information resource that assists medical students and residents in selecting GME programs. Additional information on AMA publications and products is available from AMA Order Department, PO Box 108950, Chicago, IL 60610 (800 621-8385).
Medical Education Data Service
The AMA Medical Education Data Service was established in January 1983 to enhance collaborative research relationships with educational institutions, professional associations, government agencies, foundations, and others interested in collecting, analyzing, and disseminating medical education data. Published information, existing tables, custom tables, electronic data, and mailing labels are available through the Medical Education Data Service.

Detailed information on AMA annual surveys, data maintained in the GME database, and other medical education databases is provided in the Medical Education Data Directory: A Compendium of Medical and Allied Health Education Data Elements. Additional information on the Medical Education Data Directory is available from AMA Medical Education, 515 N State St, Chicago, IL 60610; 312 464-4956.

Medical Education Data Requests
Written requests for data must state the purpose of the project, describe the specific data service requested, include expected due date for data, and provide the name, address, phone, and fax number of the project contact. When requests require substantial staff contribution or organizational overhead, a fee is assessed. Some data requests (custom tables) require a letter of agreement; others (electronic data) require a license agreement.

Individuals interested in obtaining medical or allied health education data should contact Gloria Gupta, AMA, 515 N State St, Chicago, IL 60610; 312 464-4956. Medical and allied health mailing label information is available from Nada Jensen at 312 464-5430 (see address above).

Acknowledgements
Many people contributed to the publication of the 1995-1996 Graduate Medical Education Directory. Program directors and medical education and housestaff affairs staff provided updated information on the programs they administer. Information on GME teaching institutions was provided by the chief executive officers and their staff.

The work of the RRCs that review and evaluate programs provides a basis for program and institution information included in this directory. Particular mention should be made of the contributions of the Committee Executive Secretaries and Accreditation Administrators, who provided corrected copy of program requirements for residency education and notification of the most recent actions of the RRCs and ACGME. Special acknowledgement is given to the following ACGME staff for data exchange and quality assurance: Philip Kenny, PhD, John Nylen, MBA, and Janes Weinlader, PhD.

The ABMS and the individuals who staff the member boards of the ABMS provided requirements for certification in each of the medical specialties and subspecialties. Staff from the National Resident Matching Program and the Educational Commission for Foreign Medical Graduates also provided updated information. Information on licensure was provided by state medical boards, the AMA Department of Database Products, and the AMA Office of Physician Credentials and Qualifications.

A special acknowledgement is due to Tom Altergott for information resources management and training. Acknowledgements are also due to survey, database, and publication staff, including Kelly Carafotes, Sylvia Etzel, David Grissom, Melissa Hennessey, Nada Jensen, Enza Messineo, Rebecca Miller, and Jeanette Spellman.

Communications concerning this directory should be addressed to AMA Medical Education, 515 N State St, Chicago, IL 60610; 312 464-4956.

Gloria C Gupta, RDH, MS, Editor
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Section I

Graduate Medical Education Information

Review and Accreditation of Graduate Medical Education Programs*

Introduction
The Accreditation Council for Graduate Medical Education (ACGME) is sponsored by the American Board of Medical Specialties, the American Hospital Association, the American Medical Association, the Association of American Medical Colleges, and the Council of Medical Specialty Societies. Each sponsoring organization appoints four representatives. The federal government names a representative to serve in a nonvoting capacity and the ACGME chooses two public representatives. There is also a resident representative, and the chair of the Residency Review Committee Council sits as a nonvoting representative. A Residency Review Committee consists of representatives appointed by the American Medical Association, the appropriate specialty board, and, in some cases, a national specialty organization. The Transitional Year Review Committee is composed of nine members who are appointed by the chair of the ACGME in conjunction with the Executive Committee. The term review committee is used to denote both residency review committee and transitional year review committee.

GME programs are accredited either by the ACGME upon the recommendation of an appropriate review committee, or by the review committee itself if accreditation authority has been delegated by the ACGME. Accreditation of a residency program indicates that it is judged to be in substantial compliance with the Essentials of Accredited Residencies in Graduate Medical Education (Essentials). The jurisdiction of the ACGME is limited to programs in the United States, its territories, and possessions.

A list of programs accredited by the ACGME, including detailed information about each program, is published by the American Medical Association annually in the Graduate Medical Education Directory. With the exception of that information, the contents of program files are confidential, as are all other documents regarding a program used by a review committee.

Application and Site Visit
The accreditation review process is set in motion in one of two ways, depending upon whether the program under consideration is seeking initial accreditation, reaccreditation, or continued accreditation.

Application
In the case of a program seeking initial accreditation or reaccreditation, the process begins when the program director sends an application to the executive secretary of the review committee. Review and evaluation of an application involves several steps and usually requires 8 to 12 months from the time the application is received by the review committee executive secretary, until an accreditation action is taken.

The review committee executive secretary checks the application for completeness and forwards the document to the director of field staff, who schedules a site visit of the program. The scheduling and completion of the site visit takes approximately 6 months. In some

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*The informal summary of the process of review and accreditation was adapted from official policies of the Accreditation Council for Graduate Medical Education (ACGME); additional information can be obtained in the Manual of Policies and Procedures for Graduate Medical Education Review Committees, available from the ACGME Office of the Executive Director.
specialties, a member of the review committee or a specialist will review the application to identify areas requiring clarification by the site visitor.

Reaccréditation following loss of accreditation involves the same process described above. A program cannot apply for reaccreditation while engaged in the appeals process described in this document.

**Review of Accredited Programs**

Accredited programs undergo site visits and reviews on cycles determined by the review committee, as described below in the sections on actions regarding accreditation of general specialty and subspecialty programs. Program directors are notified well in advance of the site visit, at which time they receive the appropriate forms for completion. Program directors may request forms earlier, if they desire.

A review committee may elect to review a program outside the usual cycle. A program director also may request an early review. However, a program will not be reviewed while it is in the appeals process.

**Function of Site Visitor**

There are two types of site visits, those conducted by ACGME field staff and those conducted by specialists. In either case, the site visitor does not participate in the final accreditation decision or recommendation of the review committee beyond providing a written report. It is the site visitor's primary responsibility to verify the information that has been provided by the program director. The site visitor also conducts interviews with administrators, faculty, and residents in order to report accurately on the various aspects of the educational program.

After the site visit has been completed, the site visitor's report is submitted to the review committee executive secretary who prepares the program file for evaluation by the review committee.

**Review and Accreditation**

The review committee reviews the program information in detail, evaluates the program, and determines the degree to which it meets the published educational standards (Essentials). The review committee decides upon an accreditation status for the program and identifies areas of noncompliance with the Essentials.

**Actions Regarding Accreditation of General Specialty Programs**

The following actions may be taken by a review committee regarding the accreditation status of general specialty programs and by the Transitional Year Review Committee regarding the status of transitional year programs.

**Withhold Accreditation**

A review committee may withhold accreditation when it determines that the proposal for a new program does not substantially comply with the Essentials. The review committee will cite those areas in which the proposed program does not comply with the Essentials.

**Provisional Accreditation**

Provisional accreditation is granted for initial accreditation of a program, or for a previously accredited program that had its accreditation withdrawn and has subsequently applied for reaccreditation. Provisional accreditation may also be used in the unusual circumstance in which separately accredited programs merge into one, or an accredited program has been so altered that in the judgment of the review committee it is the equivalent of a new program.

When a program is accredited on a provisional basis, the effective date of accreditation will be stipulated. Under special circumstances, the effective date may be made retroactive; however, unless specifically justified, it should not precede the beginning of the academic year during which the program is accredited.

Provisional accreditation implies that a program is in a developmental stage. It remains to be demonstrated that the proposal for which accreditation was granted will be implemented as planned. A review committee will monitor the developmental progress of a program accredited on a provisional basis. Following accreditation, programs should undergo a site visit in approximately 2 years in preparation for review by the respective committee. The interval between accreditation and the next review of the program should not exceed 3 years. In the course of monitoring a program's development, a review committee may continue provisional accreditation; however, the total period of provisional accreditation should not exceed 5 years for programs of 4 years duration or less, or the length of the program plus 1 year for programs of 5 years duration or longer. With the exception of special cases as determined by a review committee, if full accreditation is not granted within either of these time frames, accreditation of the program should be withdrawn.

**Full Accreditation**

A review committee may grant full accreditation in three circumstances:

A. When programs holding provisional accreditation have demonstrated, in accordance with ACGME procedures, that they are functioning on a stable basis in substantial compliance with the Essentials;

B. When programs holding full accreditation have demonstrated, upon review, that they continue to be in substantial compliance with the Essentials; and

C. When programs holding probationary accreditation have demonstrated, upon review, that they are in substantial compliance with the Essentials.

The maximum interval between reviews of a program holding full accreditation is 6 years; however, a review committee may specify a shorter cycle.

**Probationary Accreditation**

This category is used for programs holding full accreditation which are no longer considered to be in substantial compliance with the Essentials. The normal interval for review of programs holding probationary accreditation is 2 years; however, a review committee may specify a shorter cycle. In reviewing a program holding probationary accreditation, a committee may exercise the following options:

grant full accreditation; withdraw accreditation; or, in special circumstances, continue probationary accreditation. A program should not hold probationary accreditation for more than 4 consecutive years until it is returned to full accreditation or the review committee acts to withdraw accreditation. This period may be extended for procedural reasons, as when a program exercises the right to appeal procedures, or the review schedule exceeds 4 years. The probationary period is calculated from the date of the initial decision for probation. The Procedures for Proposed Adverse Actions and Procedures for Appeal of Adverse Actions, in subsequent text, provide further details on adverse actions.

**Withdrawal of Accreditation**

Accreditation of a program may be withdrawn under the following conditions:

A. Noncompliance with Essentials. Accreditation of programs holding either provisional accreditation or probationary accreditation may be withdrawn as follows:

1. For programs holding provisional accreditation, once a review committee has notified a program director that the program has not developed as proposed to establish and maintain substantial compliance with the Essentials, the program will be subject to withdrawal of accreditation for failure to be in substantial compliance with the Essentials.
2. For programs holding probationary accreditation, once a review committee has notified a program director that the program is accredited on a probationary basis, the program will be subject to withdrawal of accreditation for continued failure to be in substantial compliance with the Essentials.

3. In giving notification, as indicated in 1. and 2. above, a review committee must indicate the areas in which the program is judged not to be in substantial compliance with the Essentials. It is understood that these areas may change in the course of multiple reviews conducted from the time a program is first given notice that it is not in compliance until withdrawal of accreditation may occur.

B. Request of Program. Voluntary withdrawal of accreditation may occur at the request of the program director in the following ways:

1. A program director may request voluntary withdrawal of accreditation of a program, without prejudice. It is expected that if a program is deficient for one or more of the reasons set forth in E. below, the director will seek voluntary withdrawal of accreditation. Normally such requests would come from the program director, with a letter of confirmation from the sponsoring institution's chief executive officer.

2. Two or more programs may be merged into a single new program. If the review committee accredits the new program, it will take concurrent action for withdrawal of accreditation, without prejudice, of the previously separate programs. The review committee will consider the expressed preference of the program director in establishing the effective date for withdrawal of accreditation of the program(s).

C. Delinquency of Payment. Programs that are judged to be delinquent in payment of fees are not eligible for review, and shall be notified by certified mail, return receipt requested, of the effective date of withdrawal of accreditation. On that date, the program will be removed from the list of ACGME-accredited programs.

D. Noncompliance with Accreditation Actions and Procedures. A program director may be deemed to have withdrawn from the voluntary process of accreditation and a review committee may take appropriate action to withdraw accreditation if the director refuses to comply with the following actions and procedures:

1. To undergo a site visit and program review;
2. To follow directives associated with an accreditation action; and
3. To supply a review committee with requested information.

E. Program Inactivity or Deficiency. A review committee may withdraw accreditation from a program, regardless of its current accreditation status, under the following circumstances:

1. The program has been inactive for 2 or more years.
2. The program has incurred a catastrophic loss or complete change of resources, e.g., faculty, facilities, or funding, such that the program is judged not accountable.

F. Withdrawal of accreditation for reasons noted in the above paragraphs (Delinquency of Payment, Noncompliance with Accreditation Actions and Procedures, and Program Inactivity or Deficiency) is an administrative action and is not subject to the appeals process.

G. The following policies apply when action is taken to withdraw accreditation (except for establishment of an effective date in the case of voluntary withdrawal of accreditation or withdrawal of accreditation because of inactivity or deficiency):

1. The effective date of withdrawal of accreditation shall not be less than 1 year from the date of the final action taken in the procedures to withdraw accreditation.

2. The effective date of withdrawal of accreditation shall permit the completion of the training year in which the action becomes effective.

3. Once notification has been made of the effective date of withdrawal of accreditation, no residents may be appointed to the program.

4. When action has been taken by a review committee to withdraw accreditation of a residency program, and the program has entered into appeal procedures, an application for reaccreditation of the program will not be considered until the appeal action is concluded.

The Procedures for Proposed Adverse Actions and Procedures for Appeal of Adverse Actions, provided in this document, contain further details.

Actions Regarding Accreditation of Subspecialty Programs

There are two procedural models for the accreditation of subspecialty programs:

A. When the accreditation status of a subspecialty program is not directly related to, or dependent upon, the status of a general specialty/parent program, the subspecialty programs are accredited in accordance with the same procedures used for general specialty programs as heretofore described.

B. When the accreditation status of a subspecialty program is directly related to, or dependent upon, the status of a general specialty/parent program, the following accreditation actions are used:

1. Withhold Accreditation. A review committee may withhold accreditation when it determines that the proposal for a new subspecialty program does not substantially comply with the Essentials. The review committee will cite those areas in which the proposed program does not comply with the Essentials.

2. Accreditation. The subspecialty program has demonstrated substantial compliance with the Essentials and is attached to a general specialty program that holds full accreditation.

3. Accreditation with Warning. The accredited subspecialty program has been found to have one or more areas of noncompliance with the Essentials that are of sufficient substance to require correction.

4. Accreditation with Warning, Administrative. The general specialty program to which the subspecialty program is attached has been granted accreditation on a probationary basis. This action simultaneously constitutes an administrative warning of potential loss of accreditation to any subspecialty program that is attached to the general specialty program.

5. Withdraw Accreditation. An accredited subspecialty program is considered to be in substantial compliance with the Essentials and has received a warning about areas of noncompliance.

6. Withdraw Accreditation, Administrative. If a general specialty program has its accreditation withdrawn, simultaneously the accreditation of any subspecialty program that is attached to the general specialty program is administratively withdrawn.

7. Other Actions by a Review Committee. The policies and procedures on withdrawal of accreditation of general specialty programs, as well as those on deferral of action, resident complement, participating institutions, and progress reports governing general specialty programs, also apply to the actions concerning subspecialty programs.

Warning Notices

A review committee may use a special procedure to advise a program director that it has serious concerns about the quality of the program and that the program's future accreditation status may be
in jeopardy. In keeping with the flexibility inherent in the accreditation process, each review committee may use this procedure in accordance with its own interpretation of program quality and the use of the different accreditation categories. This procedure is not considered an adverse action and therefore is not subject to the appeal procedures.

The waiving procedure may be used as follows:
A. For a program with provisional accreditation. A review committee may elect to continue provisional accreditation, but include in the letter of notification a statement that the program will be reviewed in approximately 1 year, following a site visit, at which time withdrawal of accreditation will be considered if the program has not achieved satisfactory development in establishing substantial compliance with the Essentials.
B. For a program with full accreditation. A review committee may elect to continue full accreditation, but include in the letter of notification a statement that the program will be reviewed in approximately 1 year, following a site visit, at which time probationary accreditation will be considered if the program is not in substantial compliance with the Essentials.
C. Review committees may extend the interval before the next review to 2 years, as in cases where program improvements may be addressed more appropriately within 2 years rather than 1 year.

Delerral of Accreditation Action
A review committee may defer a decision on the accreditation status of a residency program. The primary reason for delerral of accreditation action is lack of sufficient information about specific issues, which precludes an informed and reasonable decision. When a committee defers accreditation action, the residency program retains its current accreditation status until a final decision is made.

Size of Resident Complement
The complement of residents in a program must be commensurate with the total capacity of the program to offer each resident an educational experience consistent with accreditation standards; thus, a review committee may indicate that a residency program is accredited to train a specific number of residents as a maximum at any one time. In addition, a committee may indicate the number of residents to be trained in each year of the program. A review committee may also indicate that a minimum number of residents is considered necessary in each program to provide an effective learning environment.

Participating Institutions
The sponsoring institution of a residency program may utilize one or more additional institutions to provide necessary educational resources. In such cases, a review committee may evaluate whether each participating institution contributes meaningfully to the educational program.

Progress Reports
A review committee may request a progress report from a program director. The committee should specify the exact information to be provided and a specific due date for the report.

Notification of Accreditation Status
Letters of Notification
Accreditation actions taken by a review committee are reported to program directors by formal letters of notification. The accreditation status of any program will change only by subsequent action of the review committee. The notification letters usually contain reference to the approximate time of the next site visit and review of the program.

Notifying Residents
Residents in a program should be aware of the accreditation status of the program and must be notified of any change in the accreditation status. When an adverse action is taken, program directors must notify all current residents and applicants to the program in writing. Copies of the letters to residents and applicants must be kept on file by the program director and a copy shall be sent to the executive secretary of the review committee within 50 days of receipt of the notification of the adverse action. Additional information regarding notification letters is contained in the Procedures for Proposed Adverse Actions and Procedures for Appeal of Adverse Actions.

Period of Accreditation
When a residency program is initially accredited, accreditation commences with the date specified in the letter of notification. A program remains accredited until action is taken by a review committee to withdraw accreditation.

Procedures for Proposed Adverse Actions and Appeal of Adverse Actions

Procedures for Proposed Adverse Actions
(Effective: January 1, 1983)

The following procedures will be implemented when a residency review committee (RRC) determines that a program is not in substantial compliance with the Essentials of Accredited Residencies in Graduate Medical Education (Essentials).
A. When an RRC determines that an adverse action is warranted, the RRC will first give notice of its proposed adverse action to the program director and the chief administrative officer of the sponsoring institution. This notice of proposed adverse action will include the citations that form the basis for the proposed adverse action, a copy of the site visitor's report, and the date by which the program must submit, in writing, its response to each of the citations and the proposed adverse action.
B. The program may provide to the RRC written information: revising or expanding factual information previously submitted; challenging the findings of the site visitor; rebutting the interpretation and conclusions of the RRC; demonstrating that cited areas of noncompliance with the published standards did not exist at the time the RRC reviewed the program and proposed an adverse action; and contending that the program is in compliance with the standards. The RRC will determine whether the information may be considered without verification by a site visitor.
C. The RRC will complete its evaluation of the program at a regularly scheduled meeting, as indicated to the program director in the notice of proposed adverse action. The RRC may confirm its proposed adverse action or modify its position and take a nonadverse action.
D. If an RRC takes an adverse action, it will communicate to the program director the adverse action and the citations, as described above, including comments on the program director's response to these citations.
E. The letter of notification, which will include information on the right of the program to appeal the RRC's decision to the ACGME,
will be sent to the program director, as well as to the persons or agencies entitled to receive copies. The program director may appeal the decision; otherwise, it is final. If the decision is accepted as final, the program director may subsequently request a new review in order to demonstrate that the program is in compliance with the standards.

F. Upon receipt of notification of an adverse accreditation action, the program director must inform, in writing, the residents and applicants that the adverse action has been taken and whether the action will be appealed. A copy of the written notice must be sent to the executive secretary of the AGME within 30 days of receipt of the RRC’s letter of notification.

Procedures for Appeal of Adverse Actions
(Effective: January 1, 1993)

A. If an RRC takes an adverse action, the program may request a hearing before an appeals panel. If a written request for such a hearing is not received by the executive director of the AGME within 30 days following receipt of the letter of notification, the action of an RRC will be deemed not subject to further appeal. If a hearing is requested, the panel will be appointed according to the following procedures:

1. The AGME shall maintain a list of qualified persons in each specialty as potential appeals panel members. Such lists of persons should come from professional backgrounds and settings representative of those in which GME programs are conducted.

2. For a given hearing, the program shall receive a copy of the list of potential appeals panel members and shall have an opportunity to delete a maximum of one-third of the names from the list of potential appeals panel members. Within 15 days of receipt of the list, the program shall submit the revised list to the executive director of the AGME.

3. A three-member appeals panel will be constituted by the AGME from among the remaining names on the list.

B. When a program requests a hearing before an appeals panel, the program reverts to its status prior to the appealed adverse action until the AGME makes a final determination on the status of the program. Nonetheless, at this time residents must be notified of the adverse action by an RRC on the accreditation status.

C. Hearings conducted in conformity with these procedures will be held at a time and place to be determined by the AGME. The program shall be notified of the time and place of the hearing at least 25 days prior to the hearing.

D. The program will be given the documentation of the RRC action in confirming its adverse action.

E. The documents comprising the program file and the record of the RRC’s action, together with oral and written presentations to the appeals panel, shall be the basis for the recommendations of the appeals panel.

F. The appeals panel shall meet and review the written record, and receive the presentations. The appropriate RRC shall be notified of the hearing, and a representative of the RRC may attend the hearing to be available to the appeals panel to provide clarification of the record.

Proceedings before an appeals panel are not of an adversary nature as typical in a court of law, but rather, provide an administrative mechanism for peer review of an accreditation decision about an educational program. The appeals panel shall not be bound by technical rules of evidence usually employed in legal proceedings.

The program may not amend the statistical or narrative descriptions on which the decision of the RRC was based. Furthermore, the appeals panel shall not consider any changes in the program, or descriptions of the program, which were not in the record at the time when the RRC reviewed the program and proposed an adverse decision. Presentations shall be limited to clarifications of the record, to arguments to address compliance by the program with the published standards for accreditation, and to the review of the program in the context of the administrative procedures governing accreditation of programs.

The appellant shall communicate with the appeals panel only at the hearing or in writing through the executive director of the AGME.

The appeals panel shall make recommendations to the AGME whether there is substantial, credible, and relevant evidence to support the action taken by the RRC in a matter that is being appealed. The appeals panel, in addition, will make recommendations as to whether there has been substantial compliance with the administrative procedures governing the process of accreditation of graduate medical education programs.

G. The program may submit additional written material within 15 days after the hearing. The intention to submit such material must be made known to the appeals panel at the hearing.

H. The appeals panel shall submit its recommendations to the AGME within 20 days after receipt of additional material. The AGME shall act on the appeal at its next regularly scheduled meeting.

I. The decision of the AGME in this matter shall be final. There is no provision for further appeal.

J. The executive director of the AGME shall, within 15 days following the final AGME decision, notify the program under appeal of the decision of the AGME.

K. Expenses of the appeals panel members and the associated administrative costs shall be shared equally by the appellant and the AGME.

Program Organization

The organization of a program may involve any of several administrative forms. For example, a program may be conducted within a single institution, that is, the assignment of residents is limited to that institution; or a program may involve more than one institution that is, the resident assignments are not limited to the sponsoring institution.

Some RRC’s have specific requirements relating to program organization. These may be found in the appropriate Program Requirements (see Section II).

Institutional Review

Procedures for review of institutions for compliance with the Institutional Requirements of the Essentials have been established in addition to the process of review and accreditation of programs in graduate medical education.

The purpose of the review is to determine whether the institution has established, documented, and implemented institutional policies as required by the Institutional Requirements of the Essentials for the governance of all residency programs under its sponsorship.

Institutions that sponsor two or more programs will undergo an institutional site visit and will have formal review by the AGME. Institutions that sponsor only one residency program will undergo an
institutional review as part of their program site visit and will be reviewed by the appropriate RRC.

Results of institutional review evaluation for institutions with two or more programs are reported as either favorable or unfavorable in a formal letter of report. The date of the next institutional review will be identified in this letter. Results of institutional review for institutions with a single residency are incorporated in the letter of program accreditation notification.

An institution that has received an unfavorable evaluation can request another institutional review earlier than the designated review cycle. Two successive unfavorable reviews of an institution will lead to a warning and a third successive unfavorable review to the withdrawal of accreditation of all the residency programs sponsored by the institution. An appeals mechanism has been established for the latter contingency.

**Fees for Evaluation and Accreditation**

Fees charged for the accreditation of programs are determined annually by the ACGME. As of January 1, 1996, the following fee schedule is in effect.

**Application Fee**

A fee is charged for processing applications for programs seeking initial accreditation or reaccreditation, including subspecialty programs. The charge for applications is $1,000. It is normally billed at the time the application is received.

**Program Site Visit and Review**

A fee is charged for the site visit and review of programs.

The charge for a site visit and review is $2,500, whether the visit is done by an ACGME field representative or by a specialist in the appropriate discipline. This fee applies to all accredited programs, including subspecialty programs. This fee applies also to site visits for institutional review.

**Annual Per Resident Fee**

An annual fee is charged for each position filled in an accredited residency training program. The fee is calculated on the number of residents/fellows/trainees in each program as of September 1 of the given academic year. Programs are billed around January 1 of that academic year. The fee charged in 1994–1995 was $40 per resident.

**Information and Inquiries**

Inquiries regarding any aspect of the accreditation process should be directed to the ACGME executive director or to the executive secretary of the appropriate RRC at the following addresses:

ACGME 515 N State St/Ste 2000
Chicago, IL 60610

Inquiries regarding fees should be directed to

ACGME Credit Manager
515 N State St/Ste 2000
Chicago, IL 60610
312 464-4920

For telephone inquiries, please use the following numbers

John T Boberg, PhD, 312 464-4687
Executive Secretary, RRCs for
Ophthalmology
Surgery
Thoracic Surgery
Vacant, 312 464-5408
Executive Secretary, RRCs for
Emergency Medicine
Neurological Surgery
Psychiatry
Steven P Nestler, PhD, 312 464-4692
Executive Secretary, RRCs for
Dermatology
Medical Genetics
Orthopaedic Surgery
Pathology
Paul O'Connor, PhD, 312 464-4683
Executive Secretary, RRCs for
Colon and Rectal Surgery
Neurology
Obstetrics and Gynecology
Physical Medicine and Rehabilitation
Mary Alice Parsons, 312 464-4947
Executive Secretary, RRCs for
Family Practice
Pediatrics
William E Rodak, PhD, 312 464-4963
Executive Secretary, RRC for
Internal Medicine
Doris A Stoll, PhD, 312 464-5505
Executive Secretary, RRCs for
Allergy and Immunology
Otolaryngology
Preventive Medicine
Plastic Surgery
Urology
Cynthia Taradejna, 312 464-4685
Executive Secretary for
Transitional Year Review Committee
Catherine A Horan, PhD, 312 464-5584
Administrator for Institutional Review
Philip W Kenny, PhD, 312 464-4948
Director of Field Staff (Site Visits)
Barbara J Warren, 312 464-4959
Office Manager (invoices, vouchers)
James R Weinlader, PhD, 312 464-5405
Director of Residency Review Committee Activities

**Entry of Foreign-Born Medical Graduates to the United States**

The entry of foreign-born graduates of non-US medical schools to the United States is governed by the US Immigration and Nationality Act (INA), as amended, which is administered by the US Immi-
Certification by the Educational Commission for Foreign Medical Graduates

The ECFMG, through a program of certification, assesses the readiness of IMGs to enter US residency or fellowship programs that are accredited by the Accreditation Council for Graduate Medical Education (ACGME). The ECFMG and its sponsoring organizations define an IMG as a physician whose basic medical degree or qualification was conferred by a medical school located outside the United States, Canada, and Puerto Rico. The medical school must be listed at the time of graduation in the World Directory of Medical Schools, published by the World Health Organization. US citizens who have completed their medical education in schools outside of the United States, Canada, and Puerto Rico are not considered IMGs, while foreign nationals who have graduated from medical schools in the United States, Canada, and Puerto Rico are not.

ECFMG certification provides assurance to ACGME-accredited residency program directors and to the people of the United States that IMGs have met minimum standards of eligibility required to enter such programs. ECFMG certification is also a prerequisite required by most states for licensure to practice medicine in the United States and is one of the eligibility requirements to take Step 3 of the United States Medical Licensing Examination (USMLE).

To meet the medical education credential requirement for ECFMG certification, applicants must have completed all the education requirements to practice medicine in the country in which they received their medical education. A national of the country must have an unrestricted license or certificate of full registration to practice medicine in that country.

All medical credentials received by the ECFMG are sent by the ECFMG to the foreign medical schools for verification by the appropriate officials. ECFMG medical education credential requirements are not fulfilled until such verification is received by the ECFMG.

To meet the examination requirements for the ECFMG certification, an applicant must:

1. Pass the medical science examination (Step 1 and Step 2 of the USMLE are currently administered for this purpose). While the 1-day ECFMG medical examination, the 2-day Visa Qualifying Examination, the Part I and Part II examinations of the NBME, and Day 1 and Day 2 of the Foreign Medical Graduate Examination in the Medical Sciences are no longer administered, a passing performance which was obtained on any of those examinations is accepted for ECFMG certification. Also, applicants are permitted to combine the basic medical science test of one of these examinations with the clinical science test of one of the other examinations.

Additionally, the 3-day Federation Licensing Examination (FLEX), is accepted for ECFMG certification if taken prior to June 1985 and a score of 75 or higher on each of the 3 days of a single administration has been obtained.

While foreign national physicians may meet the medical science examination requirement for ECFMG certification based on the former 1-day ECFMG examination, last administered in February 1984, or FLEX taken prior to June 1985, these examinations have not been recognized by the US Secretary of Health and Human Services as meeting the medical science examination requirement to obtain a visa to enter the United States. See below.

2. Pass the ECFMG English test. The only alternative English test the ECFMG will accept is a Friday or Saturday (formerly special or international) administration of TOEFL (Test of English as a Foreign Language), provided that applicants have previously taken an ECFMG English test. Passing performance on the English test is valid for 2 years.

A Standard ECFMG Certificate is issued to applicants who meet the medical science and English language requirements, fulfill the medical education credential requirement, and clear their financial account with the ECFMG. The Standard ECFMG Certificate is considered valid for entry into an ACGME-accredited graduate medical education program so long as passing performance on the English test has not expired. If the holder of the certificate has entered such a program in the United States prior to the English test expiration date, the certificate is no longer subject to expiration. In order for an applicant to obtain permanent revalidation for the certificate, ECFMG must receive a letter from the program director giving the date the individual began the program as well as a description of the field or specialty. On receipt of such a letter, ECFMG will provide a revalidation sticker to the holder of the certificate. Standard ECFMG Certificates may also be revalidated for a period of 2 years by passing an ECFMG English test or TOEFL.

For further information on ECFMG examinations and certification, contact:

ECFMG
3624 Market St
Philadelphia, PA 19104-2686
215 386-5800
215 386-6198 Fax

Visas That Permit Graduate Medical Education or Training

Exchange Visitor J-1

Foreign national physicians use the exchange visitor J-1 nonimmigrant visa class most often for graduate medical education and training. The Exchange Visitor Program is regulated by the United States Information Agency (USIA). USIA designates various organizations and educational institutions as Exchange Visitor Program sponsors. Each designation is designed for a specific purpose appropriate to that sponsor. USIA has designated the ECFMG as the only organization authorized to sponsor foreign national physicians to engage in graduate medical education or training. Such education or training is defined in the US Code of Federal Regulations as participation in a program in which the foreign national physician will receive graduate medical education or training which generally consists of a residency or fellowship program involving the provision of health care services to patients. This program may consist of a medical specialty, a directly related medical subspecialty, or both.

To be eligible for ECFMG exchange visitor sponsorship for graduate medical education, the foreign national physician must pass either the National Board of Medical Examiners (NBME) former Part I and Part 2 examinations, or an examination determined to be equivalent to NBME by the secretary of the US Department of Health and Human Services. The following examinations have been determined to be equivalent to the NBME Part I and Part 2 examinations for this purpose:

- Day 1 and Day 2 of the former Visa Qualifying Examination;
- Day 1 and Day 2 of the former Foreign Medical Graduate Examination in the Medical Sciences; and
Entry of Foreign-Born Medical Graduates to the United States

• Step 1 and Step 2 of the United States Medical Licensing Examination.

In addition, the foreign national physician must:
• Hold a valid Standard ECFMG Certificate;
• Have a contract with an ACSME-accredited program that is affiliated with a US medical school; and
• Provide a written statement from the Ministry of Health in the country of most recent legal permanent residence that attests to the need for physicians trained in the exchange visitor’s specialty and verifies that the exchange visitor has filed written assurance that he/she will return to the country upon completion of training.

The duration of stay for exchange visitors in graduate medical education is the time required to meet the educational requirements for certification by an American specialty board that has been recognized by the American Board of Medical Specialties for a maximum of 7 years.

Exchange visitor physicians who enter the United States for the purpose of graduate medical education are automatically subject to the 2-year home physical presence requirement of the Immigration and Nationality Act as amended. This means that prior to applying for H (temporary worker), L (intracompany transferee), permanent resident, or immigrant status, the exchange visitor must reside and be physically present in the country of most recent legal permanent residence for an aggregate of at least 2 years.

Foreign national graduates of LCME-accredited US and Canadian medical schools who enter the United States for the purpose of graduate medical education are also eligible for ECFMG sponsorship. As graduates of LCME-accredited medical schools, they are required to have passed either the former NBME Part 1 and Part 2 examinations or the USMLE Step 1 and Step 2. They are not required to hold a Standard ECFMG Certificate. However, they must meet all other requirements for exchange visitor sponsorship and are also held to the 2-year home country physical presence requirement.

Another uncommon, but possible, case occurs when an exchange visitor is a medical student in J-1 student status at a US college or university. Such students who graduate from US medical schools are eligible for up to 36 months of postdoctoral academic training in the field of study. Graduates of US medical schools may, therefore, use academic training authorization to undertake a residency. This work is authorized by the school from which the student graduated.

The J-1 “responsible officer” at the US medical school can usually provide information necessary to make employment eligibility determinations for these graduates.

Foreign national physicians who wish to enter the United States for advanced medical training may do so in programs involving observation, consultation, teaching, or research with or without patient contact incidental to one or more of these activities. USIA may authorize universities and other health science institutions to sponsor foreign national physicians for this purpose. ECFMG is also authorized to sponsor foreign national physicians for this purpose.

However, J-1 (exchange visitor) status physicians who enter the United States in the J-1 visa category of student, research scholar, or professor, may not, as a matter of course, change their J-1 visa category to alien physician to allow them to engage in graduate medical education or training sponsored by ECFMG. Said physicians must (through ECFMG) present a request for visa category change to USIA for review and decision. The request must demonstrate unusual and extenuating circumstances. Exchange visitors in programs involving observation, consultation, teaching, or research may remain in the United States for a maximum of 3 years with a possible 6-month extension under specific circumstances.

Temporary Worker H-1B

The H-1B visa is for temporary workers in specialty occupations who hold professional level (Bachelor’s degree minimum) appropriate to the employment in which they will be engaged. Between 1976 and 1991, graduates of foreign medical schools were not permitted to use the H-1B for residencies, except in the cases where individuals who were of national or international renown. The Immigration Act of 1990, and subsequent technical amendments, made the H-1B available to graduates of foreign medical schools who have passed FLEX or the equivalent, have passed an English language exam, and hold a license appropriate to the activity. The Secretary of the Department of Health and Human Services has determined that the NBME Parts 1, 2, and 3 or the USMLE Steps 1, 2, and 3 special certifying examination sequence, are equivalent to FLEX for this purpose. The level of licensure required is determined by the state and by the activity. For example, in many states a limited or training license is sufficient for a residency, and would be acceptable for the H-1B.

Due to the FLEX, or equivalent examination, requirement and the requirement in most states that physicians complete a certain amount of US training prior to admission to the third or final portion of the license exam, it is likely that only a small number of physicians will qualify for and use the H-1B visa for residencies. The purpose of the J-1 (exchange visitor) visa is to provide foreign nationals with opportunities to participate in educational and cultural programs in the United States. Therefore, many individuals and organizations agree that the J-1 visa is the appropriate visa for the purpose of graduate medical education.

H-1B employment authorization is employer specific, so that the training program must file an H-1B petition on behalf of the international medical graduate. An H-1B visa obtained for a particular program may be used only for that program. The total amount of continuous time permitted in H-1B classification is 6 years, no extensions are permitted. An absence from the United States of 1 year or more restarts the 6-year period.

There are some exceptions and special circumstances. Graduates of LCME-accredited US medical schools are exempt from the FLEX and English language examination requirements. Graduates of LCME-accredited Canadian medical schools are exempt from the English language exam, but not the FLEX exam. Interestingly, full licensure in Canada based on Canadian examinations which is reciprocal to full licensure in a US state, is not equivalent to FLEX for H-1B purposes. The FLEX, or its equivalent, is still required even if these physicians hold full licensure in the state in which training will occur.

F-1 Student Postcompletion Practical Training

Students in F-1 status may be authorized for up to 12 months of practical training after completion of studies, provided the practical training program can be completed in 12 months. IMOs who receive US medical degrees while in F-1 status may apply to USIS for practical training work authorization. If employment authorization is granted, the individual may use that authorization for residency training. The F-1 “designated school official” at the US medical school can usually provide information necessary to make employment eligibility determinations for these graduates. Note that graduation from a US PhD program does not permit practical training in a residency, since the PhD prepares one for research, but not for clinical practice.

Employment Authorization from the US Immigration and Naturalization Service

INS is empowered to grant employment authorization to certain nonimmigrants or intending immigrants. Such authorization is usually temporary and may have conditions.

A common employment authorization in academic institutions is that given to the J-2 spouse or child of a J-1 exchange visitor. J-2 de-
pendents may apply to INS for work authorization provided it is not to support the principal J-1. When granted, it permits any employ-
ment for which the individual is qualified, including residency train-
ing. Residency program directors are cautioned that this
employment authorization is absolutely dependent upon the J-1 ex-
change visitor maintaining status. If the J-1 leaves the United
States, or fails to maintain status, the J-2 work authorization ends,
even though he/she may hold a J-2 employment authorization docu-
ment which appears to be valid.

Other classifications or circumstances under which the INS may
grant work authorization include, but are not limited to, 6-d
dependent of a foreign government employee in the United States,
temporary protected status, voluntary departure, refugee, asylum, or
certain lawful permanent resident applicants. These must be evalu-
ated case by case.

Lawful Permanent Resident (Immigrant) Status

Persons who hold lawful permanent resident or "green card" status
are permitted to remain in the United States permanently, and to
accept any employment for which they qualify. For appointment to
a residency program, IMGs must meet the requirements described
in the Essentials of Accredited Residencies in Graduate Medical Edu-
cation (see Section II).

Foreign-born international medical graduates may immigrate to the
United States based on relationship to a US citizen, lawful permanent
resident, or employment and skills. In general, the rules for immigra-
tion are the same for international medical graduates as for any other
immigrant, but special rules apply to physicians who immigrate based
on their intention and ability to practice the profession of medicine, in-
cluding practice at the residency level. Employment-based immigration
based on a job offer for the practice of medicine requires that the physi-
cian pass the NBME Parts 1 and 2 examinations, or the equivalent as
determined by the Secretary of the US Department of Health and Hu-
man Services. These are the same examinations needed for ECFMG
sponsorship for clinical training and for ECFMG certification described
earlier. Certain exceptions apply to physicians who are of national or
international renown.

Information and Inquiries

ECFMG Certification and Sponsorship
Educational Commission for Foreign Medical Graduates
3624 Market St
Philadelphia, PA 19104-2685
215 396-5500

F-1 Student Practical Training and J-1 Student
Academic Training
NAPSA: Association of International Educators
1875 Connecticut Ave NW/Ste 1000
Washington, DC 20009-5728
202 462-4811

H-1B, Lawful Permanent Resident Status, and Other
Temporary Work Authorization
American Immigration Lawyers Association
1400 Eye St NW/Ste 1200
Washington, DC 20005
202-371-9377

Fifth Pathway Program

The Fifth Pathway Program, an academic year of supervised clinical
education provided by an LCME-accredited medical school, is avail-
able to persons who meet all of the following conditions:

A. Have completed, in an accredited US college or university, under-
graduate premedical work of the quality acceptable for matricula-
tion in an accredited US medical school;
B. Have studied medicine in a medical school located outside the
United States, Puerto Rico, and Canada, that is listed in the
World Directory of Medical Schools, published by the World
Health Organization;
C. Have completed all of the formal requirements of the non-US medical
school except internship and/or social service. (Those who have com-
pleted all of these requirements, including internship and/or social
service, are not eligible for a fifth pathway program.)

Students who have completed the academic curriculum in resi-
dence at a non-US medical school, and who meet the above condi-
tions, may be offered the opportunity to substitute for an internship
and/or social service required by a non-US medical school, an aca-
demic year of supervised clinical training provided in a medical
school accredited by the Liaison Committee on Medical Education.

Before beginning the supervised clinical training, students must
pass an examination acceptable to the sponsoring medical school.

Physicians who have a Fifth Pathway Certificate and have passed the
Foreign Medical Graduate Examination in Medical Sciences (FMGECMS), Parts I and II of the National Board examination or the
USMLE, are eligible for appointment to a residency program. They
must also meet requirements established by the state medical
board in the state where the residency program is located and must
be accepted for appointment by the director of the residency pro-
gram. Any medical school accredited by the LCME can provide Fifth Pathway education. As of the printing of this publication, the two
medical schools known to provide such education are New York
Medical College in Valhalla, New York, and Mount Sinai School of
Medicine in New York City.

Appointment to Armed Services Graduate Medical Education Programs

Armed Services first-year GME programs are filled by graduates of
accredited schools of medicine and osteopathic medicine. The ma-
Jority of the Armed Services first-year GME positions are filled by in-
dividuals with existing active duty service obligations. Graduates of
non-US medical schools, other than Canadian, must have a stand-
ard ECFMG certificate to be eligible to apply. To be trained in an
Armed Services medical treatment facility, an individual must be
qualified for appointment as a commissioned officer in the Armed
Services. Selection priorities for Armed Services postgraduate year
2 and beyond are given to officers on active duty. Acceptance of ap-
plications from civilian applicants may vary among the three serv-
ces. Interested individuals should contact their local Armed
Services recruiting office for further information.

National Resident Matching Program

The National Intern Matching Program, the forerunner of the Na-
tional Resident Matching Program (NRMP), began with the 1962
graduating classes of US medical schools. The purpose was to estab-
lish a mechanism that would end the chaotic process by which appli-
cants and programs were forced to make commitments before all

Graduate Medical Education Directory 9
options could be considered. In addition, there would be a common
time for the announcement of the appointments. Participants in
the NRMP agreed to honor the commitment to offer or to accept an
appointment if a match resulted.

Today, more than 40 years later, in addition to approximately
15,400 US medical students, another 1,000 "independent" appli-
cants compete for the approximately 23,900 postgraduate training
positions offered in the NRMP. Independent applicants include for-
mer graduates of US medical schools, and eligible students/gradu-
ates of osteopathic, Canadian, and foreign medical schools.

The NRMP is not a centralized application service. Applicants ap-
ply directly to the hospital programs that interest them, and hospi-
tals administer their own admission process, including requests for
interviews. Programs that participate in the NRMP insist that appli-
cants register with the NRMP. In February, after interviewing has
been completed, applicants and programs submit to the NRMP
"Rank Order Lists," indicating their choices in order of preference.
The majority of participants in the NRMP enter their Rank Order
Lists directly into personal computers at designated sites and ob-
tain immediate confirmation of their choices. The Rank Order List
Input and Confirmation (BOLIC) system is the software program
provided by the NRMP for this purpose.

Both applicants and programs must follow the cardinal rule that
neither must ask the other to make a commitment before the sub-
mission of Rank Order Lists. It is to be expected that one may
express a high level of interest in the other; however, it is not ac-
ceptable for one to ask the other how one will be ranked. Any verbal
or written contract prior to the submission of the Rank Order Lists
should not be expected or made. The final preferences of program
directors and applicants as reflected on the submitted Rank Order
Lists will determine the offering of positions and the placement of
applicants.

The principle upon which the NRMP functions is straightforward.
Programs submit lists of applicants who have applied to them in the
rank order of their preference. Through matching, programs receive
the applicants they prefer who have ranked the program and have
not been matched with a more preferred program. Applicants are
matched into the programs they prefer on their Rank Order Lists
that are prepared to offer them a position, consistent with the pref-
erences of the programs. This matching algorithm replicates the
usual selection process in which programs make offers to applicants
they prefer and continue to make offers until they have filled all of
their positions with applicants who would accept an offer. The ad-
vantage of a matching program is that decisions about preferences
can be made in private and without pressure.

Traditionally, the general announcement of the Match Results
takes place in mid-March. Applicants who fail to obtain a position
and programs that do not fill all of their offered positions are in-
formed the day before the general announcement; individual ar-
rangements are subsequently made. The majority of appointments
commence on or about July 1.

Positions Offered Through the NRMP

The positions offered by programs participating in the NRMP are
typically those sought by US seniors; that is, positions that provide
the first year of postgraduate training (PGY-1). In addition, special-
ities that start their training at the PGY-2 level offer positions in the
NRMP, so that applicants may link their PGY-1 and PGY-2 positions
into a cohesive training program where geographic location can be
considered.

Positions Offered

Categorical (C) positions are offered by programs that expect appli-
cants who enter in their first postgraduate year to continue through
subsequent years and complete the training required for certifica-
tion in that specialty (normally 3 to 4 years).

Preliminary (P) positions are offered mainly by internal medi-
cine, surgery, and transitional year programs. These are for only 1 or
2 years of training as prerequisites for entering specialties that re-
quire broad clinical training.

Advanced (A) positions (PGY-2 level), which do not commence
until a year after the NRMP, are offered by programs in specialties
that require preliminary training. Applicants with no prior graduate
medical training may apply for these positions and also for prelim-
inary positions that are compatible with their plans.

Resident (R) positions (PGY-2 level), which begin in July of the
NRMP year, are offered by some programs for applicants that have
already completed their prerequisite GME training. Consequently,
these positions are not available to senior medical students.

Couples and Shared Residency Positions

Applicants who are members of a couple can link their program
choices together, so that they can be matched into a combination of
programs suited to their needs. In creating pairs of program
choices, couples can mix specialties, program types, and geographic
locations.

Shared residency positions are offered by some programs. In a
shared residency, two residents share one position, usually alternating
months on clinical rotations with time off to devote to family,
research, or other interests. Obtaining a shared residency position
through the NRMP requires that two applicants who have enrolled
separately in the NRMP become partners to be matched together in a
single position.

Specialties Matching Services

In addition to the NRMP for first- and second-year residency posi-
tions, the NRMP conducts matches for advanced residency or fellow-
ship positions through the Specialties Matching Services. These
specialty matches occur throughout the year, and each requires its
own registration with NRMP.

The specialty matches are the following: Combined Musculoskele-
tal Matching Program-participating subspecialties of orthopaedic
surgery; colon and rectal surgery; dermatology (PG-3); general ve-
cular surgery; gynecologic oncology; maternal-fetal medicine; Medi-
cal Specialties Matching Program-participating subspecialties of
internal medicine; ophthalmic plastic and reconstructive surgery;
pediatric emergency medicine; pediatric surgery; primary care
sports medicine; reproductive surgery; and thoracic surgery.

Information and Inquiries

The NRMP Board of Directors is comprised of representatives
from: the Council of Medical Specialty Societies, American Board of
Medical Specialties, American Hospital Association, American Medi-
cal Association, and Association of American Medical Colleges. The
National Resident Matching Program is managed and operated by the
Association of American Medical Colleges.

Inquiries regarding the National Resident Matching Program
should be directed to

National Resident Matching Program
2450 N St NW/Ste 201
Washington, DC 20037-1141
202 828-0566
Section II

Essentials of Accredited Residencies in Graduate Medical Education

Preface

I. Education of Physicians
Medical education in the United States occurs in three major phases.

A. Undergraduate Medical Education
Undergraduate medical education is the first or "medical school" phase. The medical school curriculum provides instruction in the sciences that underlie medical practice and in the application of those sciences to health care. Students learn basic information-gathering, decision-making, and patient-management skills in rotations through the various clinical services. Students are granted the MD degree on the successful completion of the medical school curriculum and are eligible to undertake the next phase of medical education.

Accreditation of educational programs leading to the MD degree is the responsibility of the Liaison Committee on Medical Education (LCME).

B. Graduate Medical Education
Graduate medical education, the second phase, prepares physicians for practice in a medical specialty. Graduate medical education programs focus on the development of clinical skills and professional competencies. The programs are generally based in hospitals and, in most specialties, utilize both inpatient and ambulatory settings, reflecting the importance of care for adequate numbers of patients in the graduate medical educational experience. Graduate medical education programs, including Transitional Year Programs, are usually called residency training programs, and the physicians training in them, residents.

A resident takes on progressively greater responsibility for patient care throughout the course of a residency, consistent with individual growth in clinical experience, knowledge, and skill. The single most important responsibility of any program of graduate medical education is to provide an organized educational program with guidance and supervision of the resident, thus facilitating the resident's professional and personal development while ensuring safe and appropriate care for patients.

The training of residents relies primarily on learning acquired through the process of their providing patient care under supervision. The quality of the training experience depends on the quality of patient care. Educational quality and patient care quality are interdependent and must be pursued in such a way that they enhance rather than interfere with each other. A proper balance must be maintained so that a program of graduate medical education does not rely on residents to meet patient care needs at the expense of educational objectives.

A resident is prepared to undertake independent medical practice on satisfactory completion of a residency. Residents in a specialty typically also complete training requirements for certification by a specialty board.

The accreditation of graduate medical education programs is the responsibility of the Accreditation Council for Graduate Medical Education (ACGME), the Residency Review Committees (RRCs) for the various specialties, and the Transitional Year Review Committee. Further information on the ACGME and the RRCs is provided below.

C. Continuing Medical Education
Continuing medical education (CME), formerly called postgraduate medical education, is the third phase of medical education. This phase continues the specialty education begun in graduate training; it reflects the commitment to life-long learning inherent in all professions.
II. Accreditation of Graduate Medical Education Programs

A. Accreditation, Certification, and Licensure

In the context of graduate medical education, accreditation is the process for determining whether a training program conforms to established educational standards. Accreditation represents a professional judgment about the quality of an educational program. Decisions about accreditation are made by the specialty-specific Residency Review Committees (RRCs) or the Transitional Year Review Committee under the general authority of the ACGME.

Certification, in contrast, is the process for determining whether an individual physician has met established requirements within a particular specialty. This process is conducted by the respective specialty board that is a member of the American Board of Medical Specialties.

Licensure is distinct from both accreditation and certification. Licensure is a process of state government through which an individual physician is given permission to practice medicine within a particular state. Medical licenses are granted by the Board of Medical Examiners (or the equivalent) in each licensing jurisdiction (the fifty states, the District of Columbia, Guam, Puerto Rico, and the Virgin Islands).

B. Accreditation of Residency Programs

Accreditation of residency programs is a voluntary process. By participating in the process, residency programs undergo regular review. The review helps programs in their goals of attaining and maintaining educational excellence. The review also serves to inform the public, specialty boards, residents, and medical students whether specific residency programs are in substantial compliance with the standards that have been established for graduate medical education.

For a program to become accredited, the sponsoring institution must demonstrate a commitment to graduate medical education and compliance with the Institutional Requirements and must assume responsibility for the educational quality of its sponsored program(s). (Further information concerning a “sponsoring institution” is provided below.)

The program must then demonstrate that it is in substantial compliance with the Institutional Requirements as well as with the Program Requirements applicable to residency programs within a particular specialty or to transitional year programs.

The Institutional Requirements, which have been established by the ACGME, apply to all institutions that sponsor programs in graduate medical education. An assessment of whether institutions fulfill these requirements is made during the ACGME Institutional Review and/or in the process of review of their residency programs.

The Program Requirements are developed by each RRC for programs in its specialty and by the Transitional Year Review Committee. The Program Requirements specify essential educational content, instructional activities, responsibilities for patient care and for supervision, and the necessary facilities of accredited programs in a particular specialty. In developing and updating Program Requirements, an RRC obtains comments on the proposed documents from interested parties and agencies. The RRC then decides on the final proposal to be submitted to the ACGME. The Transitional Year Review Committee develops its Program Requirements in a similar way. The ACGME has final authority for approving all Program Requirements.

Accreditation actions taken by the RRCs are based on information submitted by program directors and on the reports of site visitors. Actions of the committees, under the authority of the ACGME, determine the accreditation status of residency programs.

The ACGME is responsible for adjudication of appeals of adverse decisions and has established policies and procedures for such appeals.

Current operating policies and procedures for review, accreditation, and appeal are contained in the ACGME Manual of Policies and Procedures for Graduate Medical Education Review Committees. The Manual is reviewed annually and is revised as appropriate. A copy of the Manual, as well as copies of the Institutional Requirements and of the Program Requirements, may be obtained from: Office of the Executive Director, Accreditation Council for Graduate Medical Education, 515 N State St/Suite 2000, Chicago, IL 60610.

Information concerning whether a residency program is accredited may be obtained by contacting the Executive Director of the ACGME.

C. Structure of the Accreditation Council for Graduate Medical Education and of the Residency Review Committees

1. The ACGME is a voluntary association formed by five member organizations. Its member organizations are national professional bodies, each of which has major interests in and involvement with residency training.

   The five member organizations of the ACGME are as follows:
   - American Board of Medical Specialties
   - American Hospital Association
   - American Medical Association
   - Association of American Medical Colleges
   - Council of Medical Specialty Societies

   Each member organization selects four representatives to the ACGME. The representatives of the member organizations in turn select two public members. The public members may vote on all ACGME business.

   The Resident Physician Section of the American Medical Association, with the advice of other national organizations that represent residents, selects a resident representative to the ACGME. The resident representative has voting privileges.

   The Secretary of the U.S. Department of Health and Human Services designates a representative of the federal government to the ACGME. The federal representative does not have a vote.

   The Chair of the RRC Council, an advisory body to the ACGME, sits with the representatives of the member organizations and official observers as the representative, without vote, of the RRC Council.

2. There is an RRC for each of the specialties in which certification is offered by a specialty board that is a member of the American Board of Medical Specialties. Each RRC is sponsored by the American Medical Association's Council on Medical Education, by the Board that certifies physicians within that specialty, and, in most cases, by the professional College or other professional association within the specialty.

   The Transitional Year Review Committee, which accredits 1 year of graduate medical education consisting of rotations in multiple clinical disciplines, is appointed directly by the ACGME.

   The RRCs and their sponsoring organizations are listed in the chart on page 3.
### Residency Review Committee Sponsoring Organizations

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<th>Residency Review Committee</th>
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### III. Glossary of Selected Terms Used in Graduate Medical Education Accreditation

**Institution:** An established formal organization having the primary purpose of providing educational and health care services (e.g., a university, a medical school, a hospital).

**Sponsoring Institution:** The entity that assumes final responsibility for a program of graduate medical education. Most GME programs are undertaken by specific clinical departments within a hospital or other health care institution; a hospital is usually the "sponsoring institution" for a program.

**Participating Institution:** A unit that provides specific learning experiences within a multi-institutional program of graduate medical education.

**Consortium:** A group of formal health care organizations, established to pursue objectives (e.g., graduate medical education) that are beyond the resources of any one member. If a consortium is itself formally organized into an ongoing organizational entity with a commitment to graduate medical education, it may serve as a "sponsoring institution" for GME programs.

**Program:** The unit of specialty training, comprising a graded series of learning experiences in graduate medical education, that is evaluated for accreditation.

**Intern:** Historically "intern" was used to designate individuals in the first post-MD year of hospital training; less commonly it designated individuals in the first year of any residency program. Since 1975 the Graduate Medical Education Directory and the ACGME have not used the term, instead referring to individuals in their first year of training as residents.

**Resident:** An individual at any level of graduate medical education in a program accredited by the ACGME. Trainees in subspecialty programs are specifically included.

**Fellow:** A term used by some hospitals and in some specialties to designate trainees in subspecialty GME programs. The Graduate Medical Education Directory and the ACGME use "resident" to designate all GME trainees in ACGME-accredited programs.

**Must:** A term used to indicate that something is required, compelled, mandatory, or should be done without fail. It connotes an absolute requirement.
Institutional Requirements

I. Institutional Organization and Commitment

Institutions that sponsor graduate medical education programs must be appropriately organized for the conduct of such education in a scholarly environment and be committed to excellence in both education and medical care.

A. Sponsoring Institution

1. A residency program must operate under the aegis of a sponsoring institution (see definition for sponsoring institution).
2. There must be a written statement of institutional commitment to graduate medical education that is supported by the governing authority, the administration, and the teaching staff.
3. Sponsoring institutions must comply with the Institutional Requirements and must ensure that their ACGME-accredited programs comply with the Program Requirements.
4. An institution's noncompliance with the Institutional Requirements may jeopardize the accreditation of its residency programs.

B. Educational Administration

There must be an organized administrative system to oversee all residency programs sponsored by an institution.
1. Institutions must have a Graduate Medical Education Committee that has the responsibility for advising on and monitoring all aspects of residency education. Membership on the Committee should include the directors of general specialty residency programs, faculty, and residents.
2. The Committee must meet regularly; minutes must be kept and be available for inspection by accreditation personnel.
3. The Committee shall advise on and monitor the following:
   a. Establishment of institutional policies for graduate medical education as detailed in this set of requirements.
   b. Establishment and maintenance of appropriate liaison with residency directors and with the administrators of other institutions participating in programs sponsored by the institution.
   c. Regular review of all residency training programs in relation to their compliance with institutional policies and the program requirements of the relevant ACGME review committee.
   d. Establishment and implementation of policies and procedures for the selection, evaluation, promotion, and dismissal of residents.
   e. Establishment and implementation of institutional policies and procedures for discipline and the adjudication of complaints and grievances relevant to the graduate medical programs. These policies and procedures must satisfy the requirements of fairness and of due process; they must apply equally to all residents, faculty, and residency programs in the sponsoring and participating institutions.
   f. Assurance of appropriate and equitable funding for resident positions, including benefits and support services.
   g. Appropriate working conditions and duty hours of residents.
   h. Regular review of ethical, socioeconomic, medical/legal, and cost-containment issues that affect graduate medical education.

C. Institutional Agreements

Formal arrangements must be made between a sponsoring institution and any other participating institutions or organizations for the provision of services to the sponsor's graduate medical education programs. Such arrangements must be approved by these sponsoring and participating institutions in written agreements that:
1. Identify a single director for each sponsored program and outline the director's responsibility and authority for program activities in all participating institutions;
2. Identify the teaching staff responsible for the instruction and supervision of residents in each institution;
3. Specify institutional support for the educational goals of each sponsored program;
4. Detail the period of assignment of residents to the segment of a program provided at each institution, together with any criteria of assignment; and
5. Detail each participating institution's financial commitment to the direct support of each program.

D. Accreditation for Patient Care

Institutions conducting graduate medical education programs should be accredited by the Joint Commission on the Accreditation of Healthcare Organizations (JCAHO) or provide satisfactory explanation of why accreditation has not been either granted or sought.

E. Quality Assurance

Institutions participating in graduate medical education must conduct formal quality assurance programs and review complications and deaths.
1. Residents must be informed of the institution's organization for, and methods of, providing quality assurance. They should participate in the quality assurance activities of the clinical services to which they are assigned.
2. As part of the educational program, it is important that all deaths be reviewed and that autopsies be performed whenever possible. Autopsies must be performed in sufficient number to provide an adequate educational experience and to enhance the quality of patient care.
3. Institutions participating in graduate medical education must have a medical records system that not only documents the patient's illness, course, and care but is adequate to support the education of residents and quality assurance activities and to provide a resource for appropriate scholarly activity.

F. Compliance with ACGME Policies and Procedures

Sponsoring institutions must ensure that their ACGME-accredited programs comply with ACGME policies and procedures. Of particular note are those policies and procedures that govern Administrative Withdrawal of Accreditation, an action that is not subject to the usual appeals process:
1. A program may be deemed to have withdrawn from the voluntary ACGME accreditation process, and an RRC may withdraw accreditation, if the program does not comply with:
   a. Site visit and program review policies and procedures;
   b. Directives associated with an accreditation action; or
   c. Requests by the RRC for information.
2. A program that is judged to be delinquent in payment of fees is not eligible for review and will be notified by certified mail, return receipt requested, of the effective date of the withdrawal of accreditation. On that date, the program will be removed from the list of ACGME-accredited programs.
II. Residents

A. Resident Eligibility and Selection

The institution must have formal procedures for the recruitment and appointment of residents that comply with the requirements listed below, and it must monitor the compliance of each program with these procedures.

1. Resident Eligibility

   Applicants with one of the following qualifications are eligible for appointment to accredited residency programs:
   a. Graduates of medical schools in the United States and Canada accredited by the Liaison Committee on Medical Education (LCME).
   b. Graduates of medical schools in the United States and Canada accredited by the American Osteopathic Association (AOA).
   c. Graduates of medical schools outside the United States and Canada who meet one of the following qualifications:
      1. Have received a currently valid certificate from the Educational Commission for Foreign Medical Graduates or
      2. Have a full and unrestricted license to practice medicine in a US licensing jurisdiction.
   d. US citizen graduates from medical schools outside the United States and Canada who cannot qualify under II.A.1.c, but who have successfully completed the licensure examination in a US jurisdiction in which the law or regulations provide that a full and unrestricted license to practice will be granted without further examination after successful completion of a specified period of graduate medical education.
   e. Graduates of medical schools in the United States and its territories not accredited by the LCME but recognized by the educational and licensure authorities in a medical licensing jurisdiction who have completed the procedures described in paragraph II.A.1.d.
   f. Graduates of medical schools outside the United States who have completed a Fifth Pathway program provided by an LCME-accredited medical school.

2. Resident Selection

   a. Programs should select from among eligible applicants on the basis of their preparedness and ability to benefit from the program to which they are appointed. Aptitude, academic credentials, personal characteristics, and ability to communicate should be considered in the selection.
   b. In selecting from among qualified applicants for first-year positions, institutions and all of their sponsored programs should participate in the National Resident Matching Program (NRMP). Certain programs sponsored by the federal uniformed services may be exempt.

3. Enrollment of Noneligibles

   The enrollment of noneligible residents may be a cause for withdrawal of accreditation of the involved program.

B. Resident Participation in Educational Activities

   Institutions must provide residents with an opportunity to:
   1. Develop a personal program of self-study and professional growth with guidance from the teaching staff.
   2. Participate in safe, effective, and compassionate patient care, under supervision, commensurate with their level of advancement and responsibility.
   3. Participate fully in the educational and scholarly activities of their program and, as required, assume responsibility for teaching and supervising other residents and students.
   4. Participate in institutional programs and activities involving the medical staff and adhere to established practices, procedures, and policies of the institution.
   5. Participate in institutional committees and councils, especially those that relate to patient care review activities.
   6. Participate in evaluation of the quality of education provided by the program.
   7. Develop an understanding of ethical, socioeconomic, and medical/legal issues that affect graduate medical education and of how to apply cost containment measures in the provision of patient care.

C. Provision of Resident Financial Support and Benefits

   Sponsoring and participating institutions should provide residents with appropriate financial support and benefits.
   1. Financial support of residents is necessary to ensure that residents are able to fulfill the responsibilities of their educational programs.
   2. All residents at similar levels of experience and training in all of an institution’s programs should receive a comparable level of financial support. Exceptions must be justified to the institution’s Graduate Medical Education Committee.
   3. Candidates for residencies must be fully informed of benefits, including financial support, vacations, professional leave, parental leave, sick leave, professional liability insurance, hospital and health insurance, disability insurance, and other insurance benefits for the residents and their family, and the conditions under which living quarters, meals, and laundry or their equivalent are to be provided.
   4. Liability Insurance: Residents in graduate medical education must be provided with professional liability coverage for the duration of training, and such coverage must provide legal defense and protection against awards from claims reported or filed after the completion of graduate medical education if the alleged acts or omissions of the residents are within the scope of the education program. The coverage to be provided should be consistent with the institution’s coverage for other medical/professional practitioners. Each institution must provide current residents and applicants for residency with the details of the institution’s professional liability coverage for residents.
   5. Institutions sponsoring graduate medical education must provide access to insurance, where available, to all residents for disabilities resulting from activities that are part of the educational program.
   6. There must be a written institutional policy on leave (with or without pay) for residents that complies with federal and state laws. The institution must provide residents with a written statement of policy concerning the effect of leaves of absence, for any reason, on satisfying the criteria for completion of a residency program.

D. Resident Supervision and Working Environment

   Institutions must ensure that their residency training programs provide appropriate supervision for all residents as well as a working
environment and duty hour schedule that are consistent with proper patient care and the educational needs of residents.

1. Residents must be supervised by teaching staff in such a way that the residents assume progressively increasing responsibility for patient care according to their level of training, their ability, and their experience. On-call schedules for teaching staff must be structured to ensure that supervision is readily available to residents on duty. The level of responsibility accorded to each resident must be determined by the teaching staff.

2. Each residency program must establish formal policies governing resident duty hours and working environment that are optimal for both resident education and the care of patients.
   a. Program requirements relating to duty hours and on-call schedules shall be based on an educational rationale and patient need, including continuity of care.
   b. The educational goals of the program and learning objectives of residents must not be compromised by excessive reliance on residents to fulfill institutional service obligations. Duty hours, however, must reflect the fact that responsibilities for continuing patient care are not automatically discharged at specific times. Programs must ensure that residents are provided backup support when patient care responsibilities are especially difficult or prolonged.
   c. Resident duty hours and on-call schedules must not be excessive. The structuring of duty hours and on-call schedules must focus on the needs of the patient, continuity of care, and the educational needs of the resident. Duty hours must be consistent with the Institutional and Program Requirements that apply to each program. Detailed structuring of resident service is an integral part of the approval process, and therefore close adherence to the Institutional and Program Requirements is essential to program accreditation.

E. Ancillary Support

Sponsoring institutions must provide services and develop systems to minimize the work of residents that is extraneous to their educational programs, ensuring that the following conditions are met:

1. Residents on duty in the hospital must be provided adequate sleeping quarters and food services.
2. Patient support services, such as intravenous services, phlebotomy services, and laboratory services, as well as messenger and transporter services, must be provided in a manner appropriate to and consistent with educational objectives, patient care, and cost effectiveness.
3. An effective laboratory, medical records, and radiologic information retrieval system must be in place to provide for high-quality patient care in a timely manner.
4. Security measures must be provided to residents in all locations including but not limited to parking facilities, on-call quarters, hospital and institutional grounds, and departments.

F. Conditions of Resident Employment

Sponsoring institutions must provide residents a written agreement or contract outlining the terms and conditions of their appointment to an educational program and must monitor the implementation of these terms and conditions by the program directors.

The agreement should specify the

1. resident's responsibilities,
2. financial support and benefits to be provided,
3. duration of appointment and conditions for reappointment,
4. policies regarding professional activities outside the educational program,
5. procedures for discipline and redress of grievances, and
6. policies and procedures whereby complaints of sexual harassment and exploitation may be addressed in a manner consistent with the law and due process.

G. Counseling and Support Services

Graduate medical education places increasing responsibilities on residents and requires sustained intellectual and physical effort. Therefore, institutions should facilitate resident access to appropriate and confidential counseling and psychological support services.

Institutions should have a written policy and an educational program regarding physician impairment, including substance abuse.

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Program Requirements for Residency Education in Allergy and Immunology

I. Introduction

Graduate medical education in allergy and immunology should be designed to train specialists in the delivery of skilled medical care of patients suffering from allergic, asthmatic, and immunologic diseases. This education should take place in an optimal educational environment under adequate supervision. A graduate program in allergy and immunology must offer 2 years of full-time education and must demonstrate compliance with these requirements. The provisions of the Institutional Requirements must also be met. Candidates for positions in these programs should have successfully completed a program in Internal Medicine or Pediatrics that is accredited by the Accreditation Council for Graduate Medical Education.

II. Scope of Education

A. General

Certain basic requirements must be met by all programs. Since this specialty involves an increasingly wide variety of clinical problems, programs emphasizing different disciplines may be acceptable. All programs, regardless of their special interests, must include a core curriculum in allergy and immunology.

B. Cross-training in Pediatrics and Internal Medicine

Residents must receive education in both pediatric and adult allergy and immunology. This requirement is based on the recognition that specialists in allergy and immunology, regardless of their primary specialty, are called on to diagnose and treat individuals of all ages. It is required that in institutions where separate programs exist, at least 6 months of cross-training be provided with exposure to both inpatients and outpatients. The minimal requirement for outpatient cross-training is weekly attendance, 1 day per week for a period totaling 6 months, at an ambulatory care clinic or equivalent. If block-time rotations are employed to satisfy this requirement, a longitudinal follow-up clinic should be incorporated as well. Residents must be involved in inpatient consultation initially and through follow-up as an educational experience in the crossover specialty.

C. Duration of Clinical Education

It is required that at least 25% of the resident's time in a 2-year training program be devoted to clinical education.
Program Requirements for Residency Education in Allergy and Immunology

D. Patient Population
The program should provide an adequate number of patients in the pediatric and adult age groups to provide education in the varying manifestations of allergic and immunologic diseases and asthma in the different age groups. The residents should be under the supervision of faculty and should have ample opportunity to observe interactions between attending faculty and patients. Patients worked up and followed by the residents should be reviewed by the attendings, with adequate time for discussion and constructive criticism. The residency experience must occur in an environment that fosters progressive experience and allows each resident to develop diagnostic impressions, consult appropriate literature and other source material, develop plans for diagnostic studies, recommend therapeutic approaches, and perform therapeutic procedures, all under the practiced supervision of attendings.

It is the responsibility of the program director to ensure enforcement of reasonable policies with respect to work hours. Those services requiring in-hospital on-call periods should be no more than 80 hours per week in hospital duties when averaged over 4 weeks. Residents should have, on the average, the opportunity to spend at least 1 full day out of 7 free of hospital duties and should be on call in the hospital no more often than every third night. Physicians must have personal responsibility for continuing patient care and must recognize that their obligation to patients is not automatically discharged at any given hour of the day or any particular day of the week. In no case should residents go off duty until the proper care and welfare of the patients have been ensured.

There should be adequate backup if sudden and unexpected needs create resident fatigue sufficient to jeopardize patient care during or following on-call periods. Schedules must be structured to ensure that consultation is readily available to residents. Adequate on-call rooms to provide rest and privacy must be available for each resident when assigned night duty in the hospital.

E. Graded Responsibility
The educational atmosphere should encourage creative independence and progressively increasing responsibility. As residents progress through their training, they should be encouraged to teach their junior residents, residents in internal medicine and pediatrics, medical students, nurses, and allied health personnel.

F. Resident Research
It is essential that each program contain an active research program in allergy and immunology. Residents are required to conduct clinical or basic research under the supervision of an experienced investigator. It is required that at least 25% of the resident's time in a 2-year program be devoted to research.

III. Educational Program
The program director and faculty must prepare and comply with written educational goals for the program.

A. Program Design
All educational components of a residency program should be related to program goals.
1. The program design must be approved by the Residency Review Committee (RRC) as part of the regular review process.
2. Participation by any institution providing more than 3 months of education must be approved by the RRC.

B. Program Evaluation
The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Written evaluations by residents should be utilized in this process.

C. Program Content
The emphasis in the educational program must be placed on a core curriculum of allergic, immunologic, and related diseases and all forms of asthma. All residents must be thoroughly grounded in these disorders and must be trained to apply immunologic theories, principles, and techniques to the investigation, diagnosis, and treatment of a broad spectrum of immunologic diseases. The required education in the clinical program may involve supervised patient care; rotations through cooperating services; attendance at conferences, lectures, demonstrations, or seminars; reading; and preparation and responsibilities for teaching assignments.

1. Clinical Program
A primary patient base for the specialty should include patients with rhinitis; asthma and reactive airway diseases; urticaria; angioedema; anaphylactic and anaphylactoid reactions; atopic and contact dermatitis; stingling insect hypersensitivity; drug reactions; and hypersensitivity diseases of the lung, gastrointestinal tract, and other organs. Residents should become familiar with common and rare manifestations and methods of evaluation and diagnosis, as well as the etiology and immunopathogenesis, differential diagnosis, therapy, and complications of these disorders. Training in aerobiology and in the dermatologic, gastroenterologic, opthalmologic, otolorhinolaryngologic, psychiatric, and radiologic aspects of allergic and immunologic diseases should be part of the program. It is also expected that training will include acute, emergent care of inpatient and outpatient allergic, asthmatic, and immunologic disorders. The following outline summarizes the scope of knowledge and/or skills that must be included in the educational program.

a. Hypersensitivity diseases
1. Proper history and physical examination, with particular emphasis on the examination of the ears, nose, throat, skin, and lungs
2. The performance and evaluation of epicutaneous, intracutaneous, and patch skin tests
3. Pulmonary physiology and the performance and interpretation of pulmonary function tests
4. The performance and interpretation of oral, nasal, and bronchial provocation tests
5. Knowledge of mediator release and function
6. The performance and interpretation of in vitro methods used to measure total and specific IgE
7. Pharmacology of agents used in the routine and/or emergency treatment of asthmatic, allergic, immunologic, and related disorders
8. Preparation and standardization of allergenic extracts and the principles and practice of their use in diagnostic tests and immunotherapy
9. Knowledge of aerobiology of inhalant allergens
10. Identification and environmental control of antigen and irritant exposures at home and in the work place

b. Primary and Secondary Immunodeficiency states
The educational program must provide opportunities for the resident to develop knowledge of the inherited and acquired immunodeficiency diseases and diseases in which host defense mechanisms are abnormal. The resident must be familiar with the etiology, immunopathophysiology, and methods to diagnose and treat these diseases. The following outline summarizes the scope of knowledge and/or skills that should be included in the program:

1. Collagen vascular diseases
   The educational content should include training in collagen vascular diseases and other systemic disorders in which im-
munologic mechanisms are presumed to have an etiologic or contributory role.

2. Transplantation immunology
The trainee should be knowledgeable about the immunogenetics of the major histocompatibility system, the immunologic principles of transplantation and rejection, and graft versus host reactions.

3. Malignancies affecting the immune system
The trainee should be familiar with the pathogenesis, diagnosis, and treatment of malignancies that affect immune function.

4. Immunomodulation
Some experience and knowledge of specific and nonspecific immunomodulating agents are desirable.

5. Immunologic aspects of other diseases
The resident's training should be sufficient to ensure knowledge of the immunologic aspects of all organ systems and diseases.

2. Laboratory Program
The educational content in applied immunology must include knowledge of the principles, techniques, and interpretation of clinical immunology laboratory procedures, including the following:

a. Humoral immunity
   Measurement of immunoglobulin levels, immunoglobulin classes and subclasses, specific antibody determinations, protein electrophoresis and immunoelectrophoresis

b. Cellular immunity and host defense
   1. Performance of skin tests involving cell-mediated responses
   2. Evaluation of energy
   3. Assays of neutrophil chemotaxis, phagocytosis, and killing
   4. Identification and enumeration of T cells and their subsets, B and null cells, measurement of the responses of these cells to mitogens and antigens

5. Performance of assays for lymphocytes
6. Assessment of direct and antibody-mediated cellular cytotoxicity

7. Detection and analysis of immune complexes and cryoprecipitate proteins

8. Determination of total serum complement and components of the classical and alternative pathways

9. Histocompatibility testing
10. Preparation and use of monoclonal antibodies
11. Serologic or cellular markers of autoimmune, allergic, or other immune disorders
12. Other tests of immune response as they develop and gain clinical relevance

D. Research Program
A critical aspect of the educational program is its research environment, which provides for development of a questioning attitude and the opportunity to develop research protocols and to learn to analyze research critically. There must be evidence of a commitment to research and investigation in allergy and clinical immunology and ongoing active research by the faculty with investigation into clinical and basic aspects of various related problems. Residents must take part in research programs that occupy 25% of their time during a 2-year period. Ideally, residents should help design, conduct, evaluate, and prepare for publication a clinical or laboratory research project in the area of allergy and clinical immunology. The completion of a research project during the program is strongly encouraged. Residents should be able to communicate their knowledge to others both orally and in written form; to conduct lectures, seminars, and clinical conferences; and to prepare written reports of their research activities, either for faculty review or for publication.

IV. Program Personnel
The program director and the faculty are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director
The program director is responsible for the residency program and should be highly competent as a scientist, clinician, and teacher in the specialty of allergy and immunology. The director must possess leadership qualities and maintain close contact with the residents, contributing sufficient time to the training program to ensure adequate leadership. The program director, or qualified designee, must be available to provide advice and instruction on a continuous basis. There must be a single program director responsible for the program.

1. Qualifications of the program director include:
   a. Requisite and documented clinical, educational, and administrative abilities and experience.
   b. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)
   c. Certification by the American Board of Allergy and Immunology or suitable equivalent qualifications.
   d. Appointment in good standing to the medical staff of an institution participating in the program.

2. Responsibilities of the program director include:
   a. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of education and for each major rotation or other program assignment. This statement must be distributed to residents and members of the faculty. It should be readily available for review.
   b. Selection of allergy and immunology residents for appointment to the program in accordance with institutional and departmental policies and procedures.
   c. Selection and supervision of the faculty and other program personnel at each institution participating in the program.
   d. Supervision of residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the faculty. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.
   e. Regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician.
   f. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.
   g. Monitoring residents' stress, including mental or emotional conditions inhibiting performance or learning and drug or alcohol-related dysfunction. Program directors and faculty should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.
   h. Preparation of an accurate statistical and narrative description of the program as requested by the RRC.
   i. The Executive Secretary of the RRC for Allergy and Immunology should be notified promptly of changes in faculty in the pro-
gram. This information should also be provided or the annual questionnaire that is distributed by the RRC.

B. Faculty

1. A sufficient number of faculty must be incorporated into the program to ensure proper teaching and supervision in the many disciplines of the field. The faculty must include qualified allergists trained in internal medicine and qualified allergists trained in pediatrics, as well as faculty whose major interests are in basic and clinical aspects of immunology. One mechanism to satisfy this requirement would be to incorporate a number of faculty from both basic and clinical science departments who are able to provide expert training in each of the disciplines. All faculty must demonstrate commitment to the program and possess those special competencies in teaching and research needed to provide a broad educational experience. Program directors and faculty are strongly encouraged to take the recertification examination of the ABAL periodically.

2. All members of the faculty must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.

3. A member of the faculty of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

4. The faculty must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

5. The faculty should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

C. Other Program Personnel

Programs must be provided with the additional professional, technical and clerical personnel needed to support the administration and educational conduct of the program.

D. Scholarly Activities

Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility.

The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the faculty. While not all members of a faculty must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:

1. Active participation of the faculty in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.

2. Participation in journal clubs and research conferences.

3. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations’ meetings and publication in their journals.

4. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.

5. Offering of guidance and technical support (e.g., research design, statistical analysis) for residents involved in research.

6. Provision of support for resident participation in scholarly activities.

7. Participating in their own continuing medical education. A faculty that does not exhibit such characteristics will be cause for grave concern as to its adequacy and suitability for conducting a program of graduate education in allergy and clinical immunology.

V. Institutional Resources

A. Sponsoring Institution

Allergy and immunology programs should be conducted in sponsoring institutions with accredited graduate medical education programs in pediatrics and internal medicine. The sponsoring institution must ensure financial, technical, and moral support and the facilities for the establishment and maintenance of an accredited residency in allergy and immunology.

B. Participating Institutions

Affiliations with other institutions may be necessary to ensure graduate education in the broad fields of both pediatric and adult allergy and immunology. When the resources of two or more institutions are utilized for the clinical or basic science education, letters of agreement must be approved by the institutional governing boards. Affiliations should be avoided with institutions that (1) are at such a distance from the sponsoring institution as to make attendance at rounds and conferences difficult and (2) do not add to the educational value of the program.

C. Other Facilities

1. Adequate facilities and equipment for the diagnosis and treatment of allergic and immunologic disorders must be conveniently available.

2. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.

3. Library services should include the electronic retrieval of information from medical databases.

4. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

VI. Evaluation

A. Resident Evaluation

The program director, with participation of members of the faculty, shall:

1. At least semiannually evaluate the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures.

2. Communicate each evaluation to the resident in a timely manner.

3. Advise residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.

4. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.

5. Provide a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident’s performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident’s permanent record maintained by the institution.
Program Requirements for Residency Education in Allergy and Immunology

II. Personnel

A. Program Director
The program director and faculty are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation. There must be a single program director responsible for the program.

1. Qualifications of the program director include:
   a. Competence as a scientist, clinician, and teacher in the field of CLI. The director must possess leadership qualities and have the authority to organize the program. This individual must maintain close contact with the program participant(s), contributing sufficient time to ensure adequate teaching and guidance. The director, or a qualified designee, must be available to provide advice and instruction to the trainee(s) on a day-to-day basis.
   b. Certification by the American Board of Allergy and Immunology or by a board in an immunologically related subspecialty of internal medicine or pediatrics or possession of suitable equivalent qualifications. In addition, the director should have a certificate in CLI or must demonstrate suitable equivalent qualifications.
   c. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)
   d. Appointment in good standing to the medical staff of an institution participating in the program.

2. Responsibilities of the program director include:
   a. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.
   b. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.
c. Selection and supervision of the faculty and other program personnel at each institution participating in the program.

d. Supervision of residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.

e. Evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician.

f. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.

g. Monitoring residents' stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.

h. Preparation of an accurate statistical and narrative description of the program as requested by the RRC.

B. Faculty

1. There must be a sufficient number of faculty with documented qualifications to instruct and supervise adequately all the residents in the program. The faculty must possess special competencies in the laboratory procedures currently used in clinical immunology and be able to provide the broad educational experience necessary for the interpretation of laboratory results. Members of the faculty must be able to devote sufficient time to meet their supervisory and teaching responsibilities.

2. All members of the faculty must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.

3. A member of the faculty of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

4. The faculty must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

5. The faculty should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the faculty, and the quality of supervision of residents.

C. Other Program Personnel

Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

III. Institutional Resources

A. Facilities

The CLI program must be supported by an adequate administrative and technical staff and have appropriate laboratory space available. In most instances this means the presence of an ongoing and operational diagnostic immunology laboratory in which a wide variety of immunologic tests are being performed on a routine basis utilizing state-of-the-art equipment. The laboratory should employ modern record-keeping procedures to ensure timely return of laboratory results and adequate storage of data.

B. Clinical Resources

The program should be in a setting in which there are sufficient clinical resources to ensure a large enough pool of patients to contain the full spectrum of immunologic disorders, and these patients should be available to the trainees for teaching purposes.

C. Library

1. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.

2. Library services should include the electronic retrieval of information from medical databases.

3. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

IV. Educational Program

A. Curriculum

1. The educational goals must be defined in appropriate documents and must be available to prospective and current trainees as well as to all faculty members involved in the program. Such goals must be defined not only for broad objectives but also for individual rotations, both inside and outside the main teaching laboratory. These goals must address the question of graded responsibility within the program, methods of trainee evaluation, and means of involving trainees in diagnostic immunology consultation.

2. The curriculum should include a combination of practical and didactic training that addresses a number of different areas of CLI. The core areas forming a central part of every CLI program must involve training in the theoretical and practical aspects of quantifying immunoglobulins, immunoserologic testing, detection of autoantibodies, immunofluorescent and immunoperoxidase techniques, the study of lymphocyte phenotypes and functions, the use of monoclonal antibodies, ELISA (enzyme-linked immunosorbent assay) and radiomunoassay techniques, and the use of serologic methods for the detection of HIV (human immunodeficiency virus) infections.

3. In addition, there must be training in assays of immune complexes and the procedures for the measurement of complement components. These core areas should be supplemented by several additional important areas, which may be covered by organized conferences. These include training in methods of in vitro allergy testing, molecular genetic techniques as applied to immunologic diagnosis, immunohematology, procedures for the rapid diagnosis of infectious diseases, evaluation of phagocyte functions, histocompatibility testing, and the detection and quantification of tumor antigens. The trainee must gain experience in the proper selection of laboratory procedures for the most efficient evaluation of immunologic disease.

4. Such training should include discussion of controversial immunodiagnostic techniques so that the resident will be able to make a rational determination regarding the scientific merit of such tests. In addition, the program must include education in the principles of quality control, laboratory management, and interaction with regulatory agencies.
B. Seminars and Conferences
Trainees must attend seminars and conferences that are conducted on a regular basis and that must be of adequate quantity and quality to ensure an interchange of teaching within the various disciplines of clinical immunology. These conferences must include discussions of basic immunology; allergy; immunodeficiency disorders; and the immunologic aspects of rheumatology, pulmonology, gastroenterology, nephrology, hematology-oncology, endocrinology, cardiology, neurology, and infectious diseases.

C. Teaching Rounds/ Clinical and Basic Science/Didactic Teaching
Trainees in CLI should attend appropriate clinical rounds and other didactic teaching sessions outside the CLI program itself. In addition, they should have access to prepared teaching materials on clinical and basic immunology.

D. Program Research and Scholarly Activity
Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the faculty. While not all members of a faculty must be investigators, the faculty as a whole must demonstrate broad involvement in scholarly activity. This activity should include:

1. Active participation of the faculty in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.
2. Participation in journal clubs and research conferences.
3. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.
4. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.
5. Offering of guidance and technical support (e.g., research design, statistical analysis) for residents involved in research.
6. Provision of support for resident participation in scholarly activities.

V. Evaluation
A. Resident Evaluation
The program director, with participation of members of the faculty, shall:
1. Semiannually evaluate the knowledge, skills, and professional growth of the resident, using appropriate criteria and procedures.
2. Communicate each evaluation to the resident in a timely manner.
3. Advise resident to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.
4. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.
5. Provide a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.

B. Program Evaluation
1. There should be formal provision for evaluation of the educational program by the faculty and residents.
2. Review of performances of past trainees on the written examination of CLI will be employed by the RRC as one measure of the quality of the program.

C. Miscellaneous
Programs are required to notify the committee of major programmatic change, i.e., change in program director, addition or deletion of participating institutions, and changes in numbers of trainees. The committee retains the prerogative to assess the impact of such change(s) upon the quality of the education offered to the trainees.

VI. Certification
Residents who plan to seek certification by the American Board of Allergy and Immunology in Clinical Laboratory Immunology should communicate with the executive secretary of the board to ascertain the full requirements.

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Program Requirements for Residency Education in Anesthesiology

I. Objectives
Anesthesiology is a discipline within the practice of medicine specializing in the medical management of patients who are rendered unconscious or insensible to pain and emotional stress during surgical, obstetrical, and certain other medical procedures. Anesthesiology involves the preoperative, intraoperative, and postoperative evaluation and treatment of these patients, including specialized care in (a) pain management, (b) cardiopulmonary resuscitation, (c) respiratory care problems, and (d) management of critically ill and/or injured patients in special care units. Subspecialty training within the discipline plus investigative efforts has proven to be vital to the progress of the specialty.

An accredited program in anesthesiology provides education, training, and experience in an atmosphere of mutual respect between instructor and resident so that residents will be stimulated and prepared to apply acquired knowledge and talents independently. Varying pathways lead to the development of a consultant anesthesiologist, and the following requirements represent the minimum standards for its accomplishment.

II. General Considerations for an Accredited Program
The director and teaching staff of a program must prepare and comply with written educational goals for the program. All educational components of a residency program should be related to program goals. The program design and/or structure must be approved by the Residency Review Committee (RRC) for Anesthesiology as part of the regular review process.

Participation by any institution providing more than 6 months of training must be approved by the RRC.

When a new director, either permanent or acting, has been appointed, the RRC must be notified immediately. The RRC will initiate an inspection of the program in conjunction with this change when it deems it necessary to ensure continuing quality. Where didactic programs of several anesthesiology residencies are com-
bined, the staff of each accredited program must actively and consistently participate in the combined effort and be capable of providing an adequate program if reviewed individually.

The RRC for Anesthesiology and the Accreditation Council for Graduate Medical Education (ACGME) accredit programs only in those institutions that possess the educational resources to provide three years of clinical anesthesia. At the present time, capability to provide the clinical base year within the same institution is desirable, but not required for accreditation.

III. Clinical Base Year

A minimum of 4 years of graduate medical education is necessary to train a physician specializing in this field. Three years of this training must be in clinical anesthesia. One year of the total training must be the clinical base year, which should provide the resident with 12 months of clinical education in medical disciplines other than that directly associated with the administration of anesthesia. The clinical base year is usually the first year of graduate medical education. If an accredited anesthesiology program offers this year, the RRC will verify that the content is acceptable, i.e., training in internal medicine, pediatrics, surgery or a surgical specialty, obstetrics and gynecology, neurology, family practice, or any combination of these approved for the individual resident by the anesthesiology program director.

IV. Clinical Anesthesia (CA 1-3)

A. These 3 years, usually the second through the fourth years of graduate medical education, consist of training in basic anesthesia, subspecialty anesthesiology, and advanced anesthesiology. The graded curriculum increases in difficulty and progressively challenges the resident's intellect and technical skills. No more than 6 months during the first 2 clinical anesthesia years and a maximum of 12 months during the 3 years of clinical anesthesia may be spent outside the parent program in affiliated institutions.

B. Experience in basic anesthesia training must emphasize the fundamental aspects of anesthesiology. At least 12 months of the CA-1 and CA-2 years should be spent in basic anesthesia training with the majority of this time occurring during the CA-1 year. Basic anesthesia training should be planned in a graded fashion. Early months will generally be devoted to the care of patients who are easily managed and who undergo relatively uncomplicated surgical procedures. As residents progress through the program they should have the opportunity to learn to plan and to administer anesthesia care for patients with more severe and complicating diseases, as well as for those who undergo more complex surgical procedures.

C. Subspecialty anesthesia training experience emphasizes the theoretical background, subject material, and practice of subspecialties of anesthesiology. These include obstetric anesthesia, pediatric anesthesia, cardiovascular anesthesia, neuroanesthesia, recovery room care, anesthesia for outpatient surgery, regional anesthesia, pain management, and critical care. These experiences should be organized into subspecialty rotations and should occupy a minimum of 7 months of the CA-1 and CA-2 years. The program director may determine the sequencing of these rotations. Teaching shall be provided by faculty with expertise in the subspecialty involved.

An acceptable critical care rotation must include active participation in patient care by anesthesia residents, active involvement by faculty experienced in the practice and teaching of critical care, and an appropriate population of critically ill patients that includes a substantial number with multisystem disease whose care requires invasive monitoring or mechanical ventilation. This training should take place in units in which the majority of such patients require continuity of intensive care for longer than 1 or 2 days. Training may occur in one or more units that house a population of patients as described above. Experience in routine, short-term, or overnight postanesthesia units or intermediate step-down units or emergency rooms does not fulfill this recommendation.

D. The CA-3 year constitutes experience in advanced anesthesia training. The program must have the resources and an organized plan to provide the advanced clinical track, subspecialty clinical track, and clinical scientist track. The program director, in collaboration with the resident, will select one of the three tracks. Regardless of the track selected, resident assignments in the CA-3 year should include difficult or complex anesthesia procedures and the care of seriously ill patients. These tracks must not prevent residents in the CA-1-2 years from gaining proper exposure to the subspecialty areas or their principles of practice.

The advanced clinical track must provide a minimum of 9 months of experience in advanced and complex clinical anesthesia assignments. The remaining 6 months may be in one to three selected subspecialty rotations, or, alternatively, additional complex clinical anesthesia assignments may be offered.

The Subspecialty Clinical Track must allow the following options: 9 to 12 months’ experience in one subspecialty rotation, along with up to 3 months of advanced experience in complex anesthesia assignments may be offered. Alternatively, 6 months’ experience in each of two subspecialty rotations may be offered. Such rotations may include some time assigned to medical or surgical activities directly related to the anesthetic subspecialty.

The clinical scientist track must offer 6 months of experience in advanced and complex clinical anesthesia assignments or, alternatively, in one selected anesthesia subspecialty rotation. The remaining 6 months will be devoted to laboratory or clinical investigation.

V. Program Personnel

The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director

There must be a single program director responsible for the program. The department chair must be the program director. The program director shall be certified by the American Board of Anesthesiology or have equivalent qualifications, and must possess faculty experience, leadership, organizational and administrative qualifications, and the ability to function effectively within an institutional governance. The program director also must be licensed to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)

Responsibilities of the program director include:

1. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be
distributed to residents and members of the teaching staff. It should be readily available for review.

2. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.

3. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program.

4. Supervision of residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.

5. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.

6. Preparation of an accurate statistical and narrative description of the program as requested by the RRC.

B. Other Teaching Staff

It is critical to an effective program that the faculty demonstrate dedication to the motivation, instruction, education, and evaluation of residents; support of the goals and objectives of the program; a commitment to their own continuing medical education; and participation in scholarly activities. The faculty must include instructors with varying interests, capabilities, and backgrounds. The faculty should include individuals who have specialized training in a significant majority of recognized subspecialties. It is also desirable to have faculty with special expertise and knowledge in computer science and biophysics. Participation in a spectrum of professional activities within the institution and beyond, in local, national, and international associations, must also be evident. An education committee, a clinical competence committee, a resident selection committee, and procedures for quality assurance and peer review must be included in the organization of the program.

The number of faculty must be sufficient to provide each resident with adequate supervision that shall not vary substantially with the time of day or day of the week. The number of residents in any program must not exceed twice the number of faculty in the parent and integrated institutions. In the clinical setting, faculty members should not direct anesthesia for more than two operating rooms simultaneously. Teaching of medical students and junior residents represents a valid learning experience. However, the use of a resident as an instructor of junior residents must not substitute for experienced faculty. Clinical instruction of residents by nonphysician personnel is considered inappropriate, as is excessive supervision of such personnel by resident staff.

A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

C. Other Program Personnel

Programs must be provided with additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

The integration of nonphysician personnel in a department with an accredited program in anesthesiology will not influence the accreditation of such a program unless evidence arises that such personnel interfere with the training of resident physicians. Interference may result from dilution of faculty effort, dilution of the available teaching experience, or downgrading of didactic material.

VI. Program Research and Scholarly Activity

Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity.

This activity should include:

1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.

2. Participation in journal clubs and research conferences.

3. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.

4. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.

5. Offering of guidance and technical support (e.g., research design, statistical analysis) for residents involved in scholarly activities.

VII. Library

Residents must have ready access to a major medical library with a representative selection of books and journals related to anesthesiology, either at the institution where the residents are located or through arrangement with convenient nearby institutions.

Library services should include the electronic retrieval of information from medical databases. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

VIII. Clinical Experience

Through the parent hospital and/or limited affiliated institutions, a wide spectrum of patient problems should be available in adequate numbers to each resident to provide broad experience in the anesthetic management of patients undergoing all types of surgical procedures. Adequate exposure to specialized areas such as neurosurgical, pediatric, obstetric, and cardiothoracic procedures, as well as clinical experience in anesthesia for outpatients, is essential. A specific number of anesthetics is not required in any category, but the program director must ensure that each resident receives broad instruction and experience. An educational program must be directed toward the production of a consultant capable of making sound judgments throughout the perioperative period. During anesthesia and in the perioperative period, the resident must be instructed in current monitoring procedures, fluid therapy, pain management, and operating room safety. Resident instruction and experience in the management of acute and chronic pain problems, including diagnostic and therapeutic nerve blocks, represent essential parts of any training program, as does the management of resuscitation and airway problems. Residents should be familiar with techniques of sedation and anesthesia for a variety of diagnostic and therapeutic procedures outside the operating room.

A comprehensive anesthesia record must be maintained for each patient as an ongoing reflection of the drugs administered, the monitoring employed, the techniques used, the physiologic variations observed, the therapy provided as required, and the fluids administered. The patient's medical record should include evidence of pre- and postoperative anesthesia assessment. When residents participate in patient care outside the operating room, they should re-
receive instruction in proper record keeping for the activity involved, and the faculty should review their records.

**IX. Didactic Program**

The didactic instruction provided should encompass anesthesiology, including the basic sciences and other clinical disciplines as they relate to anesthesiology. Regularly scheduled teaching sessions must be held to supplement ongoing clinical instruction. The organization of the didactic program should demonstrate appropriate continuity and sequencing of anesthesia-related topics. The number and type of such sessions may vary among programs, but they ordinarily include morbidity-mortality conferences, lectures, discussions, seminars devoted to journal review, and resident presentations. Organization of the residency program should allow time for resident reading and study. Recent journals, reference books, and other texts must be readily available to the residents and faculty. A suitable climate should exist for the development of a competent physician and consultant anesthesiologist who will continue learning after having completed formal training. The director should seek to enrich the program through the participation of faculty from the other disciplines and from other institutions.

**X. Resident Duty Hours**

While the actual number of hours worked by residents may vary, residents should have sufficient off-duty time to avoid undue fatigue and stress. Residents should be allowed to spend, on average, at least 1 full day out of 7 away from the hospital, and should participate in on-call duty in the hospital no more frequently than, on average, every third night. The program director must monitor on-duty assignments for residents to ensure adherence to this recommendation. Resident stress should be monitored, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. The program director and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.

**XI. Substance Abuse**

The residency program must have a written policy and an educational program regarding substance abuse.

**XII. Evaluation**

**A. Evaluation of Residents**

Resident evaluation should be carried out at least semiannually and should concern itself with intellectual abilities, clinical skills, attitudes, and interpersonal relationships. There must be provision for appropriate and timely feedback of the content of these evaluations to the resident. Residents should be advanced to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth. The program must maintain a permanent record of the evaluation and counseling process for each resident. Such records must be accessible to the resident and other authorized personnel.

The program director must provide a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.

Residents should also be given the opportunity to evaluate the faculty and the program at least annually.

**B. Evaluation of the Program**

The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Written evaluations by residents should be utilized in this process. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

One measure of the quality of a program is the performance of its graduates on examinations given by the American Board of Anesthesiology. The RRC will consider this information as part of the overall evaluation of the program.

**XIII. Inactive Program**

If a program is without a resident for 2 years, accreditation may be withdrawn. Reactivation of a program subsequent to withdrawal of accreditation will require a new application.

**XIV. Channels of Information**

Questions relating to educational programs and communication for the ACGME should be directed to the Executive Secretary, Residency Review Committee for Anesthesiology, 515 N State St/Ste 2000, Chicago, IL 60610. Inquiries relating to the credentials of individual applicants for certification should be directed to the Secretary of the American Board of Anesthesiology, Inc, 100 Constitution Plaza, Hartford, CT 06103.

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**Policies and Procedures for Subspecialties of Anesthesiology**

Anesthesiology subspecialty programs will be surveyed and reviewed in conjunction with the survey and review of the core anesthesiology programs to which they are attached. In the case of a new application, or in special cases determined by the Residency Review Committee (RRC), a subspecialty program may be reviewed separately. For an initial application, a survey will not be required when the application is reviewed without the core program.

Applications for accreditation of new subspecialty programs will not be considered if the core residency program in anesthesiology is accredited on a provisional or probationary basis or if it has been accredited with a warning that adverse action will be taken if it is not in substantial compliance with the Essentials of Accredited Residencies at the time of the next review.

The RRC will designate the subspecialty programs as being accredited or not accredited. No further delineation of accreditation categories will be utilized. The accreditation of a subspecialty program will be directly tied to that of the core. If the core program is subsequently accredited on a probationary basis, this is simultaneously a warning to the related subspecialty program that accreditation is in jeopardy. Withdrawal of accreditation of the core program will result in the simultaneous loss of accreditation of the subspecialty program that functions in conjunction with it.

If the core program remains in good standing but the RRC judges a subspecialty program to be in noncompliance with the Program
Program Requirements for Residency Education in Anesthesiology Critical Care Medicine

In addition to the requirements described below, the statements in the program requirements for the anesthesiology core residency program concerning program director and faculty qualifications and responsibilities, research and scholarly activity, and evaluation mechanisms also pertain to the subspecialty programs in anesthesiology critical care medicine.

I. Introduction

A. Duration and Scope of Training

1. Anesthesiology critical care medicine (ACCM) is a subspecialty of anesthesiology devoted to the acute and long-term care of critically ill patients with multiple organ system derangements.

2. Subspecialty training in ACCM shall be a minimum of 12 months in duration, beginning after satisfactory completion of a 4-year continuum in anesthesiology as required for entry into the examination system of the American Board of Anesthesiology. As such, subspecialty training in ACCM is in addition to the minimum requirements set forth in the Program Requirements for the core program in anesthesiology. The majority of the 12 months of training in ACCM must be spent in care of critically ill patients in intensive care units (ICUs). The remaining months may be spent in meeting the objectives described below (see section I.B.).

3. Subspecialty training in ACCM may not include more than one interrupted period.

4. Accreditation of a subspecialty training program in ACCM will be granted only when the program is in direct association with a core residency program in anesthesiology accredited by the Accreditation Council for Graduate Medical Education (ACGME). Therefore, subspecialty training in ACCM can occur only in institutions where there are ACGME-accredited residency programs in anesthesiology or in institutions related by formal agreement to the core program.

5. There must be close cooperation between the core program in anesthesiology and the subspecialty training program. The lines of responsibility between resident staffs in both the core program and the subspecialty program must be clearly delineated.

6. Subspecialty training in ACCM will occur principally in areas of the hospital commonly characterized as ICUs. Such ICUs are capable of providing acute and long-term life support of patients with multiple organ system derangements. Examples of ICUs include but are not limited to multidisciplinary, surgical, medical, neonatal and pediatric, high-risk pregnancy, neurosurgical, trauma, and burn units.

7. There should be an institutional policy governing the educational resources committed to critical care programs ensuring cooperation of all involved disciplines. Where more than one critical care program exists in an institution, it will be the responsibility of the institution to coordinate interdisciplinary requirements.

B. Objectives

1. The subspecialty program in ACCM must be structured to provide resources necessary to ensure optimal patient care while providing its trainees the opportunity to develop skills in clinical care and judgment, teaching, administration, and research.

2. Exposure should be provided to a wide variety of clinical problems in adult and pediatric patients necessary for the development of broad clinical skills required for a subspecialist in critical care medicine (CCM).

II. Personnel

A. Program Director

1. The program director of subspecialty training in ACCM must be an anesthesiologist who is certified in CCM by the American Board of Anesthesiology or who has obtained equivalent training and experience in CCM. The subspecialty program director has responsibility for the teaching program in ACCM subject to the approval of the director of the core residency training program in anesthesiology.

2. The medical director of the ICU may be someone other than the subspecialty program director in ACCM. Recognizing the institutional and multidisciplinary nature of CCM, the specialty of origin of the medical director of the ICU is not as important as the provision that such an individual be certified in CCM and represent the best-qualified person within the institution.

3. The ACCM program director must devote sufficient time to provide adequate leadership to the program and supervision for the trainees. This responsibility also includes active participation in the selection of subspecialty trainees and faculty with suitable qualifications in CCM.

B. Teaching Staff

1. There must be evidence of active participation by qualified anesthesiologists with a continuous and meaningful role in the subspecialty training program. Faculty involved in teaching subspecialty trainees in ACCM must possess expertise in the care of critically ill patients. It is recognized that such expertise will often cross specialty boundaries, emphasizing the importance of collegial relationships and consultation between the CCM program director and faculty from other disciplines including but not limited to surgery and its subspecialties, internal medicine and its subspecialties, pediatrics, obstetrics and gynecology, pathology, and radiology. Where appropriate, supervision and teaching by faculty in these disciplines should be integrated into the teaching program for subspecialty trainees in ACCM.

2. Faculty and the CCM program director responsible for teaching subspecialty trainees in ACCM must maintain an active role in scholarly pursuits, as evidenced by participation in continuing medical education at local and national meetings as well as involvement in research as it pertains to care of critically ill patients.

3. Although the number of faculty involved in teaching trainees in ACCM will vary, it is recommended that at least three faculty be involved and that these be equal to two full-time equivalents including the program director. A ratio of one faculty member to every subspecialty trainee should be maintained.

III. Clinical and Educational Facilities and Resources

A. An ICU must be located in a designated area within the hospital and designed specifically for care of critically ill patients.
B. Adequate numbers of specially trained nurses plus technicians with expertise in biomedical engineering and respiratory therapy must be available.

C. To provide sufficient range of exposure, an ICU that averages a census of at least five patients for each subspecialty trainee in ACCM is recommended.

D. Appropriate monitoring and life-support equipment must be readily available and representative of current levels of technology.

E. There should be readily available at all times facilities to provide laboratory measurements pertinent to care of critically ill patients with multiple organ system derangements. These include but are not limited to measurement of blood chemistries, blood gases and pH, culture and sensitivity, toxicology, and analysis of plasma drug concentrations.

F. Facilities for special radiologic imaging procedures and echocardiography are essential.

G. Conveniently located library facilities and space for research and teaching conferences in CCM are essential.

IV. Educational Program

A. The subspecialty trainee in ACCM should gain clinical experience in the majority of the following areas:
   1. Airway maintenance
   2. Mechanical ventilation of the lungs
   3. Emergency and therapeutic treatment of pneumothorax requiring placement of chest tubes
   4. Emergency and therapeutic treatment requiring fiber-optic laryngotracheobronchoscopy
   5. Pulmonary function tests
   6. Cardiopulmonary resuscitation
   7. Placement of arterial and venous catheters
   8. Emergency and therapeutic placement of artificial transvenous cardiac pacemakers
   9. Pharmacologic and mechanical support of circulation
   10. Monitoring central nervous system function and management of intracranial hypertension
   11. Recognition and treatment of hepatic and renal dysfunction
   12. Diagnosis and treatment of sepsis
   13. Management of massive fluid and/or blood loss
   14. Total parenteral nutrition
   15. Bioengineering and monitoring
   16. Interpretation of laboratory results

B. The teaching curriculum for the subspecialty trainee in ACCM should include the following areas, particularly in relation to critical illness:
   1. Resuscitation
   2. Cardiovascular physiology, pathology, pathophysiology, and therapy
   3. Respiratory physiology, pathology, pathophysiology, and therapy
   4. Renal physiology, pathology, pathophysiology, and therapy
   5. Central nervous system physiology, pathology, pathophysiology, and therapy
   6. Metabolic and endocrine effects of critical illness
   7. Infectious disease physiology, pathology, pathophysiology, and therapy
   8. Hematologic disorders secondary to critical illness
   9. Gastrointestinal, genitourinary, and obstetric-gynecologic acute disorders
   10. Trauma, including burns
   11. Monitoring, bioengineering, biostatistics
   12. Life-threatening pediatric conditions
   13. Administrative and management principles and techniques
   14. Transport of critically ill patients
   15. Pharmacokinetics and dynamics; drug metabolism and excretion in critical illness
   16. Ethical and legal aspects

C. The subspecialty training program in ACCM must provide the opportunity for active trainee participation in research projects pertinent to CCM. Subspecialty trainees should be instructed in the design and interpretation of research studies, evaluation of investigative methods, and interpretation of data, and should have the opportunity to develop competence in critical assessment of new therapies and of the medical literature.

D. Subspecialty trainees in ACCM should become experienced in teaching principles of CCM to other resident physicians, medical students, and health-care professionals. This experience should correlate basic biomedical knowledge with clinical aspects of critical care medicine, including the integration of clinical management principles applicable to patients of all age groups.

E. In preparation for roles as consultants to other specialists, the subspecialty trainee in ACCM must have the opportunity to provide consultation under the direction of faculty responsible for teaching in the ACCM program.

F. Subspecialty trainees in ACCM should gain experience in the administration of an ICU as related to appointment and training of nonphysician personnel, establishment of policies regulating functioning of the ICU and coordination of the activities of the ICU with other in-hospital units.

G. Subspecialty conferences, including mortality and morbidity conferences, journal reviews, and research seminars, must be regularly scheduled. Active participation of the subspecialty trainee in ACCM in the planning and production of these conferences is essential. Attendance at multidisciplinary conferences is encouraged, with particular attention given to those conferences relevant to CCM.

V. Evaluation

A. Faculty responsible for teaching subspecialty trainees in ACCM must provide critical evaluations of each trainee's progress and competence to the director at the end of 6 months and 12 months of training. These evaluations should include intellectual abilities, manual skills, attitudes, and interpersonal relationships, as well as specific tasks of patient management, decision-making skills, and critical analysis of clinical situations. The subspecialty trainee in ACCM must achieve an overall satisfactory evaluation at 12 months to receive credit for training.

B. There must be provisions for appropriate feedback of these evaluations to the subspecialty trainee.

C. Evaluation of CCM faculty performance is encouraged.

D. Periodic evaluations of patient care and subspecialty training objectives are encouraged.

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Program Requirements for Residency Education in Pain Management

In addition to the requirements described below, the statements in the program requirements for the anesthesiology core residency program concerning program director and faculty qualifications and responsibilities, research and scholarly activity, and evaluation mechanisms also pertain to the subspecialty programs in pain management.
Introduction

A. Duration and Scope of Training
1. The management of acute and chronic pain syndromes is a complex matter involving many areas of interest and medical disciplines. The coordination of many talents enters into a successful program of pain management.
2. Subspecialty training in pain management shall be 12 months in duration, beginning after satisfactory completion of a core residency program relevant to pain management. The majority of the 12 months of training in pain management must be spent in the care of patients with acute, chronic, and/or cancer pain problems.
3. Because pain management is an intensive continuum of training, it should not be interrupted by frequent and/or prolonged periods of absence.
4. Accreditation of a subspecialty program in pain management will be granted only when the program is administratively attached to a core residency program accredited by the Accreditation Council for Graduate Medical Education (ACGME). Therefore, subspecialty training in pain management can occur only in institutions where there are ACGME-accredited residency programs in an appropriate specialty or in institutions related by formal agreement to the core program.
5. There must be close cooperation between the core program and the subspecialty training program. The lines of responsibilities between resident staffs in the core program and the subspecialty program must be clearly delineated.
6. Subspecialty training in pain management will include experience in both inpatient and outpatient facilities.
7. Because pain management is a multidisciplinary approach to a common problem, there should be an institutional policy governing the educational resources committed to pain management ensuring cooperation of all involved disciplines.

B. Objectives
1. The subspecialty program in pain management must be structured to ensure optimal patient care while providing trainees the opportunity to develop skills in clinical care, clinical judgment, teaching, administration, and research.
2. Exposure should be provided to a wide variety of clinical pain problems necessary for the development of broad clinical skills and knowledge required for a specialist in pain management.

II. Personnel

A. Program Director
The program director of subspecialty training in pain management must be a physician who is certified in pain management by an American Board of Medical Specialties (ABMS) member board or who has obtained equivalent training and experience in pain management. The subspecialty program director has responsibility for the teaching program in pain management subject to the approval of the director of the core residency program. The program director must devote sufficient time to provide adequate leadership to the program and supervision to the trainees. This responsibility also includes active participation in the selection of subspecialty trainees and faculty with suitable qualification in pain management.

B. Medical Director
The medical director of the pain management service may be someone other than the subspecialty program director. Recognizing the institutional and multidisciplinary nature of pain management, the specialty of origin of the medical director is not as important as the provision that such an individual represent the best qualified person within the institution.

C. Faculty
1. Qualified physicians with expertise in pain management must have a continuous and meaningful role in the subspecialty training program. Faculty involved in teaching subspecialty trainees in pain management must possess expertise in the care of patients with acute, chronic, and/or cancer pain problems. Such expertise frequently crosses specialty boundaries. Thus, the program is encouraged to include faculty from other ABMS-recognized medical specialties involved in pain management. Where appropriate, supervision and teaching by faculty in these and other disciplines should be incorporated into the teaching program for subspecialty trainees in pain management. Faculty and the pain management program director must maintain an active role in scholarly pursuits pertaining to pain patients. Participation in continuing medical education is mandatory.
2. It is recommended that at least three faculty be involved in teaching pain management trainees and that these be equal to, or greater than, two full-time equivalents. A ratio of one full-time equivalent faculty member to two subspecialty trainees shall be maintained. The RRC understands by full-time that the faculty member devotes essentially all professional time to the program.

III. Clinical and Educational Facilities and Resources
A. A pain management center (clinic) must be located within a hospital/medical office complex and must be designed specifically for the management of pain patients.
B. Adequate allied health staff and other support personnel must be available.
C. There must be a minimum of 100 new patients per year with acute, chronic, or cancer pain problems available per trainee.
D. Appropriate monitoring and life-support equipment must be readily available wherever invasive pain management procedures are performed.
E. The following functions and support infrastructure must be available:
   1. Appropriate laboratory facilities
   2. Appropriate radiologic imaging facilities
   3. Psychiatric/psychological services, including behavioral modification
   4. Physical and/or occupational therapy
   5. Social services
   6. Medical record keeping
   7. Other services as indicated (vocational, nursing, pharmacy, dietary, etc)
   8. Appropriate electrodagnostic facilities
F. Conveniently located library facilities and space for research and teaching conferences in pain management are essential.
G. There must be ready access to consultation from other disciplines involved in pain management.

IV. Curriculum
A. The pain management curriculum must include the following topics in lectures and reading:
   1. Anatomy and physiology of the pain projection system
   2. Epidemiology, economic impact, and sociology of pain
   3. Pharmacology of opiates, nonnarcotic analgesics, and nonsteroidal anti-inflammatory agents
   4. Pharmacology of centrally acting drugs used in pain management
   5. Measurement and assessment of pain and function
   6. Principles of neural stimulation
   7. Principles of and indication for diagnostic testing
   8. Role of nerve blocks in pain management
9. Role of neuroablative procedures
10. Behavioral, cognitive, and supportive psychotherapeutic treatment principles, including rehabilitation and the role of team management
11. Principles and techniques of acute pain management
12. Principles and techniques of cancer pain management, including death and dying, and the ethical principles involved
13. Principles and techniques of management of other chronic pain problems
14. Principles of physical therapy, occupational therapy, and rehabilitation of the chronic pain patient
15. Principles of multidisciplinary approaches to pain management
16. Management of pain in children
17. Principles and ethics of pain research in humans and animals
18. Organization and management of a pain management center
19. Continuing quality improvement, utilization review, and program evaluation
20. Disability assessment and rehabilitation procedures

B. The trainee must become familiar with theory, benefits, indications, and practical applications of the following procedures and techniques:
1. A broad range of peripheral nerve block procedures
2. Epidural and subarachnoid injections
3. Joint and bursal sac injections
4. Cryotherapeutic techniques
5. Epidural, subarachnoid, or peripheral neurolysis
6. Electrical stimulation techniques
7. Implanted epidural and intrathecal catheters, ports, and infusion pumps
8. Acupuncture and acupressure
9. Behavioral modification
10. Isokinetic testing
11. Modality therapy and physical therapy
12. Hypnosis, stress management, and relaxation techniques
13. Chemomucoidesis
14. Trigeminal ganglionectomy
15. Open and percutaneous cordotomy
16. Rhizotomy
17. Dural root entry zone lesions
18. Peripheral neurectomy and neurolysis
19. Sympathectomy techniques
20. Ablative neurosurgery
21. Thalamotomy, medullary tractotomy, cingulotomy
22. Central neuroaugmentative procedures
23. Hypophysectomy

C. The subspecialty training program in pain management must provide the opportunity for active trainee participation in research projects pertinent to pain management. Subspecialty trainees should be instructed in the conduct of scholarly activities, in the evaluation of investigative methods and interpretation of data, and should have the opportunity to develop competence in critical assessment of new therapies and of the medical literature.

D. Subspecialty trainees in pain management must gain experience in the management of a pain center (clinic) with regards to appointment and training of nonphysician personnel, establishment of policies relating to management of pain problems, and coordination of the activities of the pain center with other inpatient and outpatient service.

E. In preparation for a role as a consultant, the pain management trainee must have significant experience in providing consultation under the direction of faculty responsible for teaching pain management.

F. Pain management conferences must be held regularly. These should include morbidity and mortality conferences, journal reviews, and research seminars. Active participation in the planning and presentation of these conferences by the pain management trainee and faculty is essential. Attendance at multidisciplinary conferences is encouraged.

G. The subspecialty trainee in pain management must become experienced in teaching principles of pain management to resident physicians, medical students, and other health-care professionals.

II. There must be continuing quality improvement, utilization review, and evaluation.

V. Trainee Duty Hours

While the actual number of hours worked by subspecialty trainees may vary, trainees should have sufficient off-duty time to avoid undue fatigue and stress. It is recommended that trainees should be allowed to spend, on average, at least 1 full day out of 7 away from the hospital, and should be assigned on-call duty in the hospital no more frequently than, on average, every third night. The program director is responsible for monitoring on-duty assignments for trainees to ensure adherence to this recommendation.

VI. Evaluation

A. Faculty responsible for teaching subspecialty trainees in pain management must provide critical evaluations of each trainee's progress and competence to the pain management program director at the end of 6 months and 12 months of training. These evaluations must include character skills, fund of knowledge, clinical competence, general medical skills, and specific skills in pain management.

B. There must be provision for appropriate feedback of the content of these evaluations to the pain management trainee.

C. There must be opportunity for trainees to evaluate pain management faculty performance.

D. Periodic evaluation of patient care (quality assurance) is mandatory.

E. Periodic evaluation of subspecialty training objectives is encouraged.

VII. Other

Those who plan to seek certification should contact the appropriate ABMS member board regarding the requirements for certification.

ACGME: June 1992 Effective: July 1995

Program Requirements for Residency Education in Colon and Rectal Surgery

I. Introduction

A. Duration and Scope of Training

Institutions offering residencies in Colon and Rectal Surgery must provide the necessary education to qualify the resident as a colon and rectal specialist in the care of patients, in teaching, and in research. Surgeons admitted to each residency are required to have completed a minimum of 5 years of an accredited, graded program in general surgery. Thus, the residents should already have developed a satisfactory level of clinical maturity, technical skills, and surgical judgment that will enable them to begin a residency in colon and rectal surgery for the purpose of specializing in this field.
of surgery. The period of training should be not less than 1 year, and the program must comply with the Institutional Requirements for residency training.

B. Program Goals and Objectives
The director and teaching staff of a program must prepare and comply with written educational goals for the program.

C. Program Design
All educational components of a residency program should be related to program goals.
1. The program design and/or structure must be approved by the Residency Review Committee (RRC) for Colon and Rectal Surgery as part of the regular review process.
2. Participation by any institution providing more than 8 months of training must be approved by the RRC.

D. Program Evaluation
The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Written evaluations by residents should be utilized in this process.

II. Program Personnel
The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director
There must be a single program director responsible for the program.
1. Qualifications of the program director include:
   a. Requisite and documented clinical, educational, and administrative abilities and experience.
   b. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)
   c. Certification by the American Board of Colon and Rectal Surgery or equivalent qualifications.
   d. Appointment in good standing to the medical staff of an institution participating in the program.
2. Responsibilities of the program director include:
   a. Full responsibility for the teaching or work done in the department or section.
   b. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.
   c. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.
   d. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program.
   e. The supervision of residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.

f. Regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician.
   The program director, with participation of members of the teaching staff, shall:
   1. At least semiannually evaluate the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures.
   2. Communicate each evaluation to the resident in a timely manner.
   3. Advance residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.
   4. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.

g. The provision of a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.

h. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.

i. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.

j. Preparation of an accurate statistical and narrative description of the program as requested by the RRC.

B. Teaching Staff
1. There should be a minimum of two staff members, including the program director, who are certified by the American Board of Colon and Rectal Surgery or possess suitable equivalent qualifications and who have significant teaching responsibilities. Members of the teaching staff must be able to devote sufficient time to their supervisory and teaching responsibilities.

2. All members must have the necessary interest and ability to perform their teaching duties adequately, have sound clinical and teaching abilities, support the goals and objectives of the program, have a commitment to their own continuing medical education, and participate in scholarly activities.

3. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

4. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

5. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contributions of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.
C. Other Program Personnel

Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

III. Facilities

A. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.

B. Library services should include the electronic retrieval of information from medical databases.

C. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

IV. Educational Program

A. The program should supply the necessary volume and variety of colon and rectal surgery to assure adequate training of residents. If there is insufficient volume or variety in the primary institutions, arrangements should be made for an affiliation with a participating institution to correct the inadequacy. It is expected that each resident will have ample opportunity and responsibility for the care of patients with anorectal and colonic diseases.

B. The educational program must also include training in both diagnostic and therapeutic colonoscopy. The objective is to develop the necessary competence in the use of this procedure to qualify as an expert in the field. Therefore, adequate numbers of both diagnostic and therapeutic colonoscopies must be available either through the colon and rectal training program or through an appropriate institutional affiliation to satisfy this particular need.

C. An important aspect of the educational program is training in an outpatient facility to develop skills in patient evaluation, examination, office treatment, and surgical aftercare. Where feasible, such training should include work in the faculty member's office as well as in the outpatient clinic of the hospital.

D. Residents in colon and rectal surgery should have sufficient knowledge of those aspects of anesthesiology, radiology, and pathology that relate to colon and rectal surgery to develop overall competence as a specialist. Such training is best accomplished in cooperation with the departments of anesthesiology, radiology, and pathology.

E. Teaching contributes to the educational process and, therefore, should be an important part of the training program. The resident should assist in the instruction of general surgical residents and medical students, as well as nurses and other allied health professionals. It is important to include instruction in the care of intestinal stomas, especially in institutions that do not have enteral or oral therapy.

F. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of the teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:

1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.

2. Participation in journal clubs and research conferences.

3. Active participation in regional or national professional and scientific societies, particularly through presentations at their organizations' meetings and publication in their journals.

4. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.

5. Offering of guidance and technical support (e.g., research design, statistical analysis) for residents involved in research.

6. Encouragement of trainees to undertake clinical and/or laboratory investigations, to present their research in scientific meetings, and to publish them in recognized medical journals.

G. Graduate education in colon and rectal surgery requires a commitment to continuity of and excellence in patient care. At the same time, patients have a right to expect an alert, responsible, and responsive physician dedicated to delivering effective and appropriate care. The program director, therefore, must ensure supervision of each resident, commensurate with that resident's knowledge, skill, and experience and with the complexity of the patient's illness. It is desirable that residents' work schedules be designed so that on the average, excluding exceptional patient care needs, residents have at least 1 day out of 7 free of resident responsibilities and be on call in the hospital no more often than every third night. The ratio of hours worked and on-call time will vary at this senior level and, therefore, necessitates flexibility.

H. The resident's activity outside the educational program should not be allowed to interfere with his or her performance in the educational process as defined in the agreement between the institution and the house officer. There should be a semianual evaluation of the resident's performance. Likewise, there should be opportunity for the resident to evaluate the program.

V. Other

A. One measure of the educational quality of a program may be the performance of its graduates in the examination of the American Board of Colon and Rectal Surgery.

B. Those who plan to seek certification by the American Board of Colon and Rectal Surgery should communicate with the secretary of the board prior to beginning their residency to be certain that their general surgical training is acceptable as one of the requirements for certification.

ACGME: September 1992 Effective: July 1995

Program Requirements for Graduate Medical Education in Dermatology

I. Duration and Scope of Training

A. Accredited training programs in dermatology shall be organized to provide trainees with the educational and practical experience that will enable them to deliver superior specialized care to patients with diseases of the skin, hair, nails, and mucous membranes. Such experience must be varied and broad, progressive and systematic, and of sufficient duration. Moreover, it must include instruction in the pertinent basic sciences and in all clinical areas that bear on the specialty of dermatology and training in research and teaching. Accomplishment of these objectives requires a suitable institutional environment; a cooperative and supportive administrative authority; a stable financial base; an enthusiastic, competent, and available staff; an adequate patient population; modern, efficient equipment and space; and satisfactory liaison with other disciplines that relate to dermatology.
B. A dermatology residency may be accredited to offer either 3 or 4 years of graduate medical education:

1. A 3-year program is preceded by a broad-based clinical year of training (PGY-1) in an Accreditation Council for Graduate Medical Education (ACGME)-accredited program or similar program accredited in Canada.

2. A 4-year program must provide a broad-based clinical experience during the first year and 3 years of dermatology education in the second through fourth years of the program.

3. Approximately 75% of the resident’s time during the 3 years of dermatology training must be related to the direct care of dermatologic outpatients and inpatients; this includes consultations, clinical conferences, and inpatient rounds.

4. Dermatopathology, microbiology, and other basic science lectures, seminars, and conferences are essential components of the resident’s training.

5. Exceptionally, accreditation of residency programs of less than 3 years is possible, but only under the following conditions:

   a. This training must represent an unusual and highly specialized experience, in research or in a selected major area of dermatology, in an institution with extraordinary capability in such fields and with multiple accredited training programs in other disciplines.

   b. Moreover, training under such conditions will provide the trainee with only 1 year of credit to be applied against the necessary 3 years of training in dermatology. This training may not be used in lieu of the first postgraduate year or the first year of residency training in dermatology.

C. The program director and teaching staff must prepare and comply with written educational goals for the program. All educational components of a program should be related to program goals.

   1. The program design and/or structure must be approved by the Resident Review Committee (RRC) as part of the regular review process.

   2. Participation by any institution providing more than 6 months of training in a program must be approved by the RRC.

II. Institutional Organization

A. The sponsoring institution must ensure the financial, technical, and moral support and provide the necessary space, facilities, and supply of patients for the establishment and maintenance of an approved residency program in dermatology.

B. Adequate exposure to both outpatients and inpatients is necessary, as are opportunities to do research, to teach, and to become acquainted with administrative aspects of the specialty.

C. A cooperative relationship with other disciplines in medicine will result in the most effective implementation of these activities.

D. When the resources of two or more institutions are utilized for the clinical or basic science education of a resident in dermatology, letters of agreement must be approved by the governing boards.

E. Affiliations should be avoided with institutions that

   1. Are at such a distance from the parent institution as to make resident attendance at rounds and conferences difficult, or

   2. Do not add to the educational value of the program.

III. Program Personnel

The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director

1. There must be a single program director responsible for the program.

2. Qualifications of the program director include:

   a. Requisite and documented clinical, educational, and administrative abilities and experience.

   b. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)

   c. Certification by the American Board of Dermatology or suitable equivalent qualifications.

   d. Appointment in good standing to the medical staff of an institution participating in the program.

3. Responsibilities of the program director include:

   a. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.

   b. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.

   c. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program.

   d. The supervision of residents in accordance with explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.

   e. Regular evaluation of residents’ knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician. The program director, with participation of members of the teaching staff, shall:

      1. At least semiannually evaluate the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures.

      2. Communicate each evaluation to the resident in a timely manner.

      3. Advance residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.

      4. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.

   f. The provision of a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident’s performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident’s permanent record maintained by the institution.

   g. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.

   h. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning, and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.
Program Requirements for Graduate Medical Education in Dermatology

1. Preparation of an accurate statistical and narrative description of the program as requested by the RRC.

2. Internal analysis of the training program by the program director and his or her staff is essential, in addition to the regular surveys conducted by the RRC for Dermatology.

3. The program director must notify the secretary of the RRC of any change in the program, staffing, affiliations, or facilities that might significantly alter the educational experience.

4. At times of his or her absence, the program director must designate an interim director. If this period is for 6 months or longer, the RRC must be notified. Appointment of an interim director should not exceed 2 years, as it may have a detrimental effect on the program.

5. A log of surgical procedures performed by residents must be kept on file and provided on request to the RRC or the site visitor. Documentation of resident evaluation, institutional and interinstitutional agreements, resident agreements, and departmental statistics should be kept on file and provided on request to the RRC or site visitor. The accurate and complete execution of application forms, progress reports, and replies to other forms from the RRC is the responsibility of the program director. The care and precision given to these responses will be taken into consideration in the assessment of the training program.

6. The program director must ensure that residents are adequately supervised by faculty at all times. Further, resident duty and on-call assignments must be made in a manner that ensures that neither education nor quality of patient care is jeopardized by inappropriate resident stress or fatigue. Physicians must have a keen sense of personal responsibility for continuing patient care and must recognize that their obligations to patients is not automatically discharged at any given hour of the day or on any particular day of the week. In no case should a resident go off duty until the proper care and welfare of the patients have been ensured. Resident duty hours and night and weekend call must reflect the concept of responsibility for patients and provide for adequate patient care. Residents must not be required regularly to perform excessively difficult or prolonged duties. When averaged over 4 weeks, residents should spend no more than 80 hours per week in hospital duties. Residents at all levels should, on average, have the opportunity to spend at least 1 day out of 7 free of hospital duties and be on call no more often than every third night. There should be opportunity to rest and sleep when on call for 24 hours or more.

7. Trainees should be adequately supported to permit their undivided attention to educational and service responsibilities.

8. The program director should advise all residents planning to seek certification by the American Board of Dermatology to complete the preliminary registration form of this board and to communicate directly with the executive director of the board to be certain that they are in full compliance with the requirements for certification.

9. The program director must have a full-time commitment to the educational program and related activities.

B. Teaching Staff

1. There must be a sufficient number of teaching staff with documented qualifications to instruct and supervise adequately all the residents in the program. An instructor-to-trainee ratio of at least one-to-three is desirable, as is a minimum of two geographic full-time members of the clinical faculty, one of whom must be the training director.

2. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities.

3. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.

4. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

5. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

6. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

7. Faculty from any and all clinical and basic science departments can and should be utilized to provide a complete educational experience for the trainees.

C. Other Program Personnel

Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

IV. Educational Program

A. The training program shall be organized to permit the acquisition of experience and knowledge of dermatology in a graded and systematic fashion and ensure continuity of patient care.

B. Didactic training should complement and, when possible, precede or parallel the clinical activities. Such education should be organized to follow a curriculum that will ensure resident exposure to the complete range of disorders encountered by the dermatologist.

C. Appropriate clinical direction and supervision are necessary throughout the training period. As the experience and confidence of the trainees grow, increasing responsibility for patient management should be assumed; however, the authority and supervisory role of the staff at all levels of training must prevail.

D. An equivalent training experience must be ensured for all trainees.

E. Teaching methods throughout the training period should include various combinations of lectures, conferences, seminars, demonstrations, individual or group study of color transparencies and histologic slides, clinical rounds, chart and record reviews, faculty-trainee sessions in small groups and one-to-one settings, book and journal reviews, and attendance at local, regional, and national meetings.

F. Projective equipment and facilities for reviewing and taking clinical photographs should be provided.

G. A library containing the essential texts, journals, and other learning resources should be an integral part of each training area.

H. Space should also be made available for dermatology conferences, preferably dedicated for that purpose.

I. A vital part of the residency program is the structured study of the basic sciences related to dermatology, including allergy, anatomy, bacteriology, biochemistry, embryology, entomology, genetics, histology, immunology, mycology, oncoLOGY, parasitology, pathology, pharmacology, photobiology, physiology, serology, virology, and basic principles of therapy by physical agents. In addition, the structured study should include the basic medical
Program Requirements for Graduate Medical Education in Dermatology

...sciences and principles that underlie dermatologic surgery and therapy by physical agents. Particular emphasis should be placed upon dermatologic microbiology, dermatopathology, and immunodermatology. There should be a well-organized course of instruction and range of experience in these three disciplines. The dermatopathology training should be directed by a physician with special qualification, or its equivalent, in dermatopathology.

J. To facilitate clinical and laboratory teaching it is essential that the department have an adequate supply of properly classified anatomic and pathologic materials, including histologic and photographic slides, and that the resident participate actively in the interpretation of histopathologic sections. Clinical laboratory facilities for microscopic analysis of biologic specimens (e.g., fungal and ectoparasite scrapings, Tranck preparations, immunofluorescence, darkfield examinations), culture for microbes (e.g., fungi, bacteria, viruses), and interpretation of histologic specimens by light and electron microscopy should be conveniently available.

K. The training should be sufficient to ensure a knowledge of and competence in the performance of procedures in allergy and immunology, cryosurgery, dermatologic surgery, laser surgery, dermatopathology, clinical pathologic, parasitology, patch testing, photobiology, phototherapy, and topical and systemic pharmacotherapy and microbiology, including sexually transmitted diseases. Among these disciplines, dermatologic surgery should be given special emphasis in the organization and implementation of the training program. The surgical training should be directed by faculty who have had advanced training in dermatologic surgery. Dermatologic surgical training should include electrosurgery, cryosurgery, laser surgery, nail surgery, biopsy techniques, and excisional surgery with appropriate closures, including small flaps and grafts when indicated.

L. The practice of dermatology is concerned with both ambulatory and hospitalized patients. It is essential that an active outpatient service furnish sufficient clinical material representing the broad array of diseases seen by the dermatologist. Suitable facilities that permit the use of modern diagnostic and therapeutic techniques in the care of these patients should be provided. Inpatient facilities are also essential so that residents may have the opportunity to treat the more serious cutaneous diseases on a daily basis and observe the dermatologic manifestations of systemic disease. Dermatology staff and residents must have primary rather than consultant responsibility for patients they hospitalize with dermatologic illnesses. Properly supervised experience with appropriate follow-up in the provision of consultation to other services whose patients manifest skin diseases as secondary diagnoses is also necessary. The keeping of complete and accurate consultation records within the dermatology unit should be emphasized throughout this phase of the training. Space and equipment should be provided to permit instruction in dermatologic surgery, electrosurgery, phototherapy, cryosurgery, application of topical medications and dressings, phototherapy, radiotherapy, and appropriate epicutaneous and intradermal testing, phototesting, and other diagnostic procedures.

M. During training it is necessary for trainees to gain an understanding of many diagnostic procedures and therapeutic techniques, even though they may not personally perform them. Furthermore, some of these procedures or techniques may not be available in their programs. Among these techniques are procedures such as hair transplantation, dermabrasion, Mohs micrographic surgery, and tissue augmentation. The physical modalities are especially notable, since an understanding of the basic properties of the electromagnetic spectrum is needed for the resident to become knowledgeable about the effects of various forms of this energy in the cause of disease and about its use in dermatologic diagnosis and therapy. Electron beam, x-ray, grenz ray, and laser are among these modalities. Even if some of these modalities are unavailable within a training unit, it is still an obligation of the director to ensure that the trainee has received appropriate instruction concerning the disease implications and therapeutic application of these energy sources.

N. Training must be provided in cutaneous allergy and immunology and in sexually transmitted diseases. Training should also be provided in appropriate aspects of environmental and industrial medicine, internal medicine, obstetrics and gynecology, ophthalmology, otolaryngology, pathology, pediatrics, physical medicine, preventive medicine, psychiatry, radiology and surgery.

O. Experience in teaching dermatology to other residents, medical students, nurses, and/or allied health personnel is an important element of the residency program. In addition, trainees should, when possible, be given selected administrative responsibility commensurate with their interests, abilities, and qualifications.

V. Program Research and Scholarly Activity

A. Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility.

B. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:

1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.
2. Participation in journal clubs and research conferences.
3. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.
4. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.
5. Offering of guidance and technical support (e.g., research design, statistical analysis) for residents involved in research.
6. Provision of support for resident participation in scholarly activities.

C. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions. Library services should include the electronic retrieval of information from medical databases.

D. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

VI. Evaluation

A. Periodic in-training evaluation of trainees should be carried out to ensure that the trainee is making satisfactory progress. Both formal examinations and performance ratings by the faculty can be utilized, and the trainee should be personally apprised of his
Program Requirements for Residency Education in Dermatopathology

I. Duration and Scope of Education

A. Dermatopathology is the subspecialty of dermatology and pathology that is concerned with the study and diagnosis of disease of the skin and adjacent mucous membranes, cutaneous appendages, hair, nails, and subcutaneous tissues by histological, histochemical, immunological, ultrastructural, molecular, microbiological, and other related techniques.

B. Graduate medical education programs in dermatopathology must provide an organized educational experience for qualified physicians seeking to acquire the additional competence of a dermatopathologist.

C. Programs must provide organized education in all current aspects of dermatopathology, including basic science, laboratory procedures, laboratory management, quality assurance, and self-assessment.

D. The dermatopathology program must be an equal and joint function of the Department of Dermatology and of the Department of Pathology in a sponsoring institution that has an Accreditation Council for Graduate Medical Education (ACGME)-accredited residency in Dermatology and an ACGME-accredited residency in Anatomic Pathology (AP-3) or Anatomic and Clinical Pathology (APCP-3).

E. Dermatopathology programs must offer 12 months of education subsequent to the satisfactory completion of an ACGME-accredited residency in either dermatology or pathology.

F. For all dermatopathology residents, 50% of their education should be devoted to the study of dermatopathology, as outlined in II.A.1. For those who have completed a pathology residency, 50% of the 1-year program should be education in clinical dermatology provided by the dermatology teaching staff. For those who have completed a dermatology residency, 50% of the program should be education in anatomic pathology provided by the pathology teaching staff.

G. The director and teaching staff of the program must prepare and comply with written educational goals for the program and distribute them to applicants, residents, and members of the teaching staff. All educational components of the program should be related to these goals.

H. The program design and/or structure must be approved by the dermatopathology review committee as part of the regular review process.

I. Participation by any institution providing more than 2 months of training in the program must be approved by the subcommittee for dermatopathology.

II. Educational Program

A. Curriculum

1. Programs should be structured so that residents are involved in dermatopathology throughout the year. The program must include didactic instruction and practical experience in the diagnosis of skin disorders by direct inspection and by histological, histochemical, immunological, ultrastructural, molecular, microbiological, and other related techniques. Relevant aspects of mycology, bacteriology, and entomology should be included.

2. Dermatopathology residents must be given clearly defined assignments and increasing responsibility as they progress through the program.

3. The program must provide a sufficient volume and variety of dermatopathology specimens (at least 5,000 new accessions per resident per year) and other educational material for the resident to acquire the qualifications of a consultant in dermatopathology.

4. The program must provide the resident with the experience required to set up and to operate a dermatopathology laboratory and to supervise and train laboratory personnel.

5. All dermatopathology residents should participate in patient examination and autopsies appropriate to dermatopathology. Residents who are pathologists must participate in the examination of at least 1,000 dermatopathology patients.

6. Dermatopathology residents who are dermatologists must have exposure to autopsy and surgical pathology. This experience should emphasize contemporary diagnostic techniques (including the use of a wide variety of monoclonal antibodies) and require attendance at autopsies and surgical pathology conferences, the review of slide sets of diseases relevant to dermatopathology, and participation in autopsies.

B. Educational Activities

1. Lectures, tutorials, seminars, and conferences with clinical services must be regularly scheduled and held.

2. Instruction should include the use of study sets and files of usual and unusual cases and other educational materials.

III. Program Personnel

The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director

1. The program director must be responsible for and have the authority to conduct the training program effectively. He or she must devote sufficient time to the program to ensure the implementation of sound administrative practices and the provision of adequate facilities, teaching staff, resident staff, and educational resource materials.

2. A program involving two or more participating institutions must have a single director with authority for the supervision and coordination of the portions of the program carried out at each institution.

3. Qualifications of the program director include:
   a. Requisite and documented clinical, educational, and administrative abilities and experience.
b. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)

c. Certification in dermatopathology by the American Board of Dermatology or American Board of Pathology or suitable equivalent qualifications.

d. Appointment in good standing to the medical staff of an institution participating in the program.

4. The program director must demonstrate continuing scholarly activity.

5. Responsibilities of the program director include:

a. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.

b. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.

c. Selection, supervision, and evaluation of the teaching staff and other program personnel at each institution participating in the program.

d. The supervision of residents in accordance with explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervising physicians.

e. Regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician. The program director, with participation of members of the teaching staff, shall:

1. At least semiannually evaluate the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures.

2. Communicate each evaluation to the resident in a timely manner.

3. Advance residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.

4. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.

f. The provision of a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.

g. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.

h. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.

i. Preparation of an accurate statistical and narrative description of the program as requested by the dermatopathology review committee.

B. Teaching Staff

1. There must be a sufficient number of teaching staff with documented qualifications in dermatopathology to instruct and supervise adequately all the residents in the program. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities.

2. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.

3. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

4. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

5. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

C. Dermatopathology Residents

1. The number of positions requested must not exceed the educational resources available in a program.

2. Residents must have the opportunity to assume increasing responsibility under supervision appropriate to their experience as they progress through the program.

3. Residents should have the opportunity to become involved in dermatopathologic research and teaching during the program.

4. The program director must ensure that residents are adequately supervised by faculty at all times. Further, resident duty and on-call assignments must be made in a manner that ensures that neither education nor quality of patient care is jeopardized by resident stress or fatigue. Physicians must have a keen sense of personal responsibility for continuing patient care, and must recognize that their obligation to patients is not automatically discharged at any given hour of the day. In no case should a trainee go off duty until the proper care and welfare of the patients have been ensured. Resident duty hours and night and weekend calls must reflect the concept of responsibility for patients and the provision of adequate patient care. Residents must not be required regularly to perform excessive, prolonged duties. When averaged over 4 weeks, residents should spend no more than 80 hours per week in hospital duties. Residents should, on average, have the opportunity to spend at least 1 day out of 7 free of program duties and should be on call no more often than every third night. When on call for 24 hours or more, there should be opportunity to rest and sleep.

D. Other Personnel

1. The laboratories involved in the program must be directed by qualified physicians who are licensed to practice medicine and are members in good standing of the institution's medical staff.

2. There must be a sufficient number of qualified professional, technical, and clerical personnel to support laboratory work and the educational program.

IV. Institutional Resources

A. There must be ample case material and supporting facilities to meet the training requirements in dermatopathology, dermatol-
ogy, and pathology. Each dermatopathology resident should examine at least 5,000 dermatopathology specimens (ie, in-house or referred specimens in the institution's accession file for which reports are generated).
B. There must be adequate equipment, laboratory space, office facilities, meeting rooms, classrooms, and research space to support service, teaching, and educational responsibilities.
C. The institutions and laboratories participating in the program must be appropriately accredited and/or licensed.
D. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions. Library services should include the electronic retrieval of information from medical databases. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

V. Research and Scholarly Activity
A. Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility.
B. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:
1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.
2. Participation in journal clubs and research conferences.
3. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.
4. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.
5. Offering of guidance and technical support (eg, research design, statistical analysis) for residents involved in research.
6. Provision of support for resident participation in scholarly activities.

VI. Evaluation
A. There must be regular, written evaluation of residents by teaching staff. Evaluations should be completed and discussed with the residents at least once every 6 months.
B. Residents should submit written evaluations of the program at least once each year for review by the director and teaching staff.

VII. Certification and Accreditation
A. The Residency Review Committees for Dermatology and Pathology are responsible for accreditation of graduate medical education programs in dermatopathology.
B. The American Board of Dermatology and American Board of Pathology are responsible for certification of individual physicians in dermatopathology. Individuals who plan to seek certification should communicate with their respective boards to obtain the latest information regarding certification.

ACGME: February 1993 Effective: July 1995

Program Requirements for Programs in Emergency Medicine

I. Introduction

A. General Characteristics of Accredited Programs
Residencies in emergency medicine are designed to prepare physicians for the practice of emergency medicine. These programs must teach the basic skills and knowledge that constitute the foundations of emergency medicine practice and provide progressive responsibility for and experience in the application of these principles to the management of clinical problems. Equal opportunity must be provided for the residents, under the guidance and supervision of a qualified faculty, to develop a satisfactory level of clinical maturity, judgment, and technical skill. Upon completion of the program, residents should be capable of practicing emergency medicine, incorporating new skills and knowledge during their careers, and monitoring their own physical and mental well-being and that of others in the profession.

B. Length of the Program
1. The required length of an emergency medicine residency is 36 months in a curriculum under the control of the emergency medicine program director. Accreditation by the Accreditation Council for Graduate Medical Education (ACGME) is required for all years of the educational program. The Residency Review Committee (RRC) recognizes three educational formats: PGY 1-3, PGY 2-4, and PGY 1-4. The resident must complete all years of education for which the program is accredited.
2. Programs that extend the residency beyond 36 months must present a clear educational rationale consonant with the program requirements and the objectives of the residency. The program director must obtain the approval of the sponsoring institution and the RRC prior to implementation and at each subsequent accreditation review of the program.
3. Prior to entry into the program, each resident must be notified in writing of the required length of the program. This period may not be changed for a particular resident during his or her program unless there is a significant break in his or her education or the resident needs remedial education.

C. Goals of Education
Residency programs in emergency medicine should produce physicians prepared to:
1. Provide the recognition, resuscitation, stabilization, evaluation, and care of the full range of patients who present to the emergency department.
2. Arrange appropriate follow-up or referral as required.
3. Manage the prehospital care of the acutely ill or injured patient.
4. Participate in the administration of the emergency medical services system providing prehospital care.
5. Provide appropriate patient education directed toward the prevention of illness and injury.
6. Engage in the administration and teaching of emergency medicine.
7. Understand and evaluate research methodologies and their application.

1. For information concerning the transfer of residents between emergency medicine residencies with differing educational formats and advanced placement credit for training in other specialties, contact the American Board of Emergency Medicine.
II. Institutions
The institution(s) involved in the program must provide evidence of commitment to graduate medical education, including emergency medicine. While it is recognized that the practice of emergency medicine occurs within a variety of organizational structures, the administrative and academic structure must be organized in a way that facilitates the provision of an adequate educational experience. There must be evidence of an adequate financial commitment to the program.

A. Medical School Affiliation
Medical school affiliation is desirable. When a medical school affiliation is present, there must be a written affiliation agreement or a letter of understanding documenting the duties and responsibilities of both the medical school and the program. Program core faculty should have or be able to apply for appropriate faculty appointments at the medical school.

B. Affiliation Agreements
1. When there is a cooperative educational effort involving multiple institutions, the commitment of each institution to the program must be made explicit in an affiliation agreement with each institution that conforms to ACGME Institutional Requirements Section I.C.1-5.
2. In addition, there must be a current letter of understanding between the program director and the individual responsible for each resident rotation in the program that describes:
   a. The educational objectives and the means by which they will be accomplished and evaluated.
   b. The resources and facilities in the institution(s) that will be available to each resident, including but not limited to library and medical records.
   c. The duties and responsibilities the resident will have on each rotation.
   d. The relationship that will exist between emergency medicine residents and faculty in other programs.
   e. The supervision emergency medicine residents will receive on each rotation.
3. For emergency medicine rotations, the physician responsible, under the authority of the program director, for the teaching and supervision of emergency medicine residents must be identified.

C. Participating Institutions
1. The program should be based at a primary hospital (hereafter referred to as the primary clinical site). More of the didactic and clinical experiences should take place at the primary clinical site than at any other single site. Educationally justified exceptions to this requirement will be considered.
2. Programs using multiple hospitals must ensure the provision of a unified educational experience for the residents. Each affiliated institution must offer significant educational opportunities to the overall program. The reasons for including each institution must be stated. Affiliations that merely duplicate experiences otherwise available within the program are not desirable.
3. To maintain program cohesion, continuity, and critical mass, as well as to reduce stress on the residents and their families, mandated rotations to affiliated institutions that are geographically distant from the sponsoring institution are acceptable only if they offer special resources, unavailable locally, that significantly augment the overall educational experience of the program.
4. The number and geographic distribution of participating institutions must not preclude the satisfactory participation by all residents in conferences and other educational exercises.

D. Facilities and Resources
In every hospital in which the emergency department is used as a training site, the following must be provided:
1. Adequate patient care space.
2. Laboratory and diagnostic imaging results, especially those required on a STAT basis, returned on a timely basis.
3. Adequate program support space, including office space for faculty and residents.
4. Current medical library resources, including appropriate emergency medicine reference texts in the emergency department. In addition, residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions. Services available should include the electronic retrieval of information from medical databases.
5. Adequate and readily accessible instructional space.
6. Data information systems.
7. Security support services.

III. Personnel
The program leadership and the teaching staff are responsible for the general administration of the program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Head of Emergency Medicine
The head of emergency medicine shall:
1. Be a member of the program's core teaching faculty and meet the qualifications for faculty specified in paragraph III.D.2.
2. Be an experienced administrator in emergency medicine.

B. Program Director
There must be a single program director responsible for the program. The program director must function within a sound administrative organizational framework and have an effective teaching staff as essential elements of an approved residency program. Frequent changes in leadership or long periods of temporary leadership may adversely affect the accreditation status of the program. The program director shall:
1. Be licensed to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)
2. Be qualified and have at least 3 years' experience as a clinician, administrator, and educator in emergency medicine.
3. Be certified in emergency medicine by the American Board of Emergency Medicine or have equivalent qualifications in emergency medicine.
4. Be full time in emergency medicine, clinically active, and devote sufficient time and effort to the program to provide day-to-day continuity of leadership and to fulfill all of the responsibilities inherent in meeting the educational goals of the program.
5. Have an appointment in good standing, including clinical privileges, and work clinical shifts at the primary clinical site. He or she should be based at the primary clinical site.
6. Demonstrate active involvement in:
   a. Continuing emergency medical education
   b. State, regional, or national scientific societies
   c. Presentations and publications and other scholarly activities.
7. Have at least 50% of his or her time protected from clinical service.
8. Have appropriate authority to oversee and to organize the activities of the educational program, including but not limited to:
   a. Resident appointments and assignments
   b. Supervision, direction, and administration of the educational activities
c. Evaluation of the residents, faculty, and the residency program.

C. Responsibilities of the Program Director
1. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.
2. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.
3. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program.
4. The supervision of residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervising physicians.
5. Regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician.
6. The provision of a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.
7. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.
8. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.
9. Preparation of an accurate statistical and narrative description of the program as requested by the RRC for Emergency Medicine.

D. Teaching Staff
1. There must be a sufficient number of teaching staff with documented qualifications to instruct and supervise adequately all the residents in the program. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities.
2. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities. A core physician faculty member is one who provides clinical service and teaching, devotes the majority of his or her professional efforts to the program, and has sufficient time protected from direct service responsibilities to meet the educational requirements of the program.
   a. To ensure a sufficient number of faculty to provide adequate on-site 24-hour emergency department attending staff supervision and participation in ongoing scholarly activity and research in support of the emergency medicine residents, there must be a minimum of one core physician faculty member for every three residents in the program. When the total resident complement exceeds 30, the faculty-resident ratio of one core faculty member for every three residents may be altered with appropriate educational justification.
   b. The faculty must be certified by the American Board of Emergency Medicine or have equivalent qualifications in emergency medicine.
   c. A significant number of such faculty should be residency trained in emergency medicine.
   d. The faculty should show evidence of participation in a spectrum of professional activities within the institution as well as within local, state, regional, and national associations.
   e. While not all members of a faculty need be researchers, some core physician faculty members should be engaged in research and should have protected time and adequate support services to accomplish these tasks.
   f. The core faculty (as defined in III.E) should be involved in continuing scholarly activity such as publications in peer review journals, textbooks, local publications, formal lectures, and visiting professorships. Documentation of this involvement will be required and verified at the time of each periodic program review.
   g. Emergency medicine faculty members at the major clinical sites who average more than 15 hours per week in the administration and teaching (both clinical and didactic) of emergency medicine residents should have specific responsibilities defined in writing for the teaching and supervision of residents as well as for any designated administrative tasks.
3. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.
4. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.
5. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support for the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.
6. Other individuals hired as attending staff to provide clinical care and/or resident supervision in the emergency department must meet the qualifications specified in paragraph III.D.2.b.

E. Core Faculty Development
Each program should encourage the academic growth of its faculty. Faculty development opportunities should be made available to each faculty member. A written plan for each member of the core faculty should be prepared in consultation with the faculty member for whom the plan is being developed.

F. Other Program Personnel
Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program. Clinical support services must be provided on a 24-hour basis. The services must be adequate to meet reasonable and expected demands and must include the following services: nursing, clerical, intravenous, EKG, respiratory therapy, messenger/transporter and phlebotomy.

2. Board-prepared emergency physicians actively pursuing certification are considered as qualified under this requirement.
IV. Educational Program

The director and teaching staff of a program must prepare and comply with written educational goals for the program. All educational components of a residency program should be related to program goals. The program design and/or structure must be approved by the RRC for Emergency Medicine as part of the regular review process.

A. Organization and Structure

1. Patient Population
   a. There must be an adequate number of patients of all ages and both sexes, with a wide variety of clinical problems to provide a patient population sufficient to meet the educational needs of emergency medicine residents and other residents who are assigned for training in emergency medicine. Except under unusual circumstances, the primary clinical site should have at least 30,000 emergency department visits annually.
   b. Pediatric experience should be at least 16% of all resident emergency department encounters or 4 months of full-time-equivalent experience dedicated to the care of infants and children. The program can balance a deficit of patients by offering dedicated rotations in the care of infants and children. The formula for achieving this balance: a 1-month rotation equals 4% of patients. Although this experience should include the critical care of infants and children, at least 50% of the 4 months should be in an emergency setting.
   c. The number of critically ill or critically injured patients treated in aggregate by the residents at the primary clinical site should be significant, constituting at least 3% or 1,200 of the emergency department patients per year (whichever is greater) who are admitted to monitored care settings, operative care, or the morgue following treatment in the emergency department. Additional critical care experience is required during off-service rotations.
   d. There shall be a policy to provide personal and consultant physicians access to the emergency department for patient care. This policy must be consistent with these for physician access to other special care areas.

2. Supervision
   a. All residents within the emergency department must be under the supervision of emergency medicine faculty in the emergency department at all times, except when residents from other services provide supervised care to patients on their service. In such circumstances, they must be supervised by emergency medicine faculty or by faculty from their services. Sufficient faculty must be present to provide supervision appropriate to the care of each patient.
   b. All residents assigned to the emergency department must have supervision commensurate with their level of training.
   c. The presence of residents from other specialties must allow sufficient opportunities for senior responsibility by emergency medicine residents.
   d. The program director should ensure that all emergency medicine residents, while on rotation on other services, are appropriately supervised and are provided with an educational experience equivalent to that of an ACGME-approved residency in that specialty.

3. Progressive Responsibility
   The program director must ensure that the degree of professional responsibility accorded to a resident is progressively increased through the course of training commensurate with skill and experience. Included should be opportunities to develop clinical and administrative judgment in the areas of patient care, teaching, administration, and leadership.

4. Number of Residents
   a. There should be a minimum of six residents per year of training to achieve a major impact in the emergency department, to ensure meaningful attendance at emergency medicine conferences, to provide for progressive responsibility and to foster a sense of residency program and departmental identity. Exceptions to these standards will require justification based on sound educational principles and must demonstrate substantial compliance with the intent of this requirement.
   b. The program should request a number or range (minimum-maximum) of emergency medicine residents per year. The RRC will approve a range (minimum-maximum) or number of residents per year based on the educational resources of the program.

5. Presence of Other Residencies and Other Educational Resources
   The sponsoring institution for emergency medicine education must have a major educational commitment, as evidenced by training programs in other major specialties. The program must demonstrate the availability of other residencies or educational resources for the education of emergency medicine residents in anesthesiology, dermatology, medicine, neurology, obstetrics-gynecology, ophthalmology, orthopaedics, otolaryngology, pediatrics, plastic surgery, psychiatry, radiology (including diagnostic imaging), and surgery. A lack of such resources will adversely affect the accreditation status of the program.

6. Fellowships
   Programs must notify the RRC if they sponsor any emergency medicine-related fellowships within institutions participating in the program. Documentation must be provided describing the fellowship's relationship to and impact on the residency.
   a. The appointment of other individuals, such as fellows, for special training or education must not dilute or detract from the educational opportunities of regularly appointed emergency medicine residents.
   b. Addition or integration of such individuals into an existing residency program requires a clear statement of the areas of education, clinical responsibilities, duration of training, and overall impact on the educational needs of existing emergency medicine residents.

7. Duty Hours
   a. Emergency medicine rotations
      1. As a minimum, residents shall be allowed 1 full day in 7 days away from the institution and free of any clinical or academic responsibilities.
      2. While on duty in the emergency department, residents may not work longer than 12 continuous scheduled hours. There must be at least an equivalent period of continuous time off between scheduled work periods.
      3. A resident should not work more than 60 scheduled hours per week seeing patients in the emergency department and no more than 72 duty hours per week. Duty hours comprise all assigned clinical duty time and conferences, whether spent within or outside the educational program, including all on-call hours.
   b. Other rotations
      The program director must ensure that all residents have appropriate duty hours when rotating on other clinical services, in accordance with the ACGME-approved program requirements of that specialty.

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Graduate Medical Education Directory
c. Extracurricular activities
   Activities that fall outside the educational program may not be
   mandated, nor may they interfere with the resident’s performance
   in the educational process as defined in the agreement
   between the institution and the resident.

B. Curriculum
i. The program director must provide each resident and member of
   the faculty in writing and in advance of the experience a com-
   prehensive curriculum (covering the material listed in IV.B.5 and
   IV.B.6) specific to the educational needs of the emergency medi-
   cine resident. It shall be readily available for review. The cur-
   riculum shall include:
   a. The educational objectives for each rotation or other program
      assignment.
   b. Methods of implementation, including specific educational ex-
      periences used to meet each objective.
   c. Evaluation processes that are linked to the accomplishment of
      objectives.
   d. Feedback mechanisms.

2. Planned Educational Experiences
   Each program must offer to its residents an average of at least 5
   hours per week of planned educational experiences (not includ-
   ing change-of-shift report) developed by the emergency medi-
   cine residency program. These educational experiences should
   include presentations based on the defined curriculum, morbidity
   and mortality conferences, journal review, administrative
   seminars, and research methods. They may include, but are not
   limited to, problem-based learning, laboratories, and computer-
   based instruction, as well as joint conferences coprospered with
   other disciplines.

3. Emergency medicine faculty must attend and meaningfully par-
   ticipate in these planned educational experiences.

4. The program should ensure that residents are relieved of clinical
   duties to attend these planned educational experiences. Al-
   though release from some off-duty rotations may not be possi-
   ble, the program should require each resident to participate in
   at least 70% of the planned emergency medicine educational ex-
   periences offered (excluding vacations). Attendance should be
   monitored and documented.

5. The educational program must cover:
   a. Principles of emergency care
   b. Principles of injury control and disease prevention
   c. Administrative aspects of emergency medicine
   d. Emergency medical services
   e. Physician interpersonal skills
   f. Physician wellness
   g. Medical ethics and jurisprudence
   h. Critical analysis of medical literature

6. The curriculum must also include didactic and clinical education
   for acute and emergency care in the following areas:
   a. Abdominal and gastrointestinal disorders
   b. Cardiovascular disorders
   c. Cataractous disorders
   d. Endocrine, metabolic, and nutritional disorders
   e. Environmental disorders
   f. Head and neck disorders
   g. Hematologic disorders
   h. Immune system disorders
   i. Systemic infectious disorders
   j. Musculoskeletal disorders (nontraumatic)
   k. Nervous system disorders

l. Obstetrics
m. Pediatric disorders
n. Psychiatric and behavioral disorders
o. Renal disorders
p. Thoracic-respiratory disorders
q. Toxicology and clinical pharmacology
r. Traumatic disorders
s. Urogenital/gynecologic disorders
t. Administrative aspects of emergency medicine
u. Emergency medical services
v. Presentations/symptoms
w. Procedures/skills

7. The curriculum must include at least 2 months of inpatient crit-
   ical care rotations, during which the residents should have deci-
   sion-making experience that allows them to develop the skills
   and judgment necessary to manage critically ill and injured pa-
   tients who present to the emergency department.

8. The program must develop a system that provides and docu-
   ments efforts to teach residents the importance of patient fol-
   low-up. This should involve a representative sample of patients
   who are admitted to the hospital and who are discharged from
   the emergency department. Acceptable methods include but are
   not limited to the following:
   a. Written documentation of individual resident efforts
      (ward/ICU visits, telephone calls, and chart review)
   b. Timely provision of patient discharge summaries, operative
      reports, autopsy summaries, and/or consultation notes
   c. Regular case conferences (other than morbidity and mortality
      conference) that cover a representative sample of patient fol-
      low-ups

9. At least 50% of the training beyond the first year must take place
   in the emergency department. Excessive clinical time in the
   emergency department should not preclude adequate experi-
   ence in off-service areas needed to cover the curriculum.

10. Of the total educational experience, no less than 50% should
    take place under the supervision of emergency medicine faculty.
    Such experiences can include emergency medical services, to-
    xiology, pediatric emergency medicine, sports medicine, emer-
    gency medicine administration, and research in emergency
    medicine.

11. Prehospital Care
    Because prehospital care is an integral part of emer-
    gency medicine, there must be a formal, structured resident ex-
    perience. This should include participation in paramedic base
    station communications; emergency transportation and care in
    the field, including ground units and, if possible, air ambu-
    lance units; teaching prehospital personnel; disaster planning
    and drills; and quality assurance audits. If residents are re-
    quired to ride on ground or in air ambulance units, they must be
    notified of this requirement prior to the resident selection process.

12. Resuscitations
    Each resident must have sufficient opportunities to perform in-
    vasive procedures, monitor unstable patients, and direct major
    resuscitations of all types on all age groups. A major resuscita-
    tion is patient care for which prolonged physician attention is
    needed and interventions such as defibrillation, cardiac pacing,
    treatment of shock, intravenous use of drugs (eg, thrombolytics,
    vasopressors, neuromuscular blocking agents), or invasive pro-
    cedures (eg, cutdowns, central line insertion, tube thoracostomy,
    endotracheal intubation) are necessary for stabilization and
    treatment. The resident must have the opportunity to make ad-
    mission recommendations and direct resuscitations.
   a. Programs must maintain a record of all major resuscitations
      and procedures performed by each resident. The record must

4. Seventy percent refers to the minimum number of conferences required per week.
Program Requirements for Programs in Emergency Medicine

document their role, i.e., participant or director; the type of procedure(s); the location (ED, ICU, etc.); age of patient; and admission diagnosis. Only one resident may be credited with the direction of each resuscitation and the performance of each procedure.

b. These records should be verified by the residency director and should be the basis for documenting the total number of resuscitations and procedures in the program. They should be available for review by the site visitor and the RRC.

13. Continuous Quality Improvement
Residents must actively participate in emergency department continuous quality improvement programs. There must be formal regular conferences such as mortality and morbidity conferences in which the care rendered to patients in the emergency department is critically reviewed. Efforts should be made to gain permission for postmortem examinations and to review the results of these examinations.

14. Research and Scholarly Activity
Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. The staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:

a. Active participation in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.

b. Participation in journal clubs and research conferences.

c. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.

d. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.

e. Offering of guidance and technical support (e.g., research design, statistical analysis) for residents involved in research.

f. Provision of support for resident participation in scholarly activities. The curriculum should include resident experience in scholarly activity prior to completion of the program. Some examples of suitable resident scholarly activities are the preparation of a scholarly paper such as a collective review or case report, active participation in a research project, or formulation and implementation of an original research project.

g. Residents must be taught an understanding of basic research methodologies, statistical analysis, and critical analysis of current medical literature.

15. Physician Wellness
Physical and mental well-being are critical to the emergency physician's ability to provide proper care in a stressful environment. Emergency medicine residencies should include educational programs concerning physician wellness, stress, circadian rhythms, and substance abuse.

V. Evaluation
There must be effective, ongoing evaluation of all components of the residency program. This evaluation process must relate to the educational objectives of the program and provide a mechanism to effect change.

A. Evaluation of Residents
1. At least semiannually, there must be an evaluation of the knowledge, skills, and professional growth in emergency medicine of each resident, using appropriate criteria and procedures. Documentation of management of patients with emergency conditions, to include major trauma, medical and pediatric resuscitations, and performance of emergency procedures by each resident in the program, must be kept and reviewed periodically by the program director.

2. Formal evaluation of each resident during training is required and must include oral and written examinations. In addition, there must be a mechanism for formal evaluation of the resident on each rotation. A summary of the evaluations must be communicated in writing to and should be signed by the resident. Discussions of these results between the resident and the program director or his or her designee must be held on at least a semiannual basis.

3. Residents may be advanced to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.

4. A plan to remedy deficiencies must be in writing and on file, and progress and improvement must be monitored at least every 3 months.

5. A permanent record of evaluation for each resident must be maintained and must be accessible to the resident and other authorized personnel.

6. A written final evaluation must be provided for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.

B. Evaluation of Faculty
1. At least annually, individual faculty members must be formally evaluated by the head of emergency medicine, who should include information from the program director and the emergency medicine residents. A mechanism for preserving resident confidentiality in the evaluation process shall be implemented.

2. Faculty evaluations should include documentation of teaching ability, clinical knowledge, administrative and interpersonal skills, and scholarly contributions. A summary of the evaluations should be communicated in writing to each faculty member.

C. Evaluation of the Program
1. At least annually, the educational effectiveness of the entire program, including the quality of the curriculum and the clinical rotations, must be evaluated by residents and faculty in a systematic manner. The extent to which the educational goals have been met by residents must be assessed. Written evaluations by residents should be used in this process. The results of these evaluations must be kept on file.

2. The RRC may take into consideration information provided by the American Board of Emergency Medicine regarding performance of the program's graduates on the certifying examinations over a period of several years.

VI. Other
A. Notice of Changes in the Program
1. The program leadership is responsible for notifying the Executive Secretary of the RRC within 30 days, in writing, of any major changes in the program that may significantly alter the educational experience for the residents, including:

a. Leadership of the department or the program;
Program Requirements for Residency Education in the Subspecialties of Emergency Medicine

The following requirements pertain to programs in the subspecialties of Emergency Medicine. Each program must comply with the requirements listed below as well as with the specialty content found in the program requirements for the respective area.

These programs must exist in conjunction with and be an integrated part of an Accreditation Council for Graduate Medical Education (ACGME)-accredited Emergency Medicine residency program. Their existence should not compromise the integrity of the core program.

Residents appointed to the sports medicine programs should have completed an ACGME-accredited residency in emergency medicine, family practice, internal medicine, or pediatrics.¹

I. Program Goals and Objectives

The director and teaching staff of a program must prepare and comply with written educational goals for the program.

A. Program Design

All educational components of a residency program should be related to program goals.

1. The program design and/or structure must be approved by the Residency Review Committee (RRC) for Emergency Medicine as part of the regular review process.

2. Participation by any institution providing more than 3 months of training in a program must be approved by the RRC.

B. Program Evaluation

The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Written evaluations by residents should be utilized in this process.

II. Program Personnel

The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director

There must be a single program director responsible for the program.

1. Qualifications of the program director include:

   a. Requisite and documented clinical, educational, and administrative abilities and experience.

   b. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)

   c. Certification by one of the following Boards: American Board of Emergency Medicine, American Board of Family Practice, American Board of Internal Medicine, or American Board of Pediatrics, and possess a Certificate of Added Qualifications in Sports Medicine from that same Board. The RRC will determine the adequacy of alternate qualifications.

   d. Appointment in good standing to the medical staff of an institution participating in the program.

2. Responsibilities of the program director include:

   a. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.

   b. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.

   c. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program.

   d. The supervision of residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.

   e. Regular evaluation of residents’ knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician.

¹ Those lacking Board certification in one of these areas will not be considered eligible for a Certificate of Added Qualifications from any of the corresponding specialty Boards.
The program director, with participation of members of the teaching staff, shall:

1. At least semi-annually evaluate the knowledge, skills and professional growth of the residents, using appropriate criteria and procedures.

2. Communicate each evaluation to the resident in a timely manner.

3. Advise residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.

4. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.

f. The provision of a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident’s performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident’s permanent record maintained by the institution.

g. Implementation of fair procedures as established by the sponsoring institution regarding academic discipline and resident complaints or grievances.

h. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning, and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations which consistently produce undesirable stress on residents must be evaluated and modified.

i. Preparation of an accurate statistical and narrative description of the program as requested by a review committee.

B. Teaching Staff

1. There must be a sufficient number of teaching staff with documented qualifications to instruct and supervise adequately all the residents in the program. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities.

2. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.

3. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

4. The teaching staff must be organized and have regular documented meetings in order to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

5. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

C. Other Program Personnel

Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

III. Program Research and Scholarly Activity

Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility.

A. Scholarly Activity

The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:

1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.

2. Participation in journal clubs and research conferences.

3. Active participation in regional or national professional and scientific societies, particularly through presentations at the organization’s meetings and publications in their journals.

4. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.

5. Offering of guidance and technical support (eg, research design, statistical analysis) for residents involved in research.

6. Provision of support for resident participation in scholarly activities.

B. Library

1. Residents must have ready access to a major medical library either at the institution where the residents are located or through arrangement with convenient nearby institutions.

2. Library services should include the electronic retrieval of information from medical databases.

3. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

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Program Requirements for Residency Education in Sports Medicine

I. Introduction

In addition to complying with the requirements below, each program must comply with the program requirements in emergency medicine.

II. Scope and Duration of Training

An educational program in sports medicine must be organized to provide a well-supervised experience at a level sufficient for the resident to acquire the competence of a physician with added qualifications in this field. It shall be 12 months in duration.

The practice of sports medicine is the application of the physician’s knowledge, skills, and attitudes to those engaged in sports and exercise. Thus, the program must provide training in the development of the clinical competencies needed to diagnose and manage medical illnesses and injuries related to sports and exercise, for example, first-degree sprains, strains, and contusions, including appropriate referrals of, for example, fractures, dislocations, and third-
Program Requirements for Residency Education in Sports Medicine

degree sprains. Clinical experience must include injury prevention, preparticipation evaluation, management of acute and chronic illness or injury, and rehabilitation, as applied to a broad spectrum of undifferentiated patients. There must be experience functioning as a team physician and in the promotion of physical fitness and wellness.

The program should emphasize physiology and biomechanics; principles of nutrition; pathology and pathophysiology of illness and injury; pharmacology; effects of therapeutic, performance-enhancing, and mood-altering drugs; psychological aspects of exercise, performance, and competition; ethical principles; and medical-legal aspects of exercise and sports.

III. Teaching Staff
In addition to the program director, each program must have at least one other faculty member with similar qualifications who devotes a substantial portion of professional time to the training program.

The teaching staff must include orthopedic surgeons who are engaged in the operative management of sports injuries and other conditions and who are readily available to teach and provide consultation to the residents. Teaching staff from the disciplines of nutrition, pharmacology, pathology, exercise physiology, physical therapy, behavioral science, physical medicine and rehabilitation, and clinical imaging also should be available to assist in the educational program. Coaches and athletic trainers also should be included.

IV. Facilities and Resources
The program must include the following:

A. Patient Population
A patient population that is unlimited by age or gender and is adequate in number and variety to meet the needs of the training program must be available. The program director must ensure that residents are accorded meaningful patient responsibility with the supervision of a faculty member at all facilities and sites.

B. Sports Medicine Clinic
There must be an identifiable clinic that offers continuing care to patients who seek consultation regarding sports- or exercise-related health problems. The nonsurgical trainees must be supervised by a physician who has qualifications in sports medicine and is certified by the American Board of Emergency Medicine, the American Board of Family Practice, the American Board of Internal Medicine, or the American Board of Pediatrics or who possesses suitable equivalent qualifications.

Adequate, up-to-date diagnostic imaging and rehabilitation services must be readily available and accessible to clinic patients. Consultation in medical and surgical subspecialties, physical therapy, nursing, nutrition, and pharmacy must be available. The opportunity to render continuing care and to organize recommendations from other specialties and disciplines is mandatory and will require that medical records include information pertinent to the assessment and management of patients with health problems related to sports and exercise.

C. Sporting Events/Team Sports/Mass-Participation Events
The program must have access to sporting events, team sports, and mass-participation events during which the resident can have meaningful patient responsibility.

D. Acute-Care Facility
There must be an acute-care hospital with a full range of services associated with and in proximity to the sponsoring residency. This facility must be readily accessible to patients served by the program.

V. Educational Program
The curriculum must provide the educational experiences necessary for the residents to achieve the cognitive knowledge, psychomotor skills, interpersonal skills, professional attitudes, and practical experience required of physicians in the care of patients with health problems related to sports and exercise.

Didactic as well as clinical learning opportunities must be provided as part of the required curriculum for all residents. Conferences or seminars/workshops in sports medicine should be specifically designed for the residents to augment the clinical experiences.

All educational activities must be adequately supervised, while allowing the resident to assume progressive responsibility for patient care. The clinical activities in sports medicine should represent a minimum of 50% of the time in the program. The remainder of the time should be spent in didactic, teaching, and/or research activities and in the primary care or emergency medicine ambulatory facility.

Residents must spend 1/2 day per week maintaining their skills in their primary specialty.

Participation in the following must be required of all residents:

A. Preparticipation Evaluation of the Athlete
The program must ensure that all sports medicine residents are involved in the development and conduct of preparticipation examination programs.

B. Acute Care
The resident must have appropriate authority and responsibility to participate meaningfully in the medical care that is provided to acute-care patients (see Scope and Duration of Training, above). In addition, the program should arrange for residents to observe representative inpatient and outpatient operative orthopedic procedures.

C. Sports Medicine Clinic Experience
The resident must attend patients in a continuing, comprehensive manner, providing consultation for health problems related to sports and exercise. The resident shall spend at least 1 day per week for 10 months of the training period in this activity.

If patients are hospitalized, the resident should follow them during their inpatient stay and resume outpatient care following the hospitalization. Consultation with other physicians and professionals in other disciplines should be encouraged.

D. On-Site Sports Care
The resident should participate in planning and implementation of all aspects of medical care at various sporting events. The program must ensure that supervised sports medicine residents provide on-site care and management to participants in these events.

In addition, the resident must participate in the provision of comprehensive and continuing care to a sports team. Preferably, the experience should include several teams that engage in seasonal sports.

E. Mass-Participation Sports Events
The resident should participate in the planning and implementation of the provision of medical coverage for at least one mass-participation event. The program must ensure that its residents have experience that includes providing medical consultation, direct patient care, event planning, protection of participants, coordination with local EMS systems, and other medical aspects of those events.
VI. Specific Knowledge and Skills

A. Clinical
The program must provide educational experiences that enable residents to develop clinical competence in the overall field of sports medicine.

The curriculum must include but not be limited to the following content and skill areas:
1. Anatomy, physiology, and biomechanics of exercise
2. Basic nutritional principles and their application to exercise
3. Psychological aspects of exercise, performance, and competition
4. Guidelines for evaluation prior to participation in exercise and sport
5. Physical conditioning requirements for various activities
6. Special considerations related to age, gender, and disability
7. Pathology and pathophysiology of illness and injury as they relate to exercise
8. Effects of disease, eg, diabetes, cardiac conditions, arthritis, on exercise and the use of exercise in the care of medical problems
9. Prevention, evaluation, management, and rehabilitation of injuries
10. Understanding pharmacology and effects of therapeutic, performance-enhancing, and mood-altering drugs
11. Promotion of physical fitness and healthy lifestyles
12. Functioning as a team physician
13. Ethical principles as applied to exercise and sports
14. Medical-legal aspects of exercise and sports
15. Environmental effects on exercise
16. Growth and development related to exercise

B. Patient Education/Teaching
The program must provide the experiences necessary for the residents to develop and demonstrate competence in patient education regarding sports and exercise. They must have experience teaching others, eg, nurses, allied health personnel, medical students, residents, coaches, athletes, other professionals, and members of patients' families. There must also be relevant experience working in a community sports medicine network involving parents, coaches, certified athletic trainers, allied medical personnel, residents, and physicians.

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Program Requirements for Residency Education in Family Practice

I. Introduction

A. Duration of Training
Residencies in family practice must be at least 3 years in duration after graduation from medical school and must be planned so that a coherent, integrated, and progressive educational program with progressive resident responsibility is ensured. The training must be specifically designed to meet the educational needs of medical school graduates intending to become family physicians.¹

B. Size of Program
To provide adequate peer interaction, a program should have a minimum of 12 residents at various levels of training. Residents accepted into the first year of training should be assured a position for the full 3 years, barring the development of grounds for dismissal. Except for periods of transition, the program should offer the same number of positions for each of the 3 years.

C. Program Design
All educational components of a residency program should be related to program goals.
1. The program design and/or structure must be approved by the Residency Review Committee (RRC) as part of the regular review process.
2. Participation by any institution providing more than 6 months of training in the program must be approved by the RRC.

D. Scope of Training
Family practice residency programs must provide experience and responsibility for the residents in those areas of medicine that will be of importance to their future practice. Because family practice programs are in part dependent on other specialties for the training of residents, the ability and commitment of the institution to fulfill these requirements must be ensured.

Specifically, the sponsoring institution must ensure the existence and availability of those basic educational and patient care resources necessary to provide the family practice resident with meaningful involvement and responsibility in the necessary clinical specialties.

The existence of other programs sponsored by the residency, eg, geriatric medicine, must not result in the dilution of experience available to the family practice residents.

Instruction in the other specialties must be conducted by faculty with expertise in these fields. The curricula and plans for such rotations or experiences must be developed by the family practice faculty in concert with appropriate other specialty faculty.

There must be agreement regarding the residents' need to maintain concurrent commitment to their patients in the Family Practice Center during these rotations. The program should implement a plan to ensure that the residents retain their identity and commitment to the principles and philosophic attitudes of family practice throughout the training program, particularly while they learn the appropriate skills, techniques, and procedures of other specialties.

Family practice residency programs should provide opportunity for the residents to learn, in both the hospital and ambulatory settings, those procedural skills that can reasonably be anticipated as part of their future practices. There must be a method of documenting the procedures that are performed and of evaluating the residents' competence. Such documentation should be maintained by the program.

E. Resident Workload and Impairment
It is the responsibility of the residents to render patient care in the pursuit of their education without additional remuneration based on productivity. This does not preclude them from earning income from patient care during off hours, provided this activity does not interfere with their education and performance as residents. In addition, such activity should not be in conflict with the policies of the program or the sponsoring institution.

The goal of the family practice training program is to produce fully competent physicians capable of providing high-quality care to their patients. To prevent impairment and promote physician well-being, residents should be trained to balance personal and professional responsibilities in a way that can be reflected throughout their careers.

¹ Applicants who have had previous graduate training may be considered for admission to family practice residencies. Credit for this other training may be given only in the amount that is compatible with the Program Requirements for Residency Education in Family Practice. Directors should consult with the American Board of Family Practice on each case prior to making a determination regarding the equivalence of such training.
The program must have mechanisms for monitoring resident stress, including mental or emotional conditions inhibiting performance or learning, and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support service to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.

Both educational and patient care activities are best conducted when residents have appropriate amounts and levels of supervised responsibility and when their schedules allow them to make full utilization of their educational experiences without resultant counterproductive stress, fatigue, and depression.

There should be adequate resident staff to prevent excessive patient loads, excessive new admission workups, inappropriate intensity of service or case mix, and excessive length and frequency of call contributing to excessive fatigue and sleep deprivation. The program must:

1. Permit residents to spend, on average, at least 1 day out of 7 away from the residency program.
2. Assign on-call duty no more frequently than every third night, on the average.
3. Ensure adequate backup if sudden and unexpected patient care needs create resident fatigue sufficient to jeopardize patient care during or following on-call periods.

Formal written policies on these matters should be established and be available to the RRC, should they be requested.

II. Curriculum

A. Introduction

Every residency program must have the core or required curriculum as contained herein. However, on approval of the RRC, curriculum components may vary to reflect current regional practice patterns and patient care needs, and may be flexible enough to utilize the strengths of the program.

All major dimensions of the curriculum should be structured educational experiences for which written goals and objectives, a specific methodology for teaching, and a method of evaluation exist. These goals must be distributed to residents and teaching staff. Family physicians should be utilized to the fullest extent as teachers, consistent with their experience, training, and current competence.

The organization of the curriculum should reflect the application of sound educational principles, recognizing that some elements of the curriculum are best learned in a longitudinal experience, whereas others are more efficiently learned in an intensive experience of shorter duration.

Although the content of a rotation is more important than the time assigned to it, it is necessary to establish guidelines for the allocation of time segments to provide an objective measure of the opportunity provided for residents to achieve the cognitive knowledge, psychomotor skills, attitudinal orientation, and practical experience required of a family physician in each of the curricular elements.

Ranges of time are indicated for the various disciplines that the core curriculum comprises. This does not prohibit additional elective time in any of these areas.

B. Principles of Family Practice

The following curricular areas must be integral to each program. In addition, residents must be taught to demonstrate and clearly articulate the philosophy and concepts of family practice to patients.

1. Continuity of Care

Continuity of care is an important concept in family practice and is expressed in the role and interrelationships that the system (eg, solo or group), the professional, the individual patient, the patient's family, the institution, and the community play in the maintenance of continuity of care.

Residents should develop and maintain a continuing physician-patient relationship with a panel of patients throughout the 3-year period. This relationship must be in continuity during the resident's second and third years and must include patient contacts in the family practice center, inpatient facility, domiciliary facility, and patients' homes. Family practice residents must be able to admit and care for their family practice center patients in the hospital with family practice faculty supervision as appropriate.

Continuity of primary responsibility for patient care must be taught in a longitudinal way and include the following:

a. Ambulatory care
b. Inpatient care
c. Home care
d. Domiciliary care, eg, nursing, extended care facilities
e. Referral and consultation
f. Integrative function of the family physician
g. Utilization of community resources

Residents may spend time away from the family practice center in outside rotations designed to meet the needs of their training. The educational value of these rotations must be clearly documented. At these remote sites the same degree of constant on-site supervision is required as is required in the family practice center. The use of remote sites or rotations on clinical services must not interrupt continuity of care at the family practice center for longer than 2 months during the second and 2 months during the third year.

Residents must return to the family practice center and provide continuity of care for their panels of patients for at least 2 months before leaving for any additional remote experience.

2. Family Oriented Comprehensive Care

Family practice is a comprehensive specialty. The family physician assumes the responsibility for the total health care of the individual and family, taking into account the social, physiological, economic, cultural, and biological dimensions. Therefore, the programs must also emphasize the importance of comprehensive patient and family medical care. The residents must be given the opportunity to achieve high levels of competence in health maintenance; in disease and problem management; and in the development of knowledge, skills, and attitudes that reflect expertise in comprehensive patient management. Residents also must be trained in patient education.

The responsibility to provide health care to families is a fundamental concept of the discipline of family medicine. The program must provide the opportunity for residents to acquire knowledge and experience in the provision of longitudinal health care to families. This should include assisting family members in coping with serious illness of other family members. Although the treatment of illness is a basic function of family physicians, another of

2. The RRC expects all programs to have written detailed plans for their curricula that should be available for review by the site visitor. Do not append them to the forms.

3. In identifying ranges it is recognized that certain programs will deviate from those ranges for excellent educational reasons. It is the responsibility of the program director to document and justify variations from the ranges herein stated. Concurrent time spent in the family practice center should not be included when calculating the duration of the specialty rotations for which a number of required hours is specified. Family practice center time may be included in the required rotations, which are specified in months.

4. When residents find it necessary to change programs, they and the program directors involved should consult with the American Board of Family Practice prior to implementing such arrangements.
their major responsibilities is the maintenance of health among the family members. Comprehensive care must be taught longitudinally in didactic and clinical settings during the entire period of residency training. The following elements must be included and should be understood within the concept of family care, i.e., the impact on the family of the need for care of an individual within that family:

Individual
a. Health assessment
b. Health maintenance
c. Prevention
d. Acute and chronic illness or injury
e. Trauma
f. Rehabilitation
g. Behavioral counseling
h. Health education
i. Human sexuality

Family
a. Family structure
b. Family dynamics
c. Genetic counseling
d. Family development
e. Family planning
f. Child rearing and education
g. Aging
h. Death and dying
i. Epidemiology of illness in families
j. Role of family in illness management
k. Counseling and education
l. Nutrition

3. Primary Setting for Family Practice

While the residents' acquisition of knowledge, skills, and attitudes of family practice should take place during all curricular elements, the primary setting for this training is in the family practice center as the residents provide continuing, comprehensive care to their panels of patients.

In the first year of training an orientation period in the family practice center is needed to introduce the comprehensive approach to health care and to help the resident develop an identity as a family physician. Additionally, residents should be assigned to the family practice center for at least half day per week during the first year of training.

During the second year residents should spend from 2 to 4 half-days per week in the center. The amount of time in the center should be increased in the third year to 3 to 5 half-days per week. Intensive short duration assignments to the family practice center in the second and third years may be utilized for specific educational purposes, provided the overall curriculum is not thereby compromised.

C. Specialty Experience

1. Human Behavior and Psychiatry

Most of the family practice resident's knowledge and skills in this area should be acquired through a program in which psychiatry and behavioral science are integrated with family practice, internal medicine, pediatrics, and other disciplines throughout the resident's total educational experience.

The Family Practice Center should serve as the major site for residents to achieve the objectives of this portion of the curriculum. The human behavior curriculum should include the promotion of physician well-being and prevention of physician impairment.

There must be instruction in the following areas of human behavior:

a. Diagnosis and management of the psychological components of illness
b. Management of psychiatric disorders
c. Family dynamics
d. Physician/patient relationship
e. Patient counseling
f. Interviewing skills and other communicative skills
g. Normal psychosocial growth and variants
h. Stages of stress in the family life cycle
i. Substance abuse

There should be a formal didactic program that supplements the clinical experience in human behavior. Instruction should be provided by faculty who have training and experience necessary to apply modern behavioral and psychiatric principles to the care of an undifferentiated population.

There must be a psychiatry training component that encompasses recognition, diagnosis, and management of emotional and mental disorders. Elements of psychotherapy, psychopharmacology, psychiatric counseling, and a wide variety of mental illnesses must be included. Alcoholism and other substance abuse also must be specifically included in the curriculum. Intensive short-term experiences in facilities devoted to the care of chronically ill patients should be limited.

Qualified family physicians and psychiatrists should be involved in teaching this curricular component.

2. Community Medicine

Residents should have experiences that help them understand the role of private enterprise, voluntary organizations, and government in modern health care. In addition, residents should be taught the principles of the application of modern medical knowledge to the care of populations. There must be instruction in at least the following areas of community medicine:

a. Occupational medicine must include assessment of job-related illnesses and injuries, identification and management of job-related health risks, and fundamentals of disability assessment. Where possible, direct contact with organized industrial health programs is encouraged.

b. Community health resources must include contact with governmental, voluntary, and private agencies whose services can be utilized in the care of patients and their families.

c. Epidemiology of diseases must include the biologic and social causal relationships in common illnesses.

A. School health must include the study of school-related health problems, identification of common learning disabilities, adaptation to physical disabilities, and evaluation for organized sports and recreational activities.

e. Community health education must include examination of the methods available in the community for information transfer to the population, techniques of media utilization, and the physician's role in community health education.

f. Public health services must include the study of the public health resources available at the local, state, national, and international levels, and the means by which physicians can assist their patients through utilization of those resources.

g. Environmental health must include common problems such as toxic wastes, pure water supply, and air pollution, as well as the role of the physician in the community where these concerns exist.

3. Geriatrics

A significant portion of the practice of every family physician involves the care of the aged. Educational opportunities to address this element of the curriculum must be available throughout the resident's entire program. A structured multidisciplinary approach by faculty is essential to the teaching of this curricular...
element through didactic conferences and clinical experience in the following settings: Family Practice Center, the hospital, nursing homes, retirement homes, voluntary agencies, the patient's home. Education in the care of the aged must include the preventive aspects of health care, the physiological and psychological changes of senescence, the social-cultural parameters, the nutritional and pathological (acute and chronic) entities of aging, and the proper utilization of all members of the health care team. The residents must have sufficient training to be able to provide a functional assessment of elderly patients.

4. Disease Prevention/Health Promotion
Prevention of disease and disability, health promotion, health maintenance, and health screening are important aspects of family practice. Preventive medicine must include training in immunizations and in appropriate behaviors that protect individuals and families from illness or injury. Residents should be given the opportunity to acquire specific knowledge, skills, and attitudes that provide special competence in these areas. Residents should be instructed in the general principles of health promotion and appropriate intervention based on the needs of the individual patient and the community. This content should be presented in both didactic and clinical settings.

5. Internal Medicine
Internal medicine experience must provide the resident with the opportunity to acquire the knowledge and skills related to the diagnosis and management of nonsurgical diseases of adults. This experience should be utilized to enhance the resident's understanding of the pathophysiology of nonsurgical diagnostic and therapeutic techniques and to develop a disciplined, scientific approach to the practice of medicine.

The organization of the curriculum in internal medicine in large part will depend on the organization of the delivery of patient care services in the teaching environment. The experience must include both inpatient and outpatient experiences and progress from general to specific areas of content. Faculty should include family physicians, general internists, and subspecialists. The total duration of internal medicine training should be 8 to 12 months, including structured experiences in cardiology and critical care units (ICU/CCU), as well as education in endocrinology, pulmonary diseases, hematology and oncology, gastroenterology, infectious diseases, rheumatology, nephrology, allergy and immunology, and neurology. Where it exists, a family practice inpatient service may be utilized to fulfill a portion of this requirement.

6. Pediatrics
There must be a structured educational experience in pediatrics of 4 to 5 months, which involves ambulatory and inpatient experiences. This must include the newborn nursery, as well as experience in resuscitation, stabilization, and preparation for transport of the distressed neonate. The resident should have the opportunity to develop an understanding of the prenatal period, the growth and development of the newborn through adolescence, and emotional problems of children and their management. In addition, the resident should be taught to recognize and manage behavioral, medical, and surgical problems of children and adolescents in home, ambulatory, and hospital settings.

7. Surgery
The program must provide instruction in the diagnosis and management of surgical emergencies and the appropriate and timely referral of such emergencies for specialized care. The resident should also be taught to recognize conditions that are preferably managed on an elective basis.

The resident must be taught to appreciate the varieties of surgical treatments and the potential risks associated with them to be able to give proper advice, explanation, and emotional support to the patients and their families.

The resident must receive training in pre- and postoperative care, basic surgical principles, asepsis, handling of tissue, and technical skills to assist the surgeon in the operating room. The program should provide the opportunity for residents to develop technical proficiency in those specific surgical procedures that family physicians may be called on to perform. If the residents expect to include surgery as a major aspect of their practice, additional training must be obtained.

The requirement in surgery includes both general surgery and subspecialty experience. The residents must be required to participate in a structured experience in general surgery of 2 to 3 months' duration, including operating-room experience. Outpatient experiences in general surgery are encouraged in order for the resident to achieve competency in the diagnosis and management of a wide variety of common ambulatory general surgical problems.

The required experiences in surgical subspecialties may be in an intense short time format or in a longitudinal format. Between 140 and 200 hours of orthopedics are required, exclusive of time in the Family Practice Center, and 40 to 80 hours in each of the subspecialties of ophthalmology, otolaryngology, and urology are required. It is expected that experiences in the surgical subspecialties will be primarily in outpatient settings. This is in addition to learning from consultations.

8. Obstetrics and Gynecology
The resident must be provided with instruction in the biological and psychological impact of pregnancy, delivery, and care of the newborn on a woman and her family. The resident should be taught technical skills in the provision of antepartum and postpartum care and the normal delivery process as well as in the complications of pregnancy and their management. The resident should be taught certain operative skills in obstetrical and gynecological procedures. To acquire such skills, the family practice resident must spend at least 3 months in a structured educational experience, of which at least 2 months must be in obstetrics and at least 1 month must be in gynecology. The resident must assume the responsibility for provision of antenatal, natal, and postnatal care on a continuing basis to a number of patients sufficient to meet the required objectives. Whenever possible these patients should be derived from the residents' panel of patients in the family practice center.

A program must be able to make arrangements for additional Ob/Gyn training on an elective basis within the 36-month curriculum. This should include high-risk obstetrics and the opportunity for residents to develop technical proficiency in those surgical procedures that family physicians may be called on to perform.

9. Emergency Medicine
There must be a structured educational experience of 1 to 3 months' duration in the delivery of emergency medicine care with competent and full-time on-site supervision. The initial month should be a block rotation rather than a longitudinal format.

There must be sufficient quality and types of facilities, equipment, and support personnel and a broad range of patient problems to provide the residents with adequate experience in initial management of serious emergencies.

The emergency medicine portion of the curriculum should utilize both didactic and clinical experiences. Specific modern lifesaving skills must be taught to all residents, eg, advanced cardiac life support, airway insertion, chest tube insertion, hemostasis.
10. Sports Medicine
Sports medicine must include basic physical assessment for participation as well as evaluation and management of common injuries.

11. Dermatology
The curriculum must include a required educational experience in dermatology of 60 to 120 hours. Most of this experience should be in an outpatient setting with a qualified physician teacher of dermatology and should be supplementary to the learning that results from consultations.

12. Diagnostic Imaging
The program must provide the residents with ample opportunity to learn the appropriate application of techniques and specialty consultations in the diagnostic imaging of organs and body systems. Instruction should include the limitations and risks attendant on these techniques. The format of the instruction should be adapted to the resources available, but must include radiographic film and diagnostic imaging interpretation pertinent to family practice.

13. Practice Management
There must be 60 hours of instruction in practice management taught in both didactic and practical settings. Emphasis should be on providing the resident with the tools to be successful in practice while optimizing patient care.

The Family Practice Center should be considered one of the primary sites for teaching practice management.

14. Other Curricular Elements
Other areas of training should include:
   a. Nuclear medicine
   b. Physical medicine and rehabilitation
   c. Clinical laboratory science
   d. Use of drugs and their interaction
   e. Administration of anesthetics
   f. Professional liability-risk management

15. Electives
Electives that are well constructed, purposeful, and effective learning experiences are an essential part of a family practice residency program. Electives should not utilize more than 6 months of the total curriculum, but there must be a minimum of 3 months available to each resident for electives. The choice of electives by the resident must be made with the advice and consent of the program director. Most electives will be concerned with specialized areas of the major primary specialties and may be obtained in various ways. However, a structured educational experience in rural and/or inner-city health care should be available to residents if such experience adds a dimension to the educational program that is not otherwise present.

Electives are intended primarily to enrich the residents' training with experiences relevant to their future practice plans or interests as family physicians. After proper counseling by the program director and/or faculty, residents may use electives in part to remove identified deficiencies in knowledge or skills. No more than half of the total elective time may be used for remedial purposes.

16. Research and Scholarly Activity
Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility.
   a. Participation by Teaching Staff
      While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:

1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.
2. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.
3. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.
4. Offering of guidance and technical support (e.g., research design, statistical analysis) for residents involved in research and support for resident participation in scholarly activities.

b. Resident Research and Scholarly Activity
The participation of each resident in an active research program should be encouraged as an essential part of the preparation for a lifetime of self-education after the completion of formal training. Generally, this activity should be concurrent with other assignments, provided the responsibilities of the resident are adjusted in a way to permit a reasonable time for research activity. This experience should give the residents an awareness of the basic principles of study design, performance, analysis, and reporting, as well as an awareness of the relevance of research to patient care.

17. Conferences
There should be an overall conference schedule that covers the broad range of topics essential to family practice.

The conferences, seminars, or workshops for the family practice residents should be designed to augment their clinical experiences and should be held at least twice a week. These must be conducted by persons knowledgeable in the topics under discussion. Residents should also have the opportunity to present cases. Faculty, staff, and residents should participate, but conferences designed solely for the medical staff are inadequate as a substitute for a complete conference schedule in graduate training.

There also should be regularly scheduled conferences for faculty and residents during which critical review of medical literature takes place. Reasonable attendance requirements must exist, and faculty and resident attendance should be monitored by the program director.

III. Program Personnel
The program director and teaching staff are responsible for the general administration of the program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director
There must be a single program director responsible for the program. Continuity of leadership over a period of years is important to the stability of a residency program. Frequent changes in leadership or long periods of temporary leadership usually have an adverse effect on an educational program and will be cause for serious concern. The RRC must be notified promptly of any change in the leadership of the program.

1. Qualifications of the Director
The director must have demonstrated ability as a teacher, clinician, and administrator. The director must be capable of administering the program in an effective manner and be actively
involved in the care of patients. This individual must devote sufficient time to the residency program to provide continuity of leadership and to fulfill the administrative and teaching responsibilities inherent in achieving the educational goals of the program.

Prior to assuming this position the program director must have had a minimum of 2 years' full-time professional activity in family practice and should have had teaching experience in a family practice residency program. The director must be currently certified by the American Board of Family Practice or have suitable equivalent qualifications and must be licensed to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.) The RRC will determine the acceptability of alternate qualifications. The director also must hold an appointment in good standing to the medical staff of an institution participating in the program.

2. Responsibilities of Director

In addition to those responsibilities described in other sections of these requirements, the program director is responsible for the selection and supervision of the teaching staff and other program personnel at each institution participating in the program. She or he also has responsibility for selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.

The director is also responsible for the implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.

B. Family Practice Faculty

A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

The faculty must contain teachers with the diversified interests and expertise necessary to meet the training responsibilities of the program. One measure of the quality of a faculty is whether there is evidence of participation in research and other scholarly activities. The number of physician faculty must be sufficient to ensure that there is always an appropriate number who, without other obligations, supervise the residents in the family practice center whenever the residents are seeing patients. There must be at least one full-time equivalent family physician faculty member for each six residents in the program. Where part-time faculty are utilized, there must be evidence of sufficient continuity of teaching and supervision.

The family physician faculty should have a specific time commitment to patient care to enable them to maintain their clinical skills and serve as role models for the residents. Family physician faculty must have admitting and attending privileges in the hospital(s) where the majority of Family Practice Center patients are hospitalized.

Physicians in the other specialties who are part of the faculty of the program must devote sufficient time to teaching and supervising the family practice residents to ensure that the program's goals for their specialty areas are accomplished.

C. Consultant Faculty

Consultations by recognized specialists in their fields should be utilized. Consultations should occur in a location that allows residents to participate in the consultation as an educational experience.

D. Other Special Faculty

Additional faculty will be needed to provide input into areas such as behavioral science, the social sciences, nutrition, oral pathology, and pharmacy. If faculty in these disciplines are not readily available from current staff or faculty, resources in the community may be utilized.

E. Qualifications of Faculty

All of the key faculty members in the program must demonstrate suitable qualifications for their specialty areas, e.g., Board certification or equivalent for physician faculty, appropriate credentials for the nonphysician faculty. There must be an explicit system to develop and maintain academic and clinical skills of the faculty and to foster their continual professional growth and development.

F. Supervision

It is the responsibility of the program director and faculty to ensure that residents are appropriately supervised. Institutional and program policies and procedures must ensure that all residents are adequately supervised in carrying out their patient care responsibilities. Supervising policies of the residency should be consistent with those of the institution. These policies must be in writing and be distributed to all members of the program staff.

Faculty on-call schedules must be structured to ensure that supervision is readily available to residents on duty. An appropriately qualified member of the program's faculty must be in attendance on site when the needed services or procedures exceed the capability of the most senior supervising resident or when qualified senior residents are unavailable for supervision of more junior residents.

G. Support Staff

There must be appropriate numbers and types of support staff to meet the needs of health care and resident education.

IV. Patient Population

Patients who provide a broad spectrum of problems and represent varied income levels and ages and both sexes should be attended in the hospital, in the Family Practice Center, at home, and in institutions for long-term care or rehabilitation. These must be an institutional patient care evaluation program to foster continuing improvement of ambulatory and inpatient care provided by the institution and medical staff.

A. Inpatients

A sufficient number of inpatients must be available to provide a broad spectrum of problems in any given discipline. The disease spectrum available for resident education must be that common to the general community. The program must offer a structured educational experience that allows residents the opportunity to attain expertise in emergency initial care of unusual or life-threatening problems.

B. Ambulatory Patients

A stable patient population of sufficient number and variety is necessary to ensure comprehensiveness and continuity of experiences for the residents. The major part of the patient visits in the Family Practice Center should be from family units for which a resident is responsible. A patient population seeking only episodic care does not meet this requirement.

There must be a sufficient volume of patients in the family practice center to provide adequate experience for the residents in the program. While the total number of patients to be seen by each resident is not specified, the following minimum numbers of patients should be seen by residents as they progress through their training: one to two patients per hour for first-year residents; two to three patients per hour for second-year residents; and three to four patients per hour for third-year residents.

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5. This does not apply to program directors who were appointed before July 1, 1983.
V. Facilities
A program must provide the facilities required for the education of residents in sufficiently close proximity to the primary hospital to allow for the efficient functioning of the training program.

Multiple teaching facilities may be used as long as there is no compromise of the quality of the educational program and no significant reduction in attendance of residents at teaching sessions or reduction of camaraderie and exchange of information among residents and/or faculty.

A. Primary and Affiliated Hospital
1. Number of Beds
   It is essential that the participating hospitals, primary and affiliated, be of sufficient size and have an adequate number of occupied teaching beds to ensure a sufficient patient load and variety of problems for the education of the number of residents and other learners on the services. Experience has demonstrated that facilities that have fewer than 135 occupied beds often are not able to provide adequate physical, human, and educational resources for training in family medicine. 6

2. Medical Staff
   Qualified medical staff must be available in sufficient number to ensure adequate patient care and consultation in family practice, internal medicine, surgery, pediatrics, obstetrics/gynecology, pathology, psychiatry, radiology, otorhinolaryngology, urology, neurology, cardiology, dermatology, orthopedics, ophthalmology, anesthesia, and emergency medicine.

   The medical staff should be organized so that family physician members may participate in appropriate hospital governance activities on a basis equivalent to that of those in other specialties. Where a hospital is departmentalized, there should be a clinical department of family practice.

3. Use of Multiple Hospitals
   Multiple hospitals may be used if the primary facility is unable to provide all of the required experiences. Such additional hospitals must not be at such a distance from the primary teaching sites that they require excessive travel time or otherwise fragment the educational experience.

B. Family Practice Center
1. Functional Status
   A family practice center must be in operation for the training of family practice residents (whether or not in a temporary location) on the date the program begins. If more than one center is used, the additional centers must meet the same criteria as the primary center. Experiences available in the multiple centers should be comparable.

2. Design
   The center must be a clearly identifiable unit that includes a separate entry, waiting room, and appointment system. The design of the Family Practice Center must ensure adequate patient flow to provide appropriate patient care, accessibility, and teaching opportunities. The Family Practice Center should have provisions for handicapped persons.

3. Size
   Two examining rooms per physician working in the center at one time (counting both residents and physician faculty who have patient care responsibilities) should be available. In cases where the Family Practice Center is utilized for training other learners, eg, fellows, nurses, medical students, and physician assistants, sufficient additional space must be available so that the efficiency of the residents is not compromised.

   Other functional areas must include a business office, a record room, an office library, patient care rooms, a conference room, a basic laboratory appropriate to office practice, a resident work area, and faculty/staff offices.

   The Family Practice Center should provide space for the physician to conduct individual and small-group counseling.

4. Diagnostic Laboratory and Imaging Services
   There must be provision for diagnostic laboratory and imaging services so that there is prompt and convenient access by patients and residents for patient care and education.

5. Location
   The location of the Family Practice Center in relation to the hospital(s) should be such that it allows conservation of the residents’ time in order to utilize efficiently the educational opportunities and provide necessary patient care at both sites.

6. Equipment
   The Family Practice Center must contain all equipment necessary to meet the basic needs of an efficient family practice office and an acceptable educational program for family practice residents.

7. Record System
   Patients’ ambulatory medical records must be maintained so that easy and prompt accessibility is ensured at all times.

   The record system must provide for patient care audit and chart review and must be capable of prompt documentation of all facets of family care, including care rendered in the Family Practice Center, hospital, home, via telephone, and that provided in other institutions.

   The medical record system must be designed for the retrievability of data pertinent to patient care and the monitoring of the residents’ experiences.

8. Scheduling of Appointments
   Appointments must be scheduled in the Family Practice Center by regular employees of the center who are cognizant of the importance of the appointment system in the delivery of continuing care and in ensuring patient access to a requested physician.

9. Hours of Operation
   The Family Practice Center must be an exclusive facility available for patient services during weekday hours commensurate with community medical practices to provide continuing comprehensive care and a place where patients may expect to obtain services.

   When the Family Practice Center is closed, there must be provision for patients to have access to their personal physician or a designated substitute physician.

10. Source of Income
    The fiscal operation of the Family Practice Center must reflect a balance between service and education that does not adversely affect the educational objectives. There should be a plan to ensure long-range fiscal stability of the program.

C. Ambulatory Units Other Than Family Practice Centers
   Ambulatory units other than Family Practice Centers are those sites that provide experiences that differ from those offered in the Family Practice Center and that enhance the educational program.

D. Library
1. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.

2. Library services should include the electronic retrieval of information from medical databases.

6. Requirements concerning number of hospital beds may be regarded more appropriately in terms of those available for use in training residents, whether in the primary hospital alone or in the primary plus affiliated hospitals combined. Number of beds must be perceived in context of the total number, types, and locations, as well as medical staff available for quality care and teaching.
3. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

VI. Evaluation

A. Evaluation of Residents

There must be adequate, ongoing evaluation of the knowledge, competency, and performance of the residents. Entry evaluation assessment, interim testing, and periodic reassessment, as well as other modalities for evaluation, should be utilized.

Written evaluation of each resident's knowledge, skills, professional growth, and performance, using appropriate criteria and procedures, must be accomplished at least semiannually. These evaluations must be communicated to the resident in a timely manner.

Residents should be advanced to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.

The program must maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.

The program director and faculty are responsible for provision of a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.

A system for documentation of residents' experiences must be utilized to monitor the educational experience and to provide documentation for future hospital privileges.

B. Evaluation of Faculty

All teaching faculty must be evaluated on an ongoing basis. Documentation of faculty evaluation should include teaching ability, clinical knowledge, attitudes, scholarly contributions, interpersonal skills, and communication abilities.

C. Evaluation of Patient Care

The program must consider high-quality patient care as one of its primary objectives. Assessment of the care that is provided must be current and retrospective to provide necessary feedback for continuous improvement of ambulatory and inpatient care.

D. Evaluation of the Program

The family practice residency must incorporate all elements of the Program Requirements. The educational effectiveness of a program must be evaluated in a systematic manner. To implement this, the program should engage in self-evaluation within the context of the educational goals and objectives, the needs of the residents, teaching responsibilities of the faculty, the availability of administrative and financial support, and adequate health-care resources within the community. This evaluation should include an examination of the balance among education, research, and service and of the extent to which the educational goals have been met by residents. Written evaluations by residents should be utilized in this process. Continuing medical education should occupy a prominent place in the program, and residents should be encouraged to develop learning patterns to continue their education.

The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

E. Evaluation of the Graduate

It is the responsibility of all programs to maintain contact with their graduates to obtain information about practice effectiveness, relevance of training to practice demands, personal satisfaction with role, practical responsibilities, and evidence of participation in continuing medical education, and board certification.

VII. Information Items

A. Evaluation by the RRC

The program will be evaluated by the RRC at regular intervals. It is the responsibility of the program director to submit accurate and complete information as requested by the RRC on the program information forms or in special communication from the committee. The RRC will judge the degree of compliance with the Program Requirements and with the Institutional Requirements.

One measure of the quality of a residency program is the performance of its graduates on the certifying examination of the American Board of Family Practice. In its evaluation of residency programs, the RRC will pay due consideration to the information provided by the board regarding resident performance on the certifying examination over a period of several years.

The degree of resident attrition and the presence of a critical mass of residents also are factors that will be considered by the RRC in the overall evaluation of the program.

B. Notification of Change

The RRC must be notified promptly of major changes in the program, including a change in leadership. Prior approval of the RRC is required for the following: (1) the addition or deletion of a major participating hospital, (2) the utilization of a new and/or additional family practice center or the alteration of an existing center in any way that might make the facility less suitable, and (3) major changes in the program format. On review of a proposal for major change in a program, the RRC may determine that a site visit is necessary before a decision can be made.

C. Board Certification

Family practice residents who plan to seek certification by the American Board of Family Practice should communicate with the executive secretary of the board.

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Program Requirements for Residency Education in Family Practice Geriatric Medicine and Family Practice Sports Medicine

The following generic requirements pertain to programs in Family Practice Geriatric Medicine and Family Practice Sports Medicine. Each program must comply with the requirements listed below as well as with the specialty content found in the Program Requirements for the respective area.

These programs must exist in conjunction with and be an integrated part of an Accreditation Council for Graduate Medical Education (ACGME)-accredited family practice residency program. Their existence should not compromise the integrity of the core program.

Residents who are appointed to programs in geriatric medicine must have satisfactorily completed an ACGME-accredited residency in family practice or internal medicine. Residents appointed to the
sports medicine programs should have completed an ACGME-accredited residency in emergency medicine, family practice, internal medicine, or pediatrics.1

I. Program Organization

A. Program Design

The director and teaching staff of a program must prepare and comply with written educational goals for the program. All educational components of the residency program must be related to these goals and should be structured educational experiences for which a specific methodology and method of evaluation exist.

The program design and/or structure must be approved by the Residency Review Committee (RRC) as part of the regular review process.

B. Participating Institutions

Participation by any institution providing more than 3 months of training in a program must be approved by the RRC.

A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

II. Program Personnel

The program director and the teaching staff are responsible for the general administration of the program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director

There must be a single program director responsible for the program, who is based primarily at the teaching center. The director must be fully committed to the program in order to devote sufficient time to the achievement of the educational goals and objectives. She or he must have sufficient authority to manage, control, and direct the program.

1. Qualifications

The program director must possess the following qualifications:

a. Requisite and documented clinical, educational, and administrative abilities and experience.

b. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)

c. Certification by the specialty board in the discipline of the program or demonstrate suitable equivalent qualifications. For directors of programs in geriatric medicine this means certification by the American Board of Family Practice or the American Board of Internal Medicine and a Certificate of Added Qualification in Geriatric Medicine from the same board.

Directors of programs in sports medicine may be certified by any of the following Boards: American Board of Emergency Medicine, American Board of Family Practice, American Board of Internal Medicine, or American Board of Pediatrics, and must possess a Certificate of Added Qualification in Sports Medicine from that same board. The RRC will determine the adequacy of alternate qualifications.

d. Appointment in good standing to the medical staff of an institution participating in the program.

2. Responsibilities

The responsibilities of the program director include:

a. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff and be readily available for review.

b. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.

c. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program.

d. Supervision of residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.

e. Preparation of an accurate statistical and narrative description of the program as requested by the RRC.

B. Teaching Staff

1. There must be a sufficient number of teaching staff with documented qualifications, i.e., board certification for the physician faculty and appropriate credentials for the nonphysician teaching staff, to instruct and supervise adequately all the residents in the program. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities.

2. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.

C. Other Program Personnel

Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

III. Workload/Call Schedule

The schedule for the residents should allow them to make full utilization of their educational experiences without resultant counterproductive stress, fatigue, and depression. There should be adequate staff to prevent excessive patient loads and excessive length and frequency of call. On-call duty should occur no more frequently than every three night, averaged monthly, and residents must be permitted to spend a monthly average of at least 1 day out of 7 away from program duties. Formal written policies on these matters must be established and available for review.

There must be attention given to monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.

IV. Program Research and Scholarly Activity

Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility.

1. Those lacking board certification in one of these areas will not be considered eligible for a Certificate of Added Qualification from any of the corresponding specialty boards.
A. Teaching Staff Research/Scholarly Activity
The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:
1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.
2. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.
3. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.

B. Resident Research/Scholarly Activity
The residents must be exposed to and take part in research programs that provide an environment conducive to a questioning attitude and critical analysis. The program must provide support for resident participation in scholarly activities and offer guidance and technical support, e.g., research design, statistical analysis, for residents involved in research. Residents must participate in journal clubs and research conferences.

C. Library
Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.

The library services should include the electronic retrieval of information from medical databases.

There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

V. Evaluation
A. Evaluation of Residents
There must be regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician. The program director, with participation of members of the teaching staff, shall:
1. Evaluate the knowledge, skills, and professional growth of the residents at least semiannually, using appropriate criteria and procedures.
2. Communicate each evaluation to the resident in a timely manner.
3. Advise residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.
4. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.
5. Provide a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.
6. Implement fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.

B. Evaluation of the Teaching Staff
Formal mechanisms for annual evaluation of the teaching staff must exist and must include confidential resident participation.

C. Program Evaluation
The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. At least one resident representative should participate in these reviews, and written evaluations by residents should be utilized in this process.

There should also be periodic evaluation of the utilization of resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

One measure of the quality of a program will be the performance by its graduates on the examinations of the certifying board.

VI. Certification
Those planning to seek a Certificate of Added Qualifications from their primary board should communicate with the administrative officer of the board to ascertain the full requirements.

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Program Requirements for Residency Education Programs in Family Practice Geriatric Medicine
In addition to complying with the Program Requirements for Residency Education in Family Practice Geriatric Medicine, programs must also comply with the following requirements, which may in some cases exceed the common requirements.

I. Educational Program
An educational program in geriatric medicine must be organized to provide a well-supervised experience at a sufficient level for the resident to acquire the competence of a physician with added qualifications in the field. It shall be 34 months in duration.

Clinical experience must include opportunities to observe and manage elderly patients with a wide variety of medical problems on an inpatient and outpatient basis. Residents must be given the opportunity to provide both primary care and consultation for patients in acute, ambulatory, community, and long-term care settings in order to understand the interaction of natural aging and disease as well as the techniques of assessment, therapy, and management. Additionally, residents must be given the opportunity to care for persons who are well and require routine and preventive health-care measures.

The program should include an emphasis on the physiology of aging, the pathophysiology of common diseases in the elderly, functional assessment, mental status assessment, and concepts of treatment and management, in the acute and long-term care setting as well as in the community and in the home.

Attention should be directed as well to the behavioral aspects of illness, socioeconomic factors, and ethical and legal considerations that may impinge on medical management.

The program must provide the opportunity for residents to maintain their basic primary skills during the course of this training. At
least ½ day per week must be spent in a continuity of care experience in the resident's primary discipline.

II. Faculty and Staff

A. Program Director
The program director must have considerable experience in geriatric medicine and must have demonstrated interest in research and a career commitment to geriatric medicine.

B. Other Teaching Staff
In addition to the program director, each program must have at least one other faculty member with similar qualifications who devotes a substantial portion of professional time to the training program. For programs with more than two residents, there must be 0.5 additional faculty member for each two additional residents. Some of these faculty may be part-time in geriatric medicine or drawn wholly from collaborating programs. The faculty commitment must not attenuate the quality of the core residency program. Because of the multidisciplinary nature of geriatric medicine, the program must have meaningful relationships with physical medicine and rehabilitation, neurology, and psychiatry. Appropriate relationships with other disciplines, including but not limited to general surgery, orthopaedics, ophthalmology, otolaryngology, urology, audiology, occupational therapy, and speech therapy, should be maintained. Additionally, a liaison must be established with the departments of nursing and social work.

C. Geriatric Care Team
There must be a meaningful experience with a physician-directed interdisciplinary geriatric team at the acute-care hospital (on the inpatient service or in the outpatient setting) or in a family practice center and, if possible, in one of the long-term care facilities. Essential members include a geriatrician, a nurse, and a social worker. Additional desirable members of the team include a variety of individuals representing other disciplines such as neurology, psychiatry, physical medicine and rehabilitation, physical therapy, pharmacy, and chaplaincy. Regular team conferences must be held.

III. Facilities/Resources
A patient population adequate to meet the needs of the training program must be available in the facilities in which the educational experiences take place. Individuals of both sexes with a spectrum of chronic illness and potential for rehabilitation must be available. At all facilities utilized by the program the resident must be given opportunities to provide meaningful care. At each setting certain activities are mandated. The program must include the following:

A. Acute-Care Hospital
The acute-care hospital central to the geriatric medicine program must be an integral component of a teaching center. It must have the full range of services usually ascribed to an acute-care general hospital, including intensive care units, an emergency room, operating rooms, diagnostic laboratory and imaging services, and a pathology department.

B. Long-term Care Institution
One or more long-term care institutions, such as a skilled nursing facility or chronic care hospital, is a necessary component of the geriatric medicine program. The total number of beds available must be sufficient to permit a comprehensive educational experience. The institution(s) must be approved by the appropriate licensing agencies of the state, and the standard of facilities and care in each must be consistent with those promulgated by the Joint Commission on Accreditation of Healthcare Organizations.

C. Long-term Noninstitutional Care
At least one noninstitutional care service, for example, home care, day care, or life care, is a necessary component of the geriatric medicine program.

D. Ambulatory Care Program
The ambulatory care program must comprise a minimum of 25% of the resident's time over 18 months. Each resident should evaluate approximately one to three new geriatric patients and four to eight follow-up geriatric patients each week. This must include at least ½ day per week spent in a continuity of care experience. This experience must be designed to render care in a geriatric clinic or family practice center to elderly patients who may require the services of multiple medical disciplines (including but not limited to neurology, gynecology, urology, psychiatry, podiatry, orthopedics, dentistry, audiology, and ophthalmology), as well as nursing, social work, and nutrition. The opportunity to render continuing care and to coordinate the implementation of recommendations from these medical specialties and disciplines is mandatory. Thus, medical records must include information pertinent to the assessment and management of older patients, including the functional assessment.

E. Additional Educational Environment
Peer interaction is essential for residents. To achieve this goal, an accredited training program is at least one relevant specialty other than family practice must be formally available to the teaching center sponsoring the training program in geriatric medicine. This may be accomplished by affiliation with another educational institution for the enrichment of the educational experience.

There must be a formal affiliation agreement between each long-term care facility included in the program and the sponsoring institution, in which each institution must acknowledge its responsibility to provide a high quality of care, adequate resources, and administrative support for the educational mission. In addition, there must be a letter of agreement between each long-term care facility and the office of the director of the geriatric medicine program that guarantees the director appropriate authority at the long-term care institution to carry out the training program.

IV. Specific Program Content
The curriculum must ensure the opportunity for residents to achieve the cognitive knowledge, psychomotor skills, interpersonal skills, professional attitudes, and practical experience required of a physician in the care of the aged.

Didactic as well as clinical learning opportunities must be available to the resident. Conferences or seminars/workshops in geriatric medicine should be specifically designed for the resident to augment the clinical experiences.

As the residents progress through their training, they must have the opportunity to teach personnel such as nurses, allied health personnel, medical students, and residents. Appropriate experiences designed to refine educational and teaching skills of the residents and to develop the necessary administrative skills must be provided.

Appropriate supervision of the residents must be provided during all of their educational experiences.

The following components must be provided:

A. Geriatric Medicine Consultation Program
This program must be formally available in the ambulatory setting, the inpatient service, and/or emergency medicine in the acute-care hospital.

B. Long-term Care Experience
In the long-term care institutional setting each resident must have a minimum of 12 months of continuing longitudinal clinical experience with an assigned panel of patients for whom the resident is
the primary provider. Additional block time long-term care experience is encouraged. Emphasis during the longitudinal experience should be focused on (1) the approaches to diagnosis and treatment of the acutely and chronically ill frail elderly in a less technologically sophisticated environment than the acute-care hospital, (2) working within the limits of a decreased staff-patient ratio compared with acute-care hospitals, (3) a much greater awareness of and familiarity with physical medicine and rehabilitation, and (4) the challenge of the clinical and ethical dilemmas produced by the illness of the very old.

Experience with home visits and hospice care must be included. The resident must be exposed to the organizational and administrative aspects of home health care.

C. Research Program
Because gerontological research spans a very broad spectrum, from molecular biology to health and social policy, the research capabilities and resources of the faculty intensively involved in clinical geriatric education may not meet the needs of all residents. Therefore, working relationships with faculty from the relevant disciplines will be important, and some may be selected as research mentors for geriatric medicine residents. The disciplines within public health are especially likely to be relevant. However, the primary responsibility for the resident must reside with the program director in geriatric medicine.

The completion of a research project by each resident during the training program is strongly encouraged.

D. Geriatric Psychiatry
Identifiable structured didactic and clinical experiences in geriatric psychiatry must be included in the program of each resident. Behavioral sciences such as psychology/social work and others must be included in the curriculum.

E. Curriculum
The training program must provide opportunities for the residents to develop clinical competence in the overall field of geriatric medicine. The curriculum of the program must exhibit, as a minimum, the following content and skill areas:

1. Current scientific knowledge of aging and longevity, including theories of aging, the physiology and natural history of aging, pathologic changes with aging, epidemiology, and diseases of the aged.
2. Aspects of preventive medicine, including nutrition, exercise, and screening for and immunization against disease. Instruction about and experience with community resources dedicated to these activities should be included.
3. Geriatric assessment, both cognitive and functional: activities of daily living (ADL), the instrumental activities of daily living (IADL), the appropriate use of the history, physical and mental examination, and laboratory.
4. Appropriate coordination of the actions of multiple health professionals, including physicians, nurses, social workers, dieticians, and rehabilitation experts, in the assessment and implementation of treatment.
5. Topics of special interest to geriatric medicine including but not limited to cognitive impairment, falls, incontinence, osteoporosis, fractures, dizziness, sensory impairment, pressure ulcers, and malnutrition.
6. Diseases that are especially prominent in the elderly or that have different characteristics in the elderly, including neoplastic, cardiovascular, neurologic, musculoskeletal, metabolic, and infectious disorders.
7. Pharmacologic problems associated with aging, including changes in pharmacokinetics and pharmacodynamics, drug interactions, overmedication, polypharmacy, and compliance issues.
8. Psychosocial aspects of aging, including housing, depression, bereavement, and anxiety.
9. The economic aspects of supporting services, including Title III of the Older Americans Act, Medicare, Medicaid, and cost containment.
10. Ethical and legal issues especially pertinent to geriatric medicine, including limitation of treatment, competency, guardianship, right to refuse treatment, advance directives, wills, and durable power of attorney for medical affairs.
11. General principles of geriatric rehabilitation, including those applicable to patients with orthopaedic, rheumatologic, cardiological, and neurologic impairments. These principles should include those related to the use of physical medicine modalities, exercise, functional activities, assistive devices, environmental modification, patient and family education, and psychosocial and recreational counseling.
12. Management of patients in long-term care settings, including noninterventions, knowledge of the administration of long-term institutions (including, for example, safety regulations), and the continuum from short- to long-term care.
13. Research methodologies related to geriatric medicine, including biostatistics, clinical epidemiology, medical information, information sciences, decision analysis, critical literature review, and research design, including cross-sectional and longitudinal methods. (The training identified in sections 12 and 13 may be appropriate to the receipt of an academic degree in public health or hospital administration.)
14. Preoperative assessment and involvement in postoperative management.
15. Iatrogenic disorders and their prevention.
16. Communication skills with patients, families, professional colleagues, and community groups, including presenting case reports, literature searches, and research papers.
17. The pivotal role of the family in caring for many elderly and the community resources (formal support systems) required to support both patient and family.

V. Certification
Those planning to seek a Certificate of Added Qualifications from the American Board of Internal Medicine or the American Board of Family Practice should communicate with the administrative officer of the board as listed in the Graduate Medical Education Directory to ascertain the full requirements.

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Program Requirements for Residency Education in Family Practice Sports Medicine

I. Introduction
In addition to complying with the Program Requirements for Residency Education in Family Practice Geriatric Medicine and Family Practice Sports Medicine, programs must also comply with the following requirements, which may in some cases exceed the common requirements.

II. Scope and Duration of Training
An educational program in sports medicine must be organized to provide a well-supervised experience at a level sufficient for the
resident to acquire the competence of a physician with added qualifications in this field. It shall be 12 months in duration.

The practice of sports medicine is the application of the physician's knowledge, skills, and attitudes to those engaged in sports and exercise. Thus, the program must provide training in the development of the clinical competencies needed to diagnose and manage medical illnesses and injuries related to sports and exercise, for example, first-degree sprains, strains, and contusions, including appropriate referrals of, for example, fractures, dislocations, and third-degree sprains. Clinical experience must include injury prevention, preparticipation evaluation, management of acute and chronic illness or injury, and rehabilitation, as applied to a broad spectrum of undifferentiated patients. There must be experience functioning as a team physician and in the promotion of physical fitness and wellness.

The program should emphasize physiology and biomechanics; principles of nutrition; pathology and physiopathology of illness and injury; pharmacology; effects of therapeutic, performance-enhancing, and mood-altering drugs; psychological aspects of exercise, performance, and competition; ethical principles; and medical-legal aspects of exercise and sports.

III. Teaching Staff
In addition to the program director, each program must have at least one other faculty member with similar qualifications who devotes a substantial portion of professional time to the training program.

The teaching staff must include orthopaedic surgeons who are engaged in the operative management of sports injuries and other conditions and who are readily available to teach and provide consultation to the residents. Teaching staff from the disciplines of nutrition, pharmacology, pathology, exercise physiology, physical therapy, behavioral science, physical medicine and rehabilitation, and clinical imaging also should be available to assist in the educational program. Coaches and athletic trainers also should be included.

IV. Facilities and Resources
The program must include the following:

A. Patient Population
A patient population that is unlimited by age or gender and is adequate in number and variety to meet the needs of the training program must be available. The program director must ensure that residents are accorded meaningful patient responsibility with the supervision of a faculty member at all facilities and sites.

B. Sports Medicine Clinic
There must be an identifiable clinic that offers continuing care to patients who seek consultation regarding sports- or exercise-related health problems. The nonsurgical trainees must be supervised by a physician who has qualifications in sports medicine and is certified by the American Board of Emergency Medicine, the American Board of Family Practice, the American Board of Internal Medicine, or the American Board of Pediatrics or who possesses suitable equivalent qualifications.

Adequate, up-to-date diagnostic imaging and rehabilitation services must be readily available and accessible to clinic patients. Consultation in medical and surgical subspecialties, physical therapy, nursing, nutrition, and pharmacy must be available. The opportunity to render continuing care and to organize recommendations from other specialties and disciplines is mandatory and will require that medical records include information pertinent to the assessment and management of patients with health problems related to sports and exercise.

C. Sporting Events/Team Sports/Mass-Participation Events
The program must have access to sporting events, team sports, and mass-participation events during which the resident can have meaningful patient responsibility.

D. Acute-Care Facility
There must be an acute-care hospital with a full range of services associated with and in proximity to the sponsoring residency. This facility must be readily accessible to patients served by the program.

V. Educational Program
The curriculum must provide the educational experiences necessary for the residents to achieve the cognitive knowledge, psychomotor skills, interpersonal skills, professional attitudes, and practical experience required of physicians in the care of patients with health problems related to sports and exercise.

Didactic as well as clinical learning opportunities must be provided as part of the required curriculum for all residents. Conferences or seminars/workshops in sports medicine should be specifically designed for the residents to augment the clinical experiences.

All educational activities must be adequately supervised, while allowing the resident to assume progressive responsibility for patient care. The clinical activities in sports medicine should represent a minimum of 50% of the time in the program. The remainder of the time should be spent in didactic, teaching, and/or research activities and in the primary care or emergency medicine ambulatory facility.

Residents must spend ½ day per week maintaining their skills in their primary specialty. Participation in the following must be required of all residents:

A. Preparticipation Evaluation of the Athlete
The program must ensure that all sports medicine residents are involved in the development and conduct of preparticipation examination programs.

B. Acute Care
The resident must have appropriate authority and responsibility to participate meaningfully in the medical care that is provided to acute-care patients (see Scope and Duration of Training, above). In addition, the program should arrange for residents to observe representative inpatient and outpatient operative orthopaedic procedures.

C. Sports Medicine Clinic Experience
The resident must attend patients in a continuing, comprehensive manner, providing consultation for health problems related to sports and exercise. The resident shall spend at least 1 day per week for 19 months of the training period in this activity.

If patients are hospitalized, the resident should follow them during their inpatient stay and resume outpatient care following the hospitalization. Consultation with other physicians and professionals in other disciplines should be encouraged.

D. On-Site Sports Care
The resident should participate in planning and implementation of all aspects of medical care at various sporting events. The program must ensure that supervised sports medicine residents provide on-site care and management to participants in these events.

In addition, the resident must participate in the provision of comprehensive and continuing care to a sports team. Preferably, the experience should include several teams that engage in seasonal sports.
Program Requirements for Residency Education in Internal Medicine

I. Introduction
Residency training programs in internal medicine must be organized to provide the intellectual environment, formal instruction, peer interaction, and broad clinical experience necessary for residents to acquire the knowledge, skills, and attitudes essential to the practice of general internal medicine. An accredited residency program in internal medicine will provide at least 3 years of well-supervised educational experiences.

II. Institutional Resources and Responsibilities

A. Administration
1. Graduate medical education must take place in an environment of inquiry and scholarship, in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility. To meet the special requirements of a medical residency, sponsoring institutions should also have a meaningful affiliation with a Liaison Committee on Medical Education-accredited medical school, unless such institutions can demonstrate equivalent commitment to education and research. Any university-owned or -operated hospitals lacking sufficient diversity in faculty, facilities, and resources in the inpatient and/or ambulatory settings should have meaningful affiliations with community-based institutions.

2. Thus, to qualify as a sponsor of an internal medicine training program, an institution should promote meaningful interaction of internal medicine residents with residents from other services by serving as a significant training site for a minimum of two additional accredited general residency programs. The institution should serve as sponsor of one of these two programs, and a sufficient number of residents from the other programs should regularly participate in training in the institution.

3. Adequate financial support must be evidenced by appropriate compensation for faculty and residents, suitable facilities for educational programs, appropriate support services, and opportunities for research.

4. There must not be excessive reliance on residents for service.

5. The administrative structure must be such that the internal medicine components of the educational program are an integral part of the Department of Medicine. The director of the residency training program (x, program director) must have the authority to organize, implement, and provide leadership for the activities of the educational program at all sites. Hence, the program director must be the Chair of the Department of Medicine or have a reporting relationship that ensures appropriate authority. When special tracks (eg, medicine-pediatrics, medicine-emergency medicine) are present, a clear line of authority must be established between the internal medicine program director and those responsible for the special tracks.

6. Major changes in leadership, governance, institutional support, and goals that affect the educational program must be communicated promptly to the Residency Review Committee (RRC) for Internal Medicine by the institutional administration or by the program director. Major changes in the structure of the educational program (eg, addition of a new educational track, addition of residents beyond the approved complement) must be approved by the RRC prior to implementation. An expedited review will be provided.

B. Participating Institutions
When the resources of two or more institutions are utilized in the program, letters of affiliation must be approved by the institutional governing boards. Affiliated institutions should not be so distant as to make it difficult for residents to attend their continuity clinics or required conferences. Assignments at affiliated institutions must not be made primarily to meet service needs. Participation by any institution providing 6 months of training in the program must be approved by the RRC for Internal Medicine. A member of the teaching staff of each participating institution must be designated to...
assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

C. Faculty

The program director, division chiefs, and teaching faculty must be selected for their professional ability and commitment to teaching, medical education, patient care, and the scientific and humanistic basis of medicine. The program director and teaching faculty must prepare and comply with written educational goals for the program. The program director and the teaching faculty are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

All faculty members must be certified by the American Board of Internal Medicine or present equivalent credentials or experience acceptable to the RRC for Internal Medicine. Experienced general internists must be included among the faculty. Division chiefs must also be certified in their subspecialty or present equivalent credentials. Faculty members should participate in structured faculty development programs, including evaluation of teaching effectiveness. They also should actively participate in regional and national professional and scientific societies, in continuing medical education and scholarly activities, and in preparing scientific publications and conducting research. While not all faculty members must be investigators, the faculty as a whole must demonstrate involvement in research, defined broadly to include biomedical, clinical, educational, and health services research.

1. The Program Director

a. The strength of the residency program is directly related to the professional competence and leadership qualities of the program director, whose term of appointment must be sufficient to ensure continuity for the program. There must be a single program director responsible for the program. Irrespective of the source of compensation, the program director must be an institutionally based appointee in good standing whose primary responsibility is the organization, implementation, and supervision of the training program, including the selection and supervision of the teaching staff and other program personnel at each institution participating in the program. The program director must be licensed to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)

The program director must monitor resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.

Regardless of the organizational arrangements of the institution, the program director must be authorized to select residents for appointment to the program in accordance with institutional and departmental policies and procedures, must evaluate the quality of care rendered by the residents, and must have the authority to ensure effective teaching. The program director must obtain teaching commitments from other departments involved in the education of internal medicine residents. The program director must prepare a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review. The program director is responsible for the preparation of an accurate statistical and narrative description of the program, as required by the RRC for Internal Medicine.

b. The program director, whether trained as a general internist or as a subspecialist, must be a clinician with broad knowledge of, experience with, and commitment to general internal medicine. He or she must have sufficient academic and administrative experience to ensure effective implementation of these Program Requirements and should have had at least 5 years of participation as an active faculty member in an accredited residency program. The program director must be certified by the American Board of Internal Medicine or possess equivalent qualifications in internal medicine. The program director must meet professional standards of ethical behavior.

c. If the program director is replaced, the RRC for Internal Medicine must be notified by the institution promptly, with an explanation for the change. The qualifications of the new program director must be presented in detail, and a curriculum vitae must be submitted. The RRC may schedule a site visit when a new program director is appointed.

2. Other Faculty

a. Irrespective of the source of compensation, there must be at least four additional institutionally based faculty members, not including chief residents, who dedicate the majority of their professional effort (ie, at least 20 hours per week) to the internal medicine training program.

b. Each resident must have a minimum of 10 hours per week of direct faculty supervision, with a resident-faculty ratio of 6:1 or less. Faculty must not have other obligations during this teaching time. Such supervision would occur in structured, patient-oriented, small-group educational activities, such as inpatient teaching attending rounds (general medical services, critical care units, subspecialty inpatient services, emergency medicine), and preceptorships in ambulatory care, such as outpatient medical clinics, outpatient subspecialty clinics, walk-in triage clinics, and office practices.

c. Qualified individuals, institutionally based, must be designated to be responsible for teaching activities in general internal medicine and each of the recognized subspecialties (Division Chief). Division chiefs must organize, supervise, and implement the subspecialty aspects of the training program. Each division chief must have an adequate term of office to achieve these goals. Other members of the teaching staff may be voluntary, part-time, or full-time. The teaching staff must share with the division chiefs and with the program director a commitment to the goals and objectives of the teaching program, including development in the residents of medical knowledge; clinical, technical, and management skills; and clinical judgment. The faculty must be able to nurture the attributes of the scholar, scientist, teacher, and humanist. Faculty members must be available to residents for advice and counseling.

D. Residents

1. Appointment of Residents

Programs must demonstrate the ability to recruit and retain qualified residents. Residents must be selected for appointment to the program in accordance with institutional and departmental policies and procedures. Residents should be appointed only when their documented prior experience and attitudes demonstrate the presence of the abilities necessary to master successfully the clinical knowledge and skills required of all program graduates. All residents must have demonstrated understanding and facility in using the English language. In addition, residents should be reappointed only when their clinical judgment; medi-
Program Requirements for Residency Education in Internal Medicine

2. Resident Complement
The total number of residents enrolled in the program must not exceed the faculty, patient, and facility resources available to support an appropriate educational program. In accrediting the program, the RRC will stipulate the maximum number of residents that can be enrolled at any given time. Program directors must obtain approval from the RRC prior to increasing the number of approved residency positions.

E. The Patient Population
Patients must be available in sufficient number for training purposes and must exhibit an adequate variety of clinical problems to provide broad experience in general internal medicine in inpatient, ambulatory, and other settings. There must be an adequate number of patients of both sexes and a broad range of age, including both adolescent and geriatric groups. Patients representing a wide spectrum of socioeconomic status also should be present.

F. Pathology Material
Mortality and morbidity reviews are part of the educational program. All deaths must be reviewed, and autopsies performed whenever possible. To provide an adequate educational experience and to contribute to the quality of patient care, autopsies should be performed on at least 15% of deaths on the medical teaching service. Residents should be present at autopsies or should review the gross pathological specimens at the time the autopsies are performed on their patients and should review the autopsy reports. Formal teaching sessions with reviews of autopsy, biopsy, and/or surgical pathology cases must be regularly scheduled. Faculty and attending physicians from other disciplines should be involved when appropriate.

G. Consultative Services
Consultations from other clinical services in the hospital must be available in a timely manner. All consultations must be provided by, or be under the supervision of, a qualified specialist. Each service must be headed by a qualified individual who ensures that the faculty participates in the educational programs of the medical service.

H. Facilities
1. General
Modern facilities to accomplish the overall educational program must be available and functioning. There must be adequate space and equipment for the educational program, including meeting rooms, classrooms, computers, visual and other educational aids, office space for teaching staff, diagnostic and therapeutic facilities, and laboratory facilities. Clinical support services must be provided on a 24-hour basis and in an adequate fashion to meet reasonable and expected demands, including intravenous services, phlebotomy services, messenger/transporter services, and laboratory and radiologic information retrieval systems that allow prompt access to results.

2. Ambulatory Care Facilities
Adequate facilities, support services, and space for outpatient teaching and patient care must be available. Residents must be provided with clinical experience in efficient, effective ambulatory care settings. Medical records, x-ray films, and results of diagnostic studies must be readily available. In addition to using hospital-based general medicine and/or subspecialty clinics, programs are encouraged to use community resources such as physicians' offices, neighborhood health centers, and home-care and managed-care facilities to broaden the base of ambulatory care experience for residents. When used for resident education, such sites must provide an environment for high-quality patient care under supervision.

3. Special Facilities
a. Appropriate facilities must be available to the program to ensure that residents become proficient in the effective use of current and evolving technologies, to ensure that the involved institution(s) has an appropriate patient mix, and to ensure achievement of related educational goals and objectives.
b. The facilities that must be present to achieve these goals include but are not limited to those for bronchoscopy; coagulation studies; gastrointestinal endoscopy; noninvasive cardiology studies; pulmonary function studies; hemodialysis; and radionuclide, ultrasound, and radiologic imaging.
c. To ensure that an appropriate spectrum of cardiovascular disorders is available for resident education, cardiac catheterization facilities should be present at the site(s) where the residents see the majority of their acutely ill hospitalized patients with cardiovascular disease.

4. Other Clinical Facilities
Acute-care hospitals that are affiliated with extended care facilities (chronic care hospitals, skilled nursing facilities, etc.), satellite clinics, or home-care or hospice programs are encouraged to involve residents in activities at these settings. When used for resident education, such sites must provide an environment for high-quality patient care under supervision. The program director is responsible for documentation of the quality of these educational experiences.

5. Medical Records
a. A medical records department that facilitates both quality patient care and education must be available.
b. Clinical records documenting both inpatient and ambulatory encounters must be maintained so that easy and prompt accessibility is ensured at all times. Residents must gain experience in timely preparation of concise discharge summaries. The record system must be organized to permit the collection and evaluation of selected material from clinical records for clinical investigation.

6. Medical Library
A medical library under the direction of a qualified medical librarian must be readily accessible. There must be a means of access to appropriate reference material during those times when the library is not open and staffed. The library must contain a representative selection of books and journals on internal medicine. An Index Medicus and an interlibrary loan system must be present. The sponsoring institution must provide residents with access to an on-site computerized search system. A library of pertinent audiotapes, videotapes, and films, together with the equipment necessary for their use, is desirable. Also, residents must have access to an on-site library or to an appropriate collection of texts and journals at each participating institution, including nights and weekends.

7. Resident Facilities
Residents must be provided with adequate sleeping, lounge, and food facilities during assigned duty hours. On-call facilities, arranged to ensure adequate rest, safety, convenience, and privacy, must be available for each resident on night duty in the hospital.

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III. Curriculum and the Teaching Program

A. General

1. Organization and Structure

a. The Department of Internal Medicine must be organized to provide a coherent, integrated, and progressive educational program in the broad field of internal medicine. The training program based within the department must, in turn, be structured to ensure that each resident has the opportunity to acquire the knowledge; the clinical, management, and interpersonal skills; the professional attitudes and behaviors; and the experience required to become a proficient general internist.

b. The structure of the program, including both patient-based and didactic elements, must be set down in a concise written document (in effect, a curriculum).

c. The written program description must be revised to keep it current and relevant. The program design and/or structure must be approved by the RRC as part of the regular review process. Residents should be involved in creating and revising the document, and the program-approved document should be distributed to and discussed with all residents, particularly as they start new rotations.

d. The focus of the written program description should be the resident's patient-based care experiences. All major categories of residency experiences or rotations should be included in the written program description, including ambulatory care, general inpatient services, acute care units, subspecialty assignments, emergency medicine, and consultation services. For each category, the written description should include its educational purpose, rationale, or value; the principal teaching methods; the most important educational content, including the mix of diseases, patient characteristics, and types of clinical encounters, procedures, and services; the principal ancillary education materials to be used (e.g., reading lists, pathological material); and the methods to be used in evaluating both resident and program performance. The document should identify both the strengths and the limitations specific to the resources of the sponsoring institution.

e. The ability to care for patients with a wide range of clinical problems is one of the distinguishing characteristics of the internist. This ability is fostered by experience on general medical services, both inpatient and outpatient, with exposure to a wide spectrum of diseases in various stages of acuity. The etiology, pathogenesis, clinical presentation, and natural history of various diseases must be taught so that the resident has the opportunity to develop an advanced level of skill in diagnosis as well as mature judgment and resourcefulness in therapy.

f. Emphasis must be placed on enhancement of the interviewing, communication, and interpersonal skills that are necessary to (a) elicit and record a thorough and accurate history, (b) establish and maintain a therapeutic physician-patient relationship, and (c) initiate and implement optimal medical management.

g. Residents also must be given the opportunity to develop a high level of physical examination skills. Residents must be supervised and evaluated in these functions.

h. Because the team approach is an important aspect of the practice of internal medicine, residents should be given the opportunity to function in harmony with other members of the health-care team and to become proficient as leaders in the organization and management of patient care.

i. The training program must place emphasis not only on medical problems but also on health promotion, cultural, socioeconomic, ethical, occupational, environmental, and behavioral issues. In addition, the impact of illness on other aspects of life, with special emphasis on the family, must be stressed. Residents must develop the ability to treat patients humanistically.

j. The residency must be primarily educational. Service responsibilities should be limited to patients for whom a resident bears major diagnostic and therapeutic responsibility. Residents must have continuing responsibility for most of the patients they admit.

2. Presence of Residents From Other Specialties

Residency programs in internal medicine must be designed and implemented to train residents for careers in internal medicine. Residents from other specialties who rotate through these programs must not compromise the educational objectives of the internal medicine programs by diluting the training experience or preventing appropriate progressive responsibility for the internal medicine residents. The number of such residents who are integrated into the program, the duration of their medical rotations, and their impact on the curriculum will be assessed. For each year of training, the percentage of available trainee-months on those inpatient services used for training internal medicine residents that can be assigned to residents other than those enrolled in categorical (3-year) internal medicine programs, preliminary (1-year) internal medicine programs, and transitional-year programs sponsored by internal medicine must be calculated. If this percentage is higher than 25%, the program is to demonstrate to the RRC for Internal Medicine that the educational objectives underlying this requirement are not compromised. Such programs may elect to meet the educational objectives by adjusting the percentage so as not to exceed 30% through the 1994-1995 academic year and 25% for the academic year beginning July 1, 1995.

3. Presence of Internal Medicine Subspecialty Trainees and Students

The number of internal medicine subspecialty trainees (i.e., fellows) and students assigned to the teaching services must not be so large as to compromise the educational objectives of the medical residency.

4. Peer Interaction

In addition to interaction with the teaching faculty, peer interaction is essential to the learning process. The number of internal medicine residents in the program must be sufficient to provide for frequent and meaningful discussions regarding patient care. To provide adequate peer interaction, a program must have a minimum of 12 residents. On inpatient rotations, residents at more than one level may interact in the care of patients.

5. Meaningful Patient Responsibility

a. The development of mature clinical judgment requires that residents, properly supervised, be given responsibility in patient care commensurate with their ability. Residents must be given the responsibility for decision making and for direct patient care in all settings, subject to review and approval by the attending physician, including planning, record keeping, order writing, and continuing management. Each resident must be assigned to internal medicine rotations that provide a minimum of 54 months of meaningful patient responsibility.

b. Time spent on consulting services, during which the resident has ongoing, supervised responsibility for direct patient care,

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1. Included entirely from this limitation are residents from any program who receive training in internal medicine on services to which no internal medicine residents at any level of training are concurrently assigned. Thus, those institutions desiring to offer more internal medicine training to residents from other disciplines than can be accommodated within this requirement may do so by appropriate allocation of resources available for internal medicine.
Program Requirements for Residency Education in Internal Medicine

including planning, record keeping, order writing, and management, can be credited as meaningful patient responsibility.

Time spent providing care strictly in the capacity of a consultant cannot be so credited.

c. Of the 24 months of meaningful patient responsibility, at least 20 must occur in (1) inpatient services in which disorders of general internal medicine are managed; (2) inpatient services in which disorders of one or more subspecialties of internal medicine are managed; (3) emergency medicine, general medical, or subspecialty ambulatory settings; (4) dermatology or neurology services.

d. Appropriate supervision by faculty must be provided for all patient care activities in which residents are engaged. The program director must prepare explicit, written descriptions of lines of responsibility for the care of patients on each type of teaching service (eg, general medical floors, acute care units, ambulatory settings) and make these clear to all the members of teaching teams. Residents must be provided with rapid, reliable systems for communicating with supervising attending physicians and residents. Supervising residents with documented experience appropriate to the acuity, complexity, and severity of patient illness must be available at all times on site. Attending physicians also must be readily accessible to participate in diagnostic and management decisions. Additional personnel must be available within appropriate time intervals to perform or supervise necessary technical procedures.

e. Residents cannot be expected to show appropriate growth in understanding patient care responsibilities if others write orders for patients under the children's care. To enhance the communication required for a teaching-learning relationship that fosters this progressive growth and understanding, residents should write all orders for patients under their care. The program director must develop a policy that ensures the appropriate level of dialogue between attending physicians and residents on which this teaching relationship depends.

6. Progressive Responsibility

With each year of training, the degree of professional and administrative responsibility accorded to a resident must be increased progressively. This progression includes responsibility in such areas as patient care, leadership, teaching, organization, and administration. This goal can be achieved by having senior residents supervise junior residents or act as consultants to junior residents, particularly in the subspecialty areas on inpatient services. On ambulatory services or experiences, progressive responsibilities can be given senior residents through care for additional patients or by less-intensive supervision. This does not lessen the requirement for on-site faculty supervision of all patient encounters. Residents from other disciplines must not supervise internal medicine residents on internal medicine services.

7. Duty Hours and Personal Responsibility

a. Physicians must have a keen sense of personal responsibility for continuing patient care, and must recognize that their obligation to patients is not automatically discharged at any given hour of the day on any particular day of the week. In no case should the resident go off duty until the proper care and welfare of the patients have been ensured. Duty hours and night and weekend call for residents must reflect the concept of responsibility for patients and must provide for adequate patient care. However, residents must not be required regularly to perform excessively difficult or prolonged duties. When averaged over 4 weeks, residents should spend no more than 80 hours per week in patient care duties in the residency program. Residents at all levels should be on call no more often than every third night and, on average, should have the opportunity to spend at least 1 day out of 7 free of patient care duties in the residency program. There should be adequate opportunity to rest and sleep when on call for 24 hours or more. There should be adequate backup so that patient care is not jeopardized during or following assigned periods of duty. In emergency medicine continuous duty should not exceed 12 hours, with such duty periods separated by at least 8 hours.

b. Residency is a full-time responsibility. Activities outside the educational program must not interfere with the resident's performance in the educational process.

B. Formal Teaching Program

1. Rounds

a. Teaching Rounds

1. Patient teaching rounds are essential. Although management issues frequently arise during teaching rounds, such rounds should focus on issues more general than the immediate management of patients assigned to the residents' care. Teaching rounds must be regularly scheduled, and must be conducted on a formal basis on at least 3 days of the week for a minimum of 4½ hours per week. Generally, a few cases are presented on teaching rounds as a basis for discussion of such points as interpretation of clinical data, pathophysiology, differential diagnosis, specific management of the patient, and the appropriate use of technology. Teaching rounds must include direct bedside interaction with the patient by the residents and the scheduled teaching physician. These bedside sessions should include personal evaluation of the history and physical examination by the teaching physician. It is of fundamental importance that the dignity of the patient/physician relationship be preserved and emphasized. The faculty members conducting teaching rounds should be selected for their knowledge of medicine, their clinical skills, and their interest and ability in teaching.

2. To facilitate bedside teaching, a single teaching attending physician should not be assigned more than six residents and medical students in total. Even under extreme circumstances, a single teaching attending physician must not have responsibility for more than 10 residents and students at a time.

b. Management Rounds by the Physician of Record

Each physician of record has the responsibility to interact at appropriate intervals with his or her patients and to communicate effectively and frequently with the resident staff participating in the care of these patients. When the physician of record is the personal physician of the patient, this communication is best achieved by making management rounds on his or her patients at least daily with at least one member of the resident team. The resident must not be required to relate to so many personal physicians as to interfere with the educational experience of the resident. Management rounds by the physician of record are not time-limited and must be commensurate with the needs of the patient. Although management rounds may offer many educational opportunities, they are not to be confused with or to take the place of separate teaching rounds. Management rounds by the physician of record are not to be used to interfere with resident "work" rounds.

2. Conferences and Seminars

a. Departmental conferences, seminars, and literature review activities covering both general medicine and the medical subspecialties must be conducted regularly and sufficiently often to fulfill educational goals. The conference schedule must be structured to provide, at a minimum, a core curriculum deal-
Program Requirements for Residency Education in Internal Medicine

...ing with major topics in general internal medicine (including issues arising in ambulatory and extended care settings), with major topics in the medical subspecialties and with the basic procedural skills necessary for the practicing general internist. The core curriculum should be repeated often enough to afford each resident an opportunity to participate fully.

b. Conferences should include information from the basic medical sciences with emphasis on the pathophysiology of disease and reviews of recent advances in clinical medicine and biomedical research. Conferences correlating current pathological material, including material from autopsies, surgical specimens, and other pathological material, with the clinical course and management of patients must be held at least monthly.

c. Conferences should promote interchange of information among members of the department. Active resident and faculty participation in both the planning and the production of conferences is essential.

d. Each resident must attend at least 60% of those conferences designated by the program director as required. Appropriate records of resident attendance must be maintained.

3. Self-Assessment

Program directors should encourage each resident to use formal self-assessment techniques as an educational tool for monitoring his or her own progress toward the program’s learning objectives. Toward this end, program directors should provide opportunities for residents to participate in in-training examinations, self-study courses, and/or other strategies.

4. Basic Science

Study of the basic medical sciences must be part of the clinical education of the resident. This is most effectively accomplished in discussion of patient care and in formal conferences. Resident preparation for conferences should include review of basic science knowledge pertinent to the specific clinical topics.

C. Specific Training Experiences

1. Experience With Ambulatory Patients

a. Experience in the ambulatory care setting provides for appreciation of the natural history of disease and familiarity with common problems encountered in the practice of internal medicine. Such experience also enables the resident to become familiar with early manifestations of disease, as well as with those social, economic, preventive, occupational, and psychiatric aspects of disease not apparent in hospitalized patients. The residents’ ambulatory care learning experience should include the opportunity to develop diagnostic and therapeutic skills and the appropriate professional attitudes in the care of general internal medicine patients.

b. Ambulatory experiences must include first-contact, comprehensive, and continuing care covering the broad spectrum of disease. At least 25% of the 3 years of residency training must be in the ambulatory care setting.2 Examples of settings that may be counted toward this requirement are general medicine continuity clinics, subspecialty clinics, ambulatory block rotations, physicians’ offices, managed health care systems, emergency medicine, “walk-in” clinics, neighborhood health clinics, and home-care visits.

c. At least half of the residents’ ambulatory care experience should deal with general internal medicine patients. Some of the experience may also entail the various medical subspecialties as well as related medical specialties (e.g., orthopedics, gynecology, otorhinolaryngology, dermatology, psychiatry).

d. Meaningful ambulatory care experience must occur in each of the 3 years of residency training. Continuing care experience is essential to provide the opportunity to observe and to learn the natural course of disease. The program must provide residents with continuity experience in an ambulatory care setting at least 1/2 day each week, except when the resident is assigned to an intensive care unit or to emergency medicine. Each resident must have the opportunity to follow patients on a long-term basis. Such long-term observation should include following patients from the ambulatory to the inpatient environment as well as from the inpatient to the ambulatory environment.

e. Arrangements should be made to minimize interruptions of the resident during the continuity experience. Block rotations to ambulatory settings are desirable to supplement continuity experience.

f. The patient volume in the ambulatory environment must be large enough to provide adequate numbers of new patients, yet not so large as to interfere with teaching. In general medicine settings, appropriate patient loads should, on average, be not less than one nor more than two new patients and not less than three nor more than six return patients per 1/2-day session for each first-year resident. More experienced residents may see greater numbers of patients each session.

g. The conditions under which ambulatory patients are managed should be similar to those of office practice. Residents must be able to obtain appropriate consultation from other specialties in a timely fashion for their ambulatory patients. There must be adequate services available from and collegial relationships with other health-care professionals such as nurses, social workers, and dietitians. Such training may take place in a variety of settings, including the offices of practicing physicians, provided that residents are given meaningful responsibilities and that adequate space and associated personnel are available.

h. Residents must be supervised in all ambulatory settings by on-site faculty whose primary responsibilities in that setting are supervision and teaching. Each patient encounter should be supervised. It is desirable that such supervision be provided by physicians experienced in the broad field of general internal medicine. The program director may assign experienced and qualified (i.e., board certified or equivalent) practitioners from other specialties (e.g., family medicine) to participate as teachers in the ambulatory setting. One faculty member must be responsible for no more than three first-year residents and six second-year or third-year residents. In all circumstances, the supervision as well as the quality of the educational experience must be documented, and the clinical and learning experiences will be subject to evaluation.

2. Experience With Hospitalized Patients

a. Inpatient assignments in which the resident has meaningful responsibility should be of sufficient duration to permit continuing care of a majority of the patients throughout hospitalization. Each assignment must last at least 4 weeks, with the exception of those in emergency medicine or critical care units. Bedside teaching is essential, and the service should be designed to utilize this teaching mode in a comfortable and dignified manner for both residents and patients. A geographic concentration of inpatients assigned to a given resident is desirable because it promotes effective teaching and fosters meaningful interaction with other health personnel.
b. The number of patients assigned to each first-year resident must be such as to permit detailed study and effective management of each patient, yet ensure that the residents are challenged with diverse and complex problems. A first-year resident should be responsible for no more than five new admissions per admitting day. When the number of admissions to an admitting team is excessive, it is appropriate for the second-year or third-year resident to assume primary patient responsibility for some admissions.

c. First-year residents should not be assigned more than eight new patients in any 48-hour period. A lower number is appropriate in critical and intensive care situations.

d. On average, a first-year resident should be responsible for the ongoing care of eight to twelve patients, depending on the average length of stay and the nature and severity of illness. Second-year and third-year residents are expected to care for more patients than are first-year residents.

3. Subspecialty Experience

Education in the various subspecialties of internal medicine is a vital part of the training program. Rotations on these subspecialties should be at least 4 weeks in duration. Although it is not necessary that each resident be assigned to every subspecialty, it is important that each resident be exposed sufficiently to the specialized knowledge and diagnostic and therapeutic methods of each of the recognized medical subspecialties. At a minimum, residents should become familiar with those aspects of care in each subspecialty area that are appropriately diagnosed and managed by general internists and with those that should be referred to, or managed jointly with, subspecialists. This experience should be gained in both inpatient and ambulatory settings. Subspecialty resources must include an adequate professional and teaching staff and appropriate, specialized laboratory and technical facilities.

4. Consultative Experience

Internists must be able to act as consultants to other physicians. The residents' experience must include the opportunity to act under supervision as a consultant to other clinical services. This requirement is best satisfied by a specific assignment as a general medical consultant to other services. The principles involved in consultation should be included in the formal curriculum.

5. Geriatric Medicine

Resident experience must include formal teaching and regular, supervised clinical activities in geriatric medicine. Assignments to geriatric services must be offered, and are defined as specifically designated geriatric inpatient units, geriatric consultation services, nursing homes, geriatric ambulatory care clinics, and/or home care.

6. Emergency Medicine Experience

a. Internal medicine residents assigned to emergency medicine must have first-contact responsibility for a sufficient number of unselected patients to meet the educational needs of internal medicine residents. Triage by other physicians prior to this contact is unacceptable. Internal medicine residents must be assigned to emergency medicine for at least 4 weeks of direct experience in blocks of not less than 2 weeks during the first or second year of residency. Further, they must have meaningful responsibility for patients, including participation in the diagnosis and management across the broad spectrum of adult patients with medical and surgical illnesses such that they are provided the opportunity to learn how to discriminate which patients require hospitalization. Furthermore, they must participate meaningfully in the diagnosis, management, and admitting decisions for patients who range across the broad range of adult medical and surgical illnesses. They must be provided the opportunity to learn how to recognize these patients.

b. Senior (third-year) residents in internal medicine must have additional assigned experience in emergency medicine. Their responsibility must include meaningful participation in reaching decisions about admissions.

c. Total emergency medicine experience must not exceed 3 months in 3 years of training for any resident.

d. Internal medicine residents assigned to rotations on emergency medicine must have on-site, 24-hour, daily supervision by qualified faculty. Residents must not be assigned to duty more than 12 consecutive hours separated by intervals of at least 8 hours. The rotations must be conducted in accordance with a defined teaching program carried out by assigned faculty. Both the program and the faculty must be acceptable to the program director in internal medicine. Consultations from other specialties must be readily available, and residents in internal medicine should provide consultations to residents in other disciplines within emergency medicine.

7. Critical Care Unit Experience

Residents must participate directly in the care of patients with various illnesses in critical care units (e.g., intensive care units, cardiac care units, respiratory care units). The educational experience must be conducted with adequate supervision by appropriately trained internists and with consultation by subspecialists in internal medicine and specialists in other disciplines. There must be critical care unit teaching rounds and conferences acceptable to the program director in internal medicine. The critical care unit experience must not exceed 6 months in 3 years of training for any resident.

8. Adolescent Medicine

Residents should gain experience in caring for adolescent patients, particularly in ambulatory settings. Structured patient care experiences directed by faculty are encouraged in advising young patients in health promotion, family planning and human sexuality, and sexually transmitted diseases. In addition, training in chemical dependency, sports medicine, and school health issues is recommended.

9. Experience in Other Specialties

Residents should have sufficient experience in neurology, psychiatry, dermatology, medical ophthalmology, otolaryngology, orthopedics, office gynecology, and rehabilitation medicine to become familiar with those aspects of care in each specialty area that are appropriately diagnosed and managed by general internists and with those that should be referred to, or managed jointly with, other specialists. These experiences may be obtained on non-internal medicine services (inpatient or ambulatory care settings) or in close contact with consulting attending physicians from these specialties who advise and teach residents in internal medicine.

10. Procedures and Technical Skills

a. Procedures

Residents must be provided structured opportunities to (1) learn the indications, contraindications, complications, and limitations of specific procedures; (2) develop technical proficiency in performing these procedures; and (3) learn to interpret the results of specific procedures. The training program should establish educational standards pertaining to the provision of learning opportunities for each resident.

b. Procedures should be divided into two categories: Required and elective.

1. Required: At a minimum, all residents must be given an opportunity to develop competency in performing basic or
advanced cardiopulmonary resuscitation, access tech-
niques to obtain venous and arterial blood, arthrocentesis
of the knee, bladder catheterization, central venous line
placement, nasogastric intubation, lumbar puncture, ab-
dominal paracentesis, and abdominal thoracentesis.
2. Elective: The opportunity to learn additional procedural
skills will be determined by the training environment, resi-
dent's practice expectations, availability of skilled teaching
faculty, and privilege delineation. These procedures may in-
clude but are not limited to arterial line placement; bone
marrow aspiration; elective cardioversion; endotracheal in-
tubation, flexible sigmoidoscopy, pulmonary artery balloon
flation catheter placement; skin biopsy (punch); tempo-
rary pacemaker placement; ambulatory electrocardio-
graphic interpretation; and treadmill exercise testing,
supervision, and interpretation.
c. Interpretative Skills
At a minimum, all residents must be given an opportunity to
develop competency in interpretation of electrocardiograms,
chest roentgenograms, Gram stains of sputum, microscopic
examinations of urine and of vaginal discharge for *Molitia*
and *Trichomonas*, and spirometry.

11. Special Educational Experiences
The internal medicine component of special educational tracks
must be conducted under the auspices of the Department of
Medicine; supervisors of such tracks must report directly to the
internal medicine program director. Although differences in
emphasis may exist in such tracks, the core experience of residents
should provide sufficient training in both inpatient and ambula-
tory general internal medicine to permit the graduates of such
special tracks to function as general internists. The RRC eval-
uates special educational tracks as part of internal medicine pro-
grams in the accreditation process.

D. Professional Ethical Behavior
1. Physician Accountability
In addition to mastering medical skills, residents are expected to
acquire the values of professionalism. These values include plac-
ing the needs of one's patients ahead of one's self-interest, being
responsive to the needs of society, maintaining a commitment to
scholarship, and enhancing the ability of all colleagues in the
health profession to discharge their responsibilities optimally.
Beyond possessing medical knowledge and applying it, appropri-
ate medical practice entails the application of judgment, art, and
values learned from mentors and role-model clinicians. Service
to one's community is an important component of professional-
ism. Residents, therefore, should be asked to participate in
institutional committees and encouraged to participate in profes-
sional organizations and community programs. Thus, training pro-
grams must provide an environment in which high standards of
professionalism and a commitment to continued improvement
are evident.
2. Humanistic Qualities
Physicians must have the welfare of their patients as their pri-
mary professional concern. The resident must, therefore, demon-
strate those humanistic qualities that foster the formation of
appropriate patient/physician relationships. These qualities in-
clude integrity, respect, compassion, professional responsibility,
courtesy, sensitivity to the patient's needs for comfort and encour-
agement, and an appropriate professional attitude and behavior
toward colleagues. These attributes should be emphasized
throughout the curriculum, and must be evaluated by faculty,
peers, and others during clinical encounters.

3. Physician Impairment
Residents must be instructed in the recognition and manage-
ment of impairment, including substance abuse, alcohol, depres-
sion, dementia, and other mental emotional and physical
disorders in their peers, as well as in the principles and methods
of active intervention.
4. Professional Ethics
The training program has the responsibility to foster commit-
ment by its residents to professional ethics. This includes the
demonstration of the high standards of moral and ethical behavior
within the clinical setting that is expected of the medical
profession.

E. Special Educational Requirements
1. Clinical Ethics
Residents must be taught the principles of bioethics as applied
to medical care and must participate in decisions involving ethi-
cal issues that arise in the diagnosis and management of their
patients. Residents must also be taught the basic legal principles
inherent in the practice of internal medicine, including issues of
informed consent, living wills, patient advocacy, and related state
laws concerning patients' rights.

2. Quality Assessment, Quality Improvement, Risk Management,
and Cost Effectiveness in Medicine
Residents must receive formal instruction regarding the prin-
ciples, objectives, and processes of quality assessment and improve-
ment and risk management. Residents must be taught the social
and economic impact of their decisions on patients and society.
Always maintaining the primacy of the individual patient's needs,
residents must be taught to be sensitive to the cost of medical
care.

3. Preventive Medicine
Screening for disease, disease prevention, maintenance of gen-
eral health, and health promotion must be emphasized in the cur-
riculum. Residents must become familiar with occupational and
environmental disease processes and with methods for their
control.

4. Medical Information Sciences
a. Residents must receive instruction in the critical assessment of
medical literature, in clinical epidemiology, in clinical study
design, in medical statistics, and in clinical decision theory.
b. Each resident must be given the opportunity to learn basic com-
puter skills. Instruction should include (1) an introduction to
computer capabilities and medical applications, (2) basic tech-
niques for electronic retrieval of medical literature, (3) com-
puter-assisted medical instruction, and (4) electronic
information networks.

5. Law and Public Policy
Residents will practice medicine in an environment shaped by
law and public policy. Therefore, residents should be taught the
basic principles of legal medicine and government regulation at
local, state, and national levels, including the processes by which
such laws and regulations are developed.

F. Research and Scholarly Activities
1. The responsibility for establishing and maintaining an environ-
ment of inquiry and scholarship rests with the teaching staff.
While not all members of a teaching staff must be investigators,
the staff as a whole must demonstrate broad involvement in
scholarly activity. This activity should include:
a. Active participation of the teaching staff in clinical discussions,
rounds, and conferences in a manner that promotes a spirit of
inquiry and scholarship. Scholarship implies an in-depth un-
derstanding of basic mechanisms of normal and abnormal
states and the application of current knowledge to practice.
b. Participation in journal clubs and research conferences.
c. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.
d. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.
e. Offering of guidance and technical support (e.g., research design, statistical analysis) for residents involved in research.
f. Provision of support for resident participation in scholarly activities.

2. Prior to the completion of training, each resident must demonstrate some form of acceptable scholarly activity. Scholarly activities may include original research, comprehensive case reports, or review of assigned clinical and research topics.

IV. Evaluation

A. Residents

1. Formative Evaluation

a. It is essential that the program director evaluate the clinical competence of the residents on a regular basis. The evaluation must include not only intellectual abilities and manual skills but also attitudes and interpersonal relationships. The resident must be closely observed performing specific tasks of patient management such as the history and physical examination, choice of diagnostic studies, formulation of differential diagnosis or problem lists, development of plans for short-term and long-term medical management, invasive procedures, and discharge planning. It is recommended that a structured clinical evaluation exercise, such as that described in the American Board of Internal Medicine's "Guide to the Evaluation of Residents," be conducted on a yearly basis for each resident.

b. Records must be maintained by documentation logbook or by an equivalent method to demonstrate that residents have had adequate experience with invasive procedures. Records should state the indications and complications and include the name of the supervising physician. Such records should be of sufficient detail to permit use in future credentialing.

c. Residents must be evaluated and their performance reviewed with them upon completion of each rotation period. Formal counseling must occur at least semiannually. Adequate records of the evaluation and counseling process must be maintained for each resident. Such records must be available in the resident's file and must be accessible to the resident.

2. Summative Evaluation

The program director must prepare a detailed, written evaluation of the clinical competence of each resident annually and at the conclusion of the resident's period of training in the program. Such evaluations must stipulate the degree to which the resident has mastered each component of clinical competence (i.e., clinical judgment, medical knowledge, clinical skills, humanistic qualities, professional attitudes and behavior, and provision of medical care) and has acquired proficiency in each of the various procedural skills identified in the program's curriculum. A record of the evaluation must be maintained in the program files to substantiate future judgments provided to hospital credentials committees, certifying boards, licensing agencies, and other appropriate bodies. In the event of an adverse annual evaluation, residents must be offered the opportunity to address judgments of academic deficiencies or misconduct before an appropriately constituted clinical competence committee. Academic due process provides fundamental fairness to the resident and protects the institution by assuring accurate, proper, and definitive resolution of disputed evaluations.

B. Faculty and Program

1. Resident Evaluation of Faculty and Program

The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents. Provision must be made for residents to evaluate the faculty and the program annually. The results of such evaluations should be used for faculty counseling and for selecting faculty members for specific teaching assignments.

2. Certifying Examination

One measure of the quality of a program is the performance of its graduates on the certifying examination of the American Board of Internal Medicine. It is expected that a program's graduate will achieve a pass rate of at least 50% for first-time takers of the examination for the most recent, defined 5-year period, and at least 75% of those completing their training in the program should take the examination.

V. Certification

Residents who plan to seek certification by the American Board of Internal Medicine should communicate with the registration section of the board regarding fulfillment of requirements for certification. One must be certified in internal medicine prior to seeking certification in a subspecialty.

ACGME: February 1993  Effective: July 1995

Policies and Procedures for Residency Education in the Subspecialties of Internal Medicine

1. As a general rule, subspecialty programs will be surveyed and reviewed in conjunction with the parent residency program in internal medicine. In the case of applications, or as determined by the Residency Review Committee (RRC), a subspecialty program may be surveyed and reviewed separately.

2. Subspecialty program information forms will be distributed to the director of the parent internal medicine residency program, who will coordinate the collection of information, completion of the forms, and submission of required materials to the RRC for all subspecialty programs to be reviewed.

3. The survey may be conducted by a member of the Field Staff, or by a specialist selected by the RRC. The surveyor will submit a report on the internal medicine residency program as well as on each of the subspecialty programs under review.

4. Subspecialty programs will be designated as "accredited" or "non-accredited." No other delineation of accreditation categories will be used. The accreditation status of subspecialty programs will be directly related to that of the parent internal medicine program as follows:
a. Applications for accreditation of new subspecialty programs will be considered only if the parent residency program in internal medicine carries the status of full accreditation.

b. Applications for accreditation of new subspecialty programs will not be considered if the parent residency program in internal medicine is (1) accredited on a provisional or probationary basis; and (2) involved in the process of implementing appeal procedures.

c. When a subspecialty program is found not to be in substantial compliance with the Essentials of Accredited Residencies, the program director will be warned that accreditation will be withdrawn if the program is found not to be in substantial compliance with the Essentials at the time of the next scheduled review, regardless of the accreditation status of the parent internal medicine program.

d. If the parent internal medicine program is accredited on a probationary basis, or accredited on a provisional basis with a warning that adverse action will be taken if the program is not in substantial compliance with the Essentials of Accredited Residencies at the time of the next scheduled review, the subspecialty programs will be informed that their accreditation status is in jeopardy.

Thereafter, accreditation of the subspecialty programs will be administratively withdrawn if the IRG (a) continues accreditation of the parent residency program in internal medicine on a probationary basis beyond 3 years; (b) withdraws accreditation of the parent residency program in internal medicine.

e. Withdrawal of accreditation of the parent internal medicine residency program under circumstances other than those described above will also result in simultaneous withdrawal of all subspecialty programs.

5. In case of withholding accreditation or withdrawing accreditation of subspecialty programs, the "Procedures for Appeal of Adverse Actions" apply.

Effective October 1988

Program Requirements for Residency Education in the Subspecialties of Internal Medicine

I. General Information
A. Subspecialty training in internal medicine is a voluntary component in the continuum of the educational process; such training should take place on satisfactory completion of an accredited program in internal medicine.

B. To be eligible for accreditation, a subspecialty program must function as an integral part of an accredited residency program in internal medicine. There must be a reporting relationship from the leadership of the subspecialty program to the department chairperson or his or her designee. The discipline must be one for which a certificate of special qualifications or a certificate of added qualifications is offered by the American Board of Internal Medicine. (The information herein applies to subspecialty disciplines in internal medicine as well as to disciplines for which a certificate of added qualifications is offered by the American Board of Internal Medicine. For editorial purposes, the term subspecialty is used throughout the document for both types of training programs.)

C. Programs of graduate education in the subspecialties of internal medicine may be accredited only in institutions that sponsor a residency program in internal medicine accredited by the Accreditation Council for Graduate Medical Education. Applications for accreditation of new subspecialty programs will not be considered if the parent residency program in internal medicine is accredited on a provisional or probationary basis. Sponsoring institutions also must have a meaningful affiliation with a Liaison Committee on Medical Education (LCME)-accredited medical school and/or demonstrate equivalent commitment to education and research. The program design and/or structure must be approved by the appropriate review committee as part of the regular review process.

D. Graduate education in the subspecialties of internal medicine requires a major commitment to education by the sponsoring institution. Evidence of such a commitment must include each of the following:

1. At least two residents enrolled at all times to ensure peer interaction among internal medicine subspecialty residents that enhances the educational experience.

2. Sponsorship of significant research by the primary training site.

3. Sponsorship of a minimum of three accredited subspecialty programs by the primary training site. Such sponsorship is required to ensure:
   a. The faculty resources, curriculum, and formal didactic experiences required for subspecialty training.
   b. The extensive educational, patient care, and research resources that are essential to the learning environment for subspecialty residents.
   c. Appropriate peer interaction among subspecialty residents.
   d. Appropriate institutional and interdisciplinary research resources and opportunities.

II. Educational Programs
A. Subspecialty programs must provide advanced training to allow the resident to acquire expertise as a consultant in the subspecialty.

B. All major dimensions of the curriculum should be structured educational experiences for which written goals and objectives, a defined methodology for teaching, and an explicit method of evaluation are documented. The curriculum must ensure the opportunity for residents to achieve the cognitive knowledge, psychomotor skills, interpersonal skills, professional attitudes, and practical experience required of a subspecialist.

C. The program must emphasize scholarship, self-instruction, development of critical analysis of clinical problems, and the ability to make appropriate decisions.

D. The program must provide appropriate opportunity for the resident to acquire skills in the performance of the techniques required for the practice of the subspecialty.

E. Appropriate supervision of the residents must be provided during all of their educational experiences.

F. Participation by any institution providing more than 3 months of training in a program of less than 3 years in duration or 6 months of training in a program of 3 or more years must be approved by the appropriate review committee. The principles of education enumerated in the Program Requirements for Residency Education in Internal Medicine and the Institutional Requirements of the Essentials of Accredited Residencies in Graduate Medical Education also apply for subspecialty programs. The following principles require special emphasis:

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1. Internal medicine training programs in geriatric medicine are exempt.

2. Specifically, paragraphs II.A.3, II.A.5, III.A.6, and III.B.
1. Educational Environment
Refer to the Institutional Requirements of the Essentials of Accredited Residencies in Graduate Medical Education (I. Institutional Organization and Commitment) and the Program Requirements for Residency Education in Internal Medicine, Sections I and II.A.4.

2. Duty Hours
Refer to the Program Requirements for Residency Education in Internal Medicine, Section III.A.7.

3. Professionalism
Professionalism must be fostered during subspecialty training. In addition to mastering the comprehensive clinical and technical skills of the consultant subspecialist, residents are expected to maintain the values of professionalism. These values include placing the needs of one's patients ahead of one's self-interest, being responsive to the needs of society, continuing a commitment to scholarship and to high standards of related research, and enhancing the ability of all colleagues in the health professions to discharge their responsibilities optimally. Beyond possessing medical knowledge and applying it, appropriate medical practice entails the application of judgment, the art of medicine, and values learned from mentors and role-model clinicians. Service to one's community is an important component of professionalism. Residents, therefore, should be encouraged to participate in professional organizations, community programs, and institutional committees.

Thus, subspecialty training programs must provide an environment in which high standards of professionalism and a commitment to continued improvement are evident.

4. Responsibility and Professional Relationships
Lines of responsibility must be clearly delineated for residents in subspecialty programs and for residents in internal medicine training programs. Subspecialty programs must contribute to the general internal medicine program without diluting the overall experience of the internal medicine resident. In addition, it is highly desirable that residents have a meaningful working relationship with residents in accredited programs in other disciplines such as family practice, pathology, pediatrics, radiology, and surgery. Where appropriate, qualified faculty in these disciplines should provide instruction and supervision for subspecialty residents.

5. Quality Assessment, Quality Improvement, Risk Management, and Cost Effectiveness in Medicine
Refer to the Program Requirements for Residency Education in Internal Medicine, Section III.E.2.

III. Faculty

A. Program Director
There must be a single program director responsible for the program. The subspecialty program director must be qualified to supervise and to educate residents in the subspecialty. Thus, the director must either be certified in the subspecialty or possess equivalent qualifications. Additional qualifications include the following: requisite and documented clinical, educational, and administrative abilities and experience; licensure to practice medicine in the state where the institution that sponsors the program is located (certain federal programs are exempted); and appointment in good standing to the medical staff of an institution participating in the program. The program director must devote at least 30 hours per week to the training program and must be based at the primary training site of the subspecialty program. The responsibilities of the program director include:

1. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.

2. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.

3. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program.

4. The supervision of residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervising physicians.

5. Monitor resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. The program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.

6. Preparation of an accurate statistical and narrative description of the program as requested by the Residency Review Committee for Internal Medicine.

B. Faculty

1. The subspecialty program faculty must include a minimum of three qualified teaching faculty members, including the program director. Each must devote at least 20 hours per week to teaching, research, administration, and/or the critical evaluation of the performance, progress, and competence of the residents. These faculty must be certified in the subspecialty by the American Board of Internal Medicine or possess equivalent qualifications. For programs with more than five residents enrolled, a ratio of such faculty to residents of at least 1:1.5 must be maintained. (This is a minimum requirement and may be exceeded in certain subspecialties.)

2. The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation. An optimal environment for teaching excellence is provided when all teaching staff participate actively in (a) the clinical practice of the subspecialty, (b) their own continuing education, and (c) the activities of regional and national scientific societies. In addition, all full-time faculty will be expected to engage actively in research and in the presentation and publication of scientific studies. The director and teaching staff of a program must prepare and comply with written educational goals for the program. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

IV. Facilities and Resources
A. The Program Requirements for Residency Education in Internal Medicine governing the provision of appropriate facilities also apply to subspecialty training. Unique facilities required for a particular subspecialty will be found in the Program Requirements for that subspecialty.
Program Requirements for Residency Education in the Subspecialties of Internal Medicine

B. As used in this document, the primary training site shall mean the health-care facility that provides the required services, is the location of the program director's major activity, is the location where the resident spends the majority of clinical time, and is ordinarily the primary location of the core program in internal medicine.

C. Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program. In addition, refer to the Institutional Requirements of the Essentials of Accredited Residencies in Graduate Medical Education, II.D.

D. A sufficient number of new and follow-up patients of appropriate ages, including the adolescent and geriatric age groups, and of both sexes must be available to ensure adequate inpatient and outpatient experience for each subspecialty resident without diluting the experience of the residents in the general internal medicine residency program.

V. Specific Program Content

Subspecialty programs must include the following educational components:

A. Patient Care Experience
1. General Internal Medicine
   Programs must provide appropriate and structured opportunities for residents to maintain their skills in general internal medicine.
2. Subspecialty Medicine
   a. The available inpatient and ambulatory care patient population must provide experience with those illnesses that are encompassed by, and help to define, the subspecialty.
   b. Subspecialty training programs should enhance the ambulatory experience of general internal medicine residents through mechanisms such as cross-referral designed to maximize both the quality of patient care and shared educational opportunities.
   c. Experience in ambulatory settings that includes consultative as well as continuing care must occur at least ½ day each week throughout at least 18 months of a 24-month training program. Residents should, on average, be responsible for not less than one nor more than three new patients and not less than three nor more than six return patients during each ½-day session. (This is a minimum requirement and may be exceeded in certain subspecialties.)

B. Consultation Experience

Subspecialty residents must have the appropriate supervised experience to develop skills in providing consultation services, communicating with referring physicians and other members of the health-care team, and ensuring support for continuous care by the patient's primary physician.

C. Teaching Experience

The program must provide residents with the opportunity to teach medical students, physicians, and other professional personnel.

D. Conferences

Conferences must be conducted regularly as scheduled and must be attended by all available faculty and residents. At a minimum, there should be at least one clinical conference, one basic science conference, one literature review conference (journal club), and one research conference each month. Residents must actively request autopsies and participate in formal review of gross and microscopic pathological material from patients who have been under their care. It is essential that residents participate in planning and in conducting conferences. Faculty and resident attendance and participation at multidisciplinary conferences is also expected.

E. Procedures

Residents must develop a comprehensive understanding of the indications, contraindications, limitations, complications, techniques, and interpretation of results of those technical procedures integral to the discipline. Residents must acquire knowledge of and skill in educating patients about the technique, rationale, and ramifications of procedures and in obtaining procedure-specific informed consent. Faculty supervision of residents in their performance is required, and each resident's experience in such procedures must be documented by the program director.

F. Occupational Safety and Health Administration (OSHA) and Healthcare Regulations

Residents must have formal instruction in current OSHA regulations and universal precautions and protection of health-care workers.

G. Critical Assessment and Decision Sciences

Residents must have instruction in the evaluation of medical literature, clinical epidemiology, clinical study design, relative and absolute risks of disease, medical statistics, and medical decision making.

H. Continuous Quality Improvement

Residents are expected to have instruction and experience in the principles, objectives, and processes of quality assessment and improvement and risk management.

I. Psychosocial, Economic, and Ethical Issues

Training must include cultural, social, family, behavioral, and economic issues, such as confidentiality of information, indications for life-support systems, and allocation of limited resources. Residents must be taught the social and economic impact of their decisions on patients, the primary care physician, and society.

J. Educational and Counseling Skills

Residents should have instruction and experience in patient counseling skills and community education. This training should emphasize effective communication techniques for diverse populations, as well as organizational resources useful for patient and community education.

K. Research

As part of the academic environment, an active research component must be included within each accredited subspecialty program. The program must ensure meaningful, supervised research experience with appropriate protected time for each resident, while maintaining the essential clinical experience. Recent productivity by the program faculty and by the residents will be required, including publications in peer-reviewed journals. Residents must learn the design and interpretation of research studies, responsible use of informed consent, and research methodology and interpretation of data. The program must provide instruction in the critical assessment of new therapies and of the medical literature. Residents should be advised and supervised by qualified staff members in the conduct of research.

L. Other Scholarly Activities

The resident should make presentations at lectures, medical grand rounds, journal club, and other conferences.

VI. Evaluation

A. Residents

1. Formative Evaluation

Subspecialty program directors must establish procedures for evaluating and documenting the clinical and technical competence of subspecialty residents. These procedures must include
observation, assessment, and substantiation of residents' comprehensive and specialized medical knowledge and provision of medical care, including advanced skills in history-taking, physical examination, clinical judgment, management, and consultation, and their ability to critically analyze clinical situations and make medical decisions. The program must also evaluate residents' technical proficiency, communication, humanistic qualities, professional attitudes and behavior, and commitment to scholarship as demonstrated within the clinical setting.

Records must be maintained by documentation logbooks or an equivalent method to demonstrate that subspecialty residents have had adequate experience with invasive procedures. Records should state the indications and complications and include the name of the supervising physician. Such records must be kept in sufficient detail to permit use in future credentialing.

Regular and meaningful feedback to subspecialty residents about their performance is essential to their continuing growth and development as subspecialty interns. There must be regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician. Residents must be evaluated and their performance reviewed with them on completion of each rotation period. At least semiannually, the program must provide to the resident structured feedback on performance, including appropriate counseling and other necessary remedial effort. Adequate records of the evaluation and counseling process must be maintained for each resident. Such records must be available in the resident's file and must be accessible to the resident.

2. Summative Evaluation

The program director must prepare a detailed, written evaluation of the clinical competence of each subspecialty resident annually and/or at the conclusion of the resident's period of training in the program. Such evaluations must stipulate the degree to which the resident has mastered each component of clinical competence (i.e., clinical judgment, medical knowledge, clinical skills, humanistic qualities, professional attitudes and behavior, and provision of medical care), and has acquired proficiency in each of the various procedural skills identified in the program's curriculum. A record of the evaluation must be maintained in the program files to substantiate future judgments provided to hospital credentialing committees, certifying boards, licensing agencies, and other appropriate bodies. Residents must be advanced to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth. In the event of an adverse annual evaluation, residents must be offered the opportunity to address judgments of academic deficiencies or misconduct before an independent, appropriately constituted clinical competence committee. Academic due process provides fundamental fairness to the resident and protects the institution by ensuring accurate, proper, and definitive resolution of disputed evaluations.

B. Faculty and Program

The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Written evaluations by residents should be utilized in this process. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents. Provision must be made for residents to evaluate confidentially the faculty and the training program formally in writing at least annually. The results of such evaluations should be used for faculty counseling and for selecting faculty members for specific teaching assignments.

VII. Program Requirements

The Program Requirements for training programs in a specific subspecialty may exceed the minimum requirements set forth above.

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Program Requirements for Residency Education in Cardiovascular Disease

I. Educational Program

A subspecialty educational program in cardiology must be organized to provide training and experience in the evaluation and management of a wide variety of patients with acute and chronic cardiovascular conditions including chronic coronary heart disease, congestive heart failure, arrhythmias, acute myocardial infarction and other acute ischemic syndromes, lipid disorders, hypertension, cardiomyopathy, valvular heart disease, pulmonary heart disease, peripheral vascular disease, infections and inflammatory heart disease, and adult congenital heart disease. The training and experience must be at a sufficient level for the resident to acquire the competency of a specialist in the field. The training program must be 3 years in duration. There should be a minimum of one resident per training year, yielding a minimum of three residents.

II. Faculty

The program must provide a minimum of four teaching faculty. In programs with a total of more than six trainees, for each 1.5 residents there must be no less than one faculty member who must devote at least 20 hours per week to teaching, research, administration, and/or the critical evaluation of the performance, progress, and competence of the residents. The program director and faculty should be certified by the American Board of Internal Medicine in the subspecialty of cardiovascular disease or possess equivalent qualifications.

III. Facilities and Resources

Modern facilities to accomplish the overall educational program must be available and functioning. These include inpatient, ambulatory care, and clinical and research laboratory resources. Specifically, there must be laboratories in which cardiac hemodynamics, angiography, percutaneous transluminal coronary angioplasty, invasive electrophysiologic studies, and other interventional procedures are performed. There must be laboratories that provide resources for electrophysiography, ambulatory electrocardiogram (ECG) recording, exercise testing, echocardiography (including Doppler and transesophageal studies), and radionuclide techniques. Other hospital resources should include facilities for assessment of peripheral vascular disease and pulmonary physiology. Critical care units must include a cardiac care unit and a cardiac surgery intensive care unit. Resources must be available for pacemaker implantation, including automatic implantable cardioverter/defibrillator follow-up. There must be a cardiac catheterization laboratory and active cardiac surgery at the primary training site.
IV. Specific Program Content

Cardiovascular medicine is an increasingly complex and expanding discipline. To function as consultants in cardiovascular medicine, residents must become expert in an ever-expanding body of knowledge and technical skills. This expertise will allow the resident to integrate appropriate information regarding the pathophysiology, pathogenesis, natural history, and diagnosis required for the management and prevention of diseases of the heart and blood vessels. The goal of the training program is to provide opportunities for the residents to develop clinical competence in the field of adult cardiology.

A. Clinical Experience

1. Required Patient Population
   Clinical experience must include opportunities to observe, manage, and judge the effectiveness of therapeutic programs in patients with a wide variety of adult cardiovascular disorders on both an inpatient and an outpatient basis. The resident must be given opportunities to assume continuing responsibility for both acute and chronically ill patients to learn the natural history of cardiovascular disease.

2. Ambulatory Medical Experience
   Continuing care experience in the ambulatory care setting must occur at least ½ day each week throughout at least 24 months of the training program.

3. Inpatient Experience
   There must be at least 6 months of nonlaboratory clinical practice activities (e.g., consultations, cardic care units, postoperative care of cardiac surgery patients).

4. Special Clinical Experiences
   There must be at least 24 months of clinical training, including inpatient and special experiences. The program must provide a minimum of:
   a. Four months in the cardic catheterization laboratory
   b. Four months in noninvasive cardic evaluations, including exercise stress testing, ECG interpretation, ambulatory ECG recording, echocardiography, and nuclear cardiology.
   c. Two months devoted to electrophysiology and pacemaker follow-up

B. Technical and Other Skills

1. The program must provide sufficient experience for the resident to acquire skill in the performance and interpretation of:
   a. History and physical examination
   b. Cardiopulmonary resuscitation and advanced cardiac life support
   c. Elective cardiology
   d. Bedside right heart cardiology
   e. Insertion and management of temporary pacemakers
   f. Right and left heart catheterization including coronary arteriography; residents must participate in a minimum of 100 catheterizations.
   g. Exercise stress testing; residents must perform a minimum of 50 tests
   h. Echocardiography; residents must perform a minimum of 150 studies and interpret a minimum 150 studies

2. The program must provide opportunities for residents to acquire experience with the performance and (where applicable) interpretation of:
   a. Percutaneous transluminal coronary angioplasty and other interventional procedures
   b. Cardiovascular rehabilitation
   c. Atrioventricular nodal ablation
   d. Radiofrequency ablation
   e. Ongoing research projects
   f. Cardiovascular literature

C. Formal Instruction

The program must provide didactic instruction and opportunities to acquire knowledge in:

1. Basic science
   a. Cardiovascular anatomy
   b. Cardiovascular physiology
   c. Cardiovascular metabolism
   d. Molecular biology of the cardiovascular system
   e. Cardiovascular pharmacology
   f. Cardiovascular pathology

2. Prevention of cardiovascular disease
   a. Epidemiology and biostatistics
   b. Risk factors
   c. Lipid disorders

3. Evaluation and management of patients with:
   a. Coronary artery disease and its manifestations and complications
   b. Arrhythmias
   c. Hypertension
   d. Cardiomyopathy
   e. Valvular heart disease
   f. Pericardial disease
   g. Pulmonary heart disease
   h. Peripheral vascular disease
   i. Cerebrovascular disease
   j. Heart disease in pregnancy
   k. Adult congenital heart disease
   l. Complications of therapy

4. Management of:
   a. Acute and chronic congestive heart failure
   b. Acute myocardial infarction and other acute ischemic syndromes
   c. Acute and chronic arrhythmias
   d. Preoperative and postoperative patients
   e. Cardiac transplant patients

5. Diagnostic techniques, including:
   a. Magnetic resonance imaging
   b. Fast computed tomography
   c. Positron emission tomography

D. Research Experience

See paragraphs K and L, Section V, Specific Program Content, Program Requirements for Residency Education in the Subspecialties of Internal Medicine.

E. Evaluation

See Section VI, General Information Section, Program Requirements for Graduate Education in the Subspecialties of Internal Medicine.

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Program Requirements for Residency Education in Clinical Cardiac Electrophysiology

I. Educational Program

A. A subspecialty educational program in clinical cardiac electrophysiology (CCEP) must function as an integral component of an accredited subspecialty fellowship in cardiovascular disease and must be organized to provide training and experience at a sufficient level for the resident to acquire the competency of a specialist in the field.

B. During training in CCEP, the resident's clinical experience must include opportunities to observe, diagnose, manage, and judge the effectiveness of treatment for inpatients and outpatients with ectopy, syncope, and tachyarrhythmias and with both supraventricular and ventricular tachyarrhythmias. The resident should be given opportunities to assume continuing responsibility for both acutely and chronically ill patients to learn the natural history of a wide variety of cardiac arrhythmias and how to treat them.

C. The CCEP program must be 1 year in length, following completion of an accredited cardiovascular disease residency program.

D. The principles enumerated in the Program Requirements for Residency Education in Internal Medicine and the General Information Section of the Program Requirements for Residency Education in the Subspecialties of Internal Medicine are also applicable to training in this subspecialty.

II. Faculty

Faculty responsible for training should be board certified in CCEP or possess equivalent qualifications. There should be a minimum of two clinically active CCEP faculty members and no less than one full-time CCEP faculty member per 1.5 residents. Access to faculty with expertise in basic cardiac electrophysiology and pharmacology and to research laboratories in which cardiac electrophysiologic research is performed is desirable.

III. Facilities and Resources

A. Modern clinical inpatient and ambulatory care and research facilities to accomplish the overall educational program must be available and functioning. Specifically, there must be a clinical cardiac electrophysiologic laboratory for invasive intracardiac electrophysiologic studies and catheter ablation and laboratories to provide the noninvasive diagnostic and therapeutic techniques detailed below.

B. The electrophysiology laboratory must contain appropriate cardiac fluoroscopic equipment, programmable stimulator, recording devices, and resuscitative equipment. An outpatient follow-up program must exist to care for patients with pacemakers and implantable cardioverters/defibrillators (ICDs). Clinical care units must include cardiac care units (CCUs), cardiac surgical intensive care units, and outpatient clinics. Association with a cardiac surgery program with surgeons skilled in arrhythmia surgery and electrical device implantation is an essential part of a CCEP training program. Although the surgical program does not necessarily have to be in the same hospital or medical center as the CCEP program, a close geographic and working relationship between the two must be documented.

IV. Specific Program Content

A. Clinical Experience

1. Residents should have clinical experiences that provide the opportunity to acquire knowledge of the indications, contraindications, risks, limitations, sensitivity, specificity, predictive accuracy, and appropriate techniques for evaluating patients with:
   a. A variety of rhythm disorders, including but not limited to
      1. sinus node dysfunction,
      2. atrioventricular (AV) and intraventricular block, and
      3. supraventricular and ventricular tachyarrhythmias.
   b. Clinical conditions such as
      1. unexplained syncope,
      2. aborted sudden cardiac death,
      3. palpitations,
      4. WPW syndrome, and
      5. long QT syndrome.
   c. Conditions that make them candidates for nonpharmacological therapy such as ablation, surgery, and ICD implantation.

2. Clinical experiences involving:
   a. Consultation
   b. Care of patients in the cardiac care unit, emergency room, or other intensive care settings.
   c. Care of the patient before and after an electrophysiologic study.
   d. Preoperative and postoperative care of the patient undergoing surgery for arrhythmias.
   e. Outpatient follow-up of patients treated with drugs, devices, or surgery.
   f. Electrocardiography—proficiency in the interpretation of the standard 12-lead ECG, stress testing, ambulatory ECG recording, signal-averaged ECG, and telephone-transmitted ECGs.
   g. Catheter ablation therapy for arrhythmias.
   h. Care of patients with temporary and permanent pacemakers.
   i. Care of patients with ICDs.

B. Technical and Other Skills

1. To become proficient in CCEP, residents must have the opportunity to acquire a broad knowledge base of cardiac electrophysiology. There must be opportunity to develop a high level of performance in such areas as interpretation of ECGs, ambulatory ECG recordings, stress-testing ECG recordings, and chest radiography, as well as the performance of history and physical examination, cardiopulmonary resuscitation and advanced cardiac life support, and arterial and venous cannulation.

2. Residents must have opportunities to acquire skill in the interpretation of:
   a. Activation sequence mapping recordings.
   b. Invasive intracardiac electrophysiologic studies.
   c. Relevant imaging studies, including chest radiography.
   d. Tilt testing.
   e. Electrograms and ambulatory ECG recordings.
   f. Continuous in-hospital ECG recording.
   g. Endocardial electrogram recording from intracardiac electrophysiologic studies.
   h. Epicardial electrogram recordings.
   i. Esophageal ECG recordings.
   j. Signal-averaged ECG recordings.
   k. Stress-transmitted testing ECG recordings.
   l. Telephone-transmitted ECG recordings.
   m. Transmembrane intracellular and monophasic extracellular action potential recordings.

3. Residents must have opportunities to acquire skill in the performance of clinical cardiac electrophysiologic studies.
   a. The resident is expected to perform an average of two or more electrophysiology studies per week as the primary operator or...
Program Requirements for Residency Education in Clinical Cardiac Electrophysiology

as an assistant closely involved with data collection and analysis.

b. A minimum of 100 intracardiac procedures in at least 50 patients will be required.

1. Of these patients studied, at least 25% must have supraventricular tachycardias such as atrioventricular nodal reentrant tachycardias, atrioventricular reentrant tachycardias related to the WPW syndrome, or atrial tachycardias.

2. The program director of the CCEP training program will be expected to ensure the competency of the resident in the following:
   a. Electrode catheter introduction
   b. Electrode catheter positioning in atria, ventricles, coronary sinus, His bundle area, and pulmonary artery
   c. Stimulating techniques to obtain conduction times and refractory periods, to initiate and terminate tachycardias
   d. Recording techniques, including an understanding of amplifiers, filters, and signal processors
   e. Measurement and interpretation of data

4. Residents must also have opportunities to acquire skill in the following:
   a. Use of antiarrhythmic drugs, including knowledge of pharmacokinetics and pharmacodynamics
   b. Management of patients who are critically ill with cardiac arrhythmias
   c. Cardiopulmonary resuscitation
   d. Advanced cardiac life support
   e. Electrical cardioversion and defibrillation
   f. Noninvasive diagnostic techniques, including esophageal pacing
   g. Noninvasive therapeutic techniques
   h. Arterial and venous cannulation
   i. Transcutaneous pacing
   j. Insertion and management of temporary pacemakers
   k. Insertion and management of permanent pacemakers
   l. Participation in the clinical application of ICDs
   m. Critical analysis of published electrophysiologic data in laboratory and clinical research
   n. Cardioversion and defibrillation

C. Formal Instruction

The program must provide instruction and opportunities to acquire knowledge in:

1. Basic cardiac electrophysiology, including but not limited to genesis of arrhythmias, normal and abnormal electrophysiologic responses, autonomic influences, effects of ischemia, drugs, and other interventions.
2. Basic and clinical cardiac electrophysiology.
3. Pharmacology.
4. Electrocardiography.
5. Surgery for arrhythmias and device implantation.
6. Personal development, attitudes, and coping skills of physicians and other health-care professionals who care for critically ill patients.

D. Research Experience

See Program Requirements for Residency Education in the Subspecialties of Internal Medicine, Section V, Specific Program Content, paragraphs K and L.

E. Evaluation

See Program Requirements for Residency Education in the Subspecialties of Internal Medicine, Section VI, Evaluation.

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Program Requirements for Residency Education in Critical Care Medicine

I. Educational Program

A. An educational program in critical care medicine must be organized at a sufficient level for the resident to acquire expertise in managing critically ill patients and in supervising critical care units.

B. Critical care medicine training programs may be 1 or 2 years in duration.

1. Programs that accept only those who have completed training in an accredited program in one of the subspecialties of internal medicine may be organized to offer a single year of training.

2. Programs organized to provide critical care medicine training in association with an accredited program in one of the subspecialties of internal medicine may fulfill training requirements by devoting 12 months to critical care out of a total of 36 months of training.

3. Otherwise, a program must provide training of 2 years in duration.

C. To provide evidence of substantial institutional support in those disciplines most relevant to critical care medicine, the sponsoring institution's primary training site must sponsor accredited subspecialty programs in cardiovascular disease, pulmonary disease, and infectious diseases, as well as an accredited residency program in general surgery. The presence of training programs in these disciplines ensures the extensive educational, patient care, and research resources that are essential to the learning environment for critical care medicine residents. Furthermore, peer interaction is essential in the education of critical care medicine residents.

D. The sponsoring institution(s) must care for patients with major trauma and must have an active open heart surgery program.

E. Institutional policies should be established to govern the educational resources committed to critical care training programs and to ensure cooperation of all involved disciplines.

II. Faculty

A. The training program must be under the direction of an internist who is certified in critical care medicine by the American Board of Internal Medicine or who has equivalent qualifications in critical care medicine. The program director and the critical care teaching staff must have privileges regarding the admission, treatment, and discharge of their own patients on critical care unit(s).

B. The director shall have administrative responsibility for the critical care teaching program, subject to the approval of the director of the parent internal medicine training program.

C. The teaching staff at the primary training site must include each of the following:

1. A minimum of three faculty who hold an American Board of Internal Medicine Certificate of Special Qualifications in critical care medicine or possess equivalent qualifications.

2. For each resident there must be no less than one faculty member who must devote at least 20 hours per week to teaching, research, administration, and/or the critical evaluation of the performance, progress, and competence of the residents.

3. There must be at least two institutionally based faculty members each in nephrology, gastroenterology, and hematology who devote substantial effort to the education of critical care medicine residents.
4. There must be faculty members in geriatric medicine and oncology who are available to participate in the education of residents in critical care medicine.

All faculty noted above must be certified in their subspecialties by the American Board of Internal Medicine or possess equivalent qualifications.

D. Faculty members in anesthesiology, neurology, and neurosurgery who are certified by an American Board of Medical Specialties member board in their respective disciplines or who have equivalent training and experience must also participate at the primary training site in the education of residents in critical care medicine.

E. Because critical care training is multidisciplinary in nature, faculty from several related disciplines such as general surgery, thoracic surgery, pediatrics, urology, orthopaedic surgery, emergency medicine, and obstetrics-gynecology must be available to participate in the training program.

F. A collegial relationship must exist between the director of the critical care training program and the teaching staff, to enhance the educational opportunities for all residents. (See General Information Section, Program Requirements in the Subspecialties of Internal Medicine.)

III. Facilities and Resources

A. Modern facilities to accomplish the educational program must be available and functioning.

1. The critical care unit(s) must be located in a designated area within the hospital and must be constructed and designed specifically for the care of critically ill patients.

2. Whether operating in separate locations or in combined facilities, the program must provide the equivalent of a medical intensive care unit (MICU), a surgical intensive care unit, and a coronary intensive care unit (CICU).

3. The medical intensive care unit must be present at the primary training site and should be the focus of a teaching service in which the program director in critical care medicine is responsible for the educational program.

B. Available facilities must be adequate to care for patients with acute myocardial infarction, severe trauma, shock, recent open heart surgery, recent major thoracic or abdominal surgery, and severe neurologic and neuromuscular conditions.

C. In units to which a resident is assigned, an average census of at least five patients per resident is required.

D. A sufficient number of knowledgeable personnel and the necessary equipment to care for critically ill patients must be available. Personnel must include specially trained nurses and technicians who are skilled in critical care instrumentation, respiratory function, and laboratory medicine.

E. A supporting laboratory must be available to provide complete and prompt laboratory evaluation.

F. Modern imaging services and an active emergency service must be available.

G. Nutritional support services also must be available.

IV. Specific Program Content

A. Clinical Experience

1. Ultimate integration and application of the necessary knowledge, skills, and attitudes are best experienced in the intensive care environment. The program must be structured to provide adequate and meaningful patient responsibility in critical care unit(s), at least 6 months of which must be devoted to the care of critically ill medical patients (i.e., MICU/CICU or equivalent). If there is a separate CICU, residents must spend at least 1 month in that unit.

2. The resident must be given opportunities to assume responsibility, under appropriate supervision, for the care of patients throughout their stay in the critical care unit(s) and to monitor the subsequent course of patients throughout the remainder of their hospital stay. To assess the various aspects of critical care, the resident must also have organized opportunities to learn about former critical care patients after hospital discharge, including clinical pathological correlations when appropriate.

3. Because critical care medicine is multidisciplinary in nature, clinical experience must include opportunities to manage adult patients with a wide variety of serious illnesses and injuries requiring treatment in a critical care setting. Therefore, residents should be assigned for a minimum of 3 months to additional rotations, which may include surgical, shock/trauma, and/or neurologic/neurosurgical intensive care units; pediatric intensive care unit; burn unit; dialysis unit; anesthesia service; cardiac catheterization laboratory; high-risk pregnancy intensive care unit; and transplant unit.

B. Technical and Other Skills

1. The program must be structured to permit all critical care residents to develop the requisite procedural and technical skills, including the ability to interpret data derived from various bedside devices commonly employed to monitor patients in the critical care setting.

2. The training program must provide opportunities for residents to learn the indications, contraindications, complications, and limitations of the following critical care procedures and the technical skills necessary to perform them. This experience would ordinarily occur in a pulmonary function laboratory or respiratory care service.

a. Airway

   1. Establishment and maintenance of open airway in nonintubated, unconscious, paralyzed patients

   2. Intubation (oral, nasotracheal)

b. Breathing, ventilation

   1. Ventilation by bag and mask

   2. Mechanical ventilation using pressure-cycled, volume-cycled, and negative-pressure mechanical ventilators

   3. Use of reservoir masks and continuous positive airway pressure masks for delivery of supplemental oxygen, humidifiers, nebulizers, and incentive spirometry

   4. Management of pneumothorax (needle insertion and drainage systems)

   c. Maintenance of circulation

      1. Arterial puncture and blood sampling

      2. Insertion of central venous, arterial, and pulmonary artery balloon flotation catheters

      3. Basic and advanced cardiopulmonary resuscitation

      4. Cardioversion

3. The program must provide opportunities to learn the indications, contraindications, complications, and limitations of the following procedures: practical experience is recommended.

   a. Pericardiocentesis

   b. Transvenous pacemaker insertion

   c. Peritoneal dialysis

   d. Peritoneal lavage

   e. Insertion of chest tubes

   f. Aspiration of major joints

4. Experience also must be provided in the analysis of data pertaining to the following:

   a. Cardiac output determinations by thermodilution and/or other techniques

   b. Evaluation of oliguria

   c. Management of massive transfusions
Program Requirements for Residency Education in Critical Care Medicine

d. Management of hemostatic defects
   e. Interpretation of antibiotic levels and sensitivities
   f. Monitoring and assessment of metabolism and nutrition
   g. Calculation of oxygen content, intrapulmonary shunt and alveolar-arterial gradients
   h. Pharmacokinetics

5. Opportunities also must be available for residents to acquire those skills required to organize, administer, and direct a critical care unit and to work effectively as a member of a multidisciplinary team.

C. Formal Instruction

The training program must provide opportunities for the residents to acquire knowledge of, and to develop clinical competence in, the field of critical care medicine. Critical care medicine deals primarily with acute life-threatening conditions in which multiple organ failure is common. Consequently, the formal curriculum must exhibit, as a minimum, the following content areas:

1. Physiology, pathophysiology, diagnosis, and therapy of disorders of the cardiovascular, respiratory, renal, gastrointestinal, genitourinary, neurologic, endocrine, hematologic, musculoskeletal, and immune systems, as well as of infectious diseases

2. Electrolyte and acid-base physiology, pathophysiology, diagnosis, and therapy

3. Metabolic, nutritional, and endocrine effects of critical illnesses

4. Hematologic and coagulation disorders associated with critical illness

5. Critical obstetric and gynecologic disorders

6. Management of the immunosuppressed patient

7. Management of anaphylaxis and acute allergic reactions

8. Trauma

9. Monitoring and medical instrumentation

10. Intracranial pressure monitoring

11. Pharmacokinetics, pharmacodynamics, drug metabolism and excretion in critical illness

12. Use of paralytic agents

13. Ethical, economic, and legal aspects of critical illness

14. Biostatistics and experimental design

15. Principles and techniques of administration and management

16. Psychosocial and emotional effects of critical illnesses on patients and their families

17. Iatrogenic and nosocomial problems in critical care medicine

18. Personal development, attitudes, and coping skills of physicians and other health-care professionals who care for critically ill patients

19. Occupational Safety and Health Administration (OSHA) regulations and universal precautions and protection of health-care workers

D. Research Experience

See paragraphs K and L, Section V, Specific Program Content, Program Requirements for Residency Education in the Subspecialties of Internal Medicine.

E. Evaluation

See Section VI, Evaluation, Program Requirements for Residency Education in the Subspecialties of Internal Medicine.

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Program Requirements for Residency Education in Endocrinology, Diabetes, and Metabolism

I. Educational Program

A subspecialty educational program in endocrinology, diabetes, and metabolism must be organized to provide training and experience at a sufficient level for the resident to acquire the competency of a specialist in the field. It must be 2 years in duration.

II. Faculty

See Section III, Faculty, of the Program Requirements for Residency Education in the Subspecialties of Internal Medicine.

III. Facilities and Resources

Modern facilities and services, including inpatient, ambulatory care, and laboratory resources, must be available and functioning. Specifically, there must be a complete biochemistry laboratory; facilities for radioimmunoassay and karyotyping; nuclear, ultrasonic, and radiologic imaging services that can conduct studies for all types of endocrine disease; a dietary service; endocrine surgical services; and a pathology laboratory for the interpretation of surgical and cytologic specimens, including immunohistologic studies. In addition, there should be a close working relationship with dietary and/or nutrition services, as well as specialists in surgery, nephrology, neurology and neurosurgery, obstetrics and gynecology, ophthalmology, pediatrics, podiatry, and urology.

IV. Specific Program Content

A. Clinical Experience

1. The training program must provide opportunities for the resident to develop clinical competence in the field of endocrinology, diabetes, and metabolism. Clinical experience must include opportunities to diagnose and manage inpatients and outpatients of all ages and both sexes and representing variable acuity who have a wide variety of endocrine and metabolic diseases. The program also must include opportunities to function in the role of an endocrinology consultant for other physicians and services in both inpatient and outpatient settings.

2. The residents must be given opportunities to assume responsibility for and follow patients throughout the training period in both inpatient and outpatient settings to observe the evolution and natural history of these disorders, as well as the effectiveness of therapeutic interventions. To accomplish these goals, the educational program must include, on average, a minimum of 2 half-days each week in ambulatory care. Residents must have experience with patients who have diabetes as well as thyroid, neuroendocrine, reproductive, and metabolic bone diseases and other general endocrine problems.

3. The curriculum must emphasize biochemistry and physiology, including cell and molecular biology, as they relate to endocrinology, diabetes, and metabolism. The appropriate utilization and interpretation of clinical laboratory, radionuclide, and radiologic studies for the diagnosis and treatment of endocrine and metabolic diseases must be stressed.

4. Residents should have opportunities to participate in a multidisciplinary diabetes education and treatment program.

5. Residents should have formal instruction, clinical experience, or opportunities to acquire expertise in the evaluation and management of the following disorders:
   a. Endocrine, paracrine, and autocrine dysfunction of endocrine tissues
b. Disorders of all endocrine glands, including the parathyroids, pituitary, thyroid, pancreas, adrenal, and gonads, and endocrine function of brain, kidney, skin, and other "nonendocrine" tissues

c. Thyroid disorders, including
   1. Hyperthyroidism and hypothyroidism
   2. Nodular thyroid diseases
   3. Thyroid cancer
   4. Goiter
   5. All varieties of thyroiditis, including silent, subacute, autoimmune, and chronic thyroiditis

d. Hypothalamic and pituitary tumors, including
   1. Prolactinoma
   2. Alpha subunit secreting pituitary tumors
   3. Acromegaly
   4. Cushing's disease
   5. Gonadotropin-secreting pituitary tumors
   6. Thyrotropin-producing pituitary tumors
   7. Nonfunctioning tumors
   8. Metabolically active lesions
   9. Cranial paraganglioma

e. Type I and Type II diabetes mellitus, including
   1. Patient monitoring and treatment objectives in children and adults
   2. Acute and chronic complications, including
      a. Diabetic ketoacidosis
      b. Hyperosmolar coma
      c. Hypoglycemia
   d. Microvascular and macrovascular disease including
      1. Diabetic retinopathy
      2. Diabetic nephropathy
      3. Diabetic neuropathy
      4. Diabetic dermopathy
      5. Coronary heart disease
      6. Peripheral vascular disease
      7. Cerebral vascular disease
   e. Infections
   3. Gestational diabetes mellitus and diabetes mellitus complicated by pregnancy
   4. The surgical patient with diabetes mellitus
   5. Patient education
   6. Psychosocial issues
   7. Genetics and genetic counseling
   8. Hypoglycemic syndromes
   9. Dietary principles

f. Disorders of calcium and skeletal metabolism, including
   1. Hyperparathyroidism and other causes of hypercalcemia
   2. Hypoparathyroidism and other causes of hypocalcemia
   3. Metabolic bone diseases
   4. Evaluation and treatment of kidney stones

g. Disorders of fluid, electrolyte, and acid-base metabolism, including
   1. Hyponatremia and hypotenatremia
   2. Hyperkalemia and hypokalemia
   3. Metabolic acidosis
   4. Metabolic alkalosis
   5. Disorders of magnesium metabolism
   6. Diabetes insipidus, central and nephogenic

h. Disorders of blood pressure
   1. Neuroendocrinology and endocrine aspects of psychiatric diseases
   2. Endocrine aspects of aging, including menopause
   3. Endocrine emergencies, including
      1. Hypercalcemia and hypocalcemia

2. Thyroid storm
3. Myxedema coma
4. Adrenal insufficiency
5. Pituitary apoplexy

l. Disorders of lipid, carbohydrate, and protein metabolism, including principles of enteral and parenteral nutritional support
m. Nutritional disorders and obesity
n. Hormone-producing neoplasms
o. Endocrine adaptations and maladaptations to systemic diseases
p. Disorders of reproductive endocrinology and endocrinologic aspects of sexual dysfunction

B. Technical and Other Skills

Residents should have experience in the performance of endocrine clinical laboratory and radionuclide studies and basic laboratory techniques, including quality control, quality assurance, and proficiency standards.

A provision must be made for the residents to acquire experience and skill in the following areas:

1. The interpretation of laboratory tests; immunoassays; and radionuclide, ultrasound, radiologic, and other imaging studies for the diagnosis and treatment of endocrine and metabolic disease, including the effects of a variety of unrelated disorders and performance and interpretation of stimulation and suppression tests.
2. Performance and cytologic interpretation of fine needle aspiration of the thyroid.
3. Management of patients of all ages with diabetes mellitus, including but not limited to the following aspects of the disease:
   a. The rationale, indications, performance, and interpretation of glucose tolerance tests
   b. The utilization and interpretation of glycated hemoglobin, beta cell, and insulin antibody levels in patient management and counseling
   c. Rationale for and calculation of diabetic diets
   d. Prescription of exercise programs
   e. Oral antidiabetic therapy
   f. The use of intravenous insulin in acute decompensated diabetes mellitus
   g. Chronic insulin administration, including the use of all varieties of insulin delivery systems
   h. Glucose monitoring devices
      i. Pundistic examination, recognition, and appropriate referral of patients with diabetic retinopathy
   j. Foot care
   k. Psychosocial effects of diabetes mellitus on patients and their families

4. Patient and community education
5. Diagnosis and treatment of hypertension.

C. Formal Instruction

The formal curriculum of the program must, as a minimum, provide instruction in the following:

1. Pathogenesis and epidemiology of diabetes mellitus
2. Genetics as it relates to endocrine diseases
3. Pediatric endocrinology
4. Endocrine physiology and pathophysiology in systemic diseases and principles of hormone action
5. Biology of sexual development, reproductive endocrinology, and endocrinologic aspects of sexual dysfunction
6. Biochemistry and physiology, including cell and molecular biology and immunology, as they relate to endocrinology and metabolism
7. Signal transduction pathways and biology of hormone receptors
Program Requirements for Residency Education in Endocrinology, Diabetes, and Metabolism

D. Research Experience
See paragraphs K and L, Section V, Specific Program Content, Program Requirements for Residency Education in the Subspecialties of Internal Medicine.

E. Evaluation
See Section VI, Evaluation, Program Requirements for Residency Education in the Subspecialties of Internal Medicine.

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Program Requirements for Residency Education in Gastroenterology

I. Educational Program
A subspecialty education program in gastroenterology must be organized to provide training and experience at a sufficient level for the resident to acquire the competency of a specialist in the field. It must be 2 years in duration.

II. Faculty
See Section III, Faculty, of the Program Requirements for Residency Education in the Subspecialties of Internal Medicine.

III. Facilities and Resources
A. Modern inpatient, ambulatory care, and laboratory facilities to accomplish the overall educational program must be available and functioning at the primary training site. Specifically, there must be a procedure laboratory completely equipped to provide modern capability in gastrointestinal procedures. This equipment must include an up-to-date array of complete diagnostic and therapeutic endoscopic instruments and accessories plus esophageal motility instrumentation. Facilities for parasitology testing should be provided. Supporting services including pathology, diagnostic radiology, interventional radiology, medical imaging and nuclear medicine, general surgery, and oncology must also be available.

B. Facilities for the intensive care of critically ill patients with gastrointestinal disorders must be provided, including a working relationship with surgery, oncology, pediatrics, radiology, and pathology services.

IV. Specific Program Content
A. Clinical Experience
1. The training program must provide opportunities for residents to develop clinical competence in the field of gastroenterology, including hepatology, clinical nutrition, and gastrointestinal oncology.

2. Clinical experience must include opportunities to observe and manage a sufficient number of new and follow-up inpatients and outpatients of appropriate ages (including the adolescent and geriatric age groups), of both sexes, and with a wide variety of common and uncommon digestive disorders. The residents must be given opportunities to assume continuing responsibility for both acute and chronically ill patients to learn the natural history of gastroenterologic disorders, as well as the effectiveness of therapeutic programs.

3. Residents must have formal instruction, clinical experience, or opportunities to acquire expertise in the evaluation and management of the following disorders:
   a. Diseases of the esophagus
   b. Acid peptic disorders of the gastrointestinal tract
   c. Motor disorders of the gastrointestinal tract
   d. Irritable bowel syndrome
   e. Disorders of nutrient assimilation
   f. Inflammatory bowel diseases
   g. Vascular disorders of the gastrointestinal tract
   h. Gastrointestinal infections, including retroviral, mycotic, and parasitic diseases
   i. Gastrointestinal and pancreatic neoplasms
   j. Gastrointestinal diseases with an immune basis
   k. Pancreatitis
   l. Gallstones and cholecystitis
   m. Alcoholic liver diseases
   n. Viral and immune hepatitis
   o. Cholestatic syndromes
   p. Drug-induced hepatic injury
   q. Hepatobiliary neoplasms
   r. Chronic liver disease
   s. Gastrointestinal manifestations of HIV infections

4. Residents must have formal instruction, clinical experience, and opportunities to acquire expertise in the evaluation and management of patients with the following clinical problems:
   a. Dysphagia
   b. Abdominal pain
   c. Acute abdomen
   d. Nausea and vomiting
   e. Diarrhea
   f. Constipation
   g. Gastrointestinal bleeding
   h. Jaundice
   i. Abnormal liver chemistries
   j. Cirrhosis and portal hypertension
   k. Malnutrition
   l. Genetic/inherited disorders
   m. Depression, neurosis, and somatization syndromes
   n. Surgical care of gastrointestinal disorders

5. Experience in Ambulatory Care
Experience in ambulatory care settings that includes consultative as well as continuing care must occur at least 1/2 day each week throughout at least 18 months of the training program. Residents should, on average, be responsible for not fewer than one nor more than three new patients and not less than three nor more than six return patients during each 1/2-day session.

B. Technical and Other Skills
1. The program must provide for instruction in the indications, contraindications, complications, limitations, and (where applicable) interpretation of the following diagnostic and therapeutic techniques and procedures:
   a. Imaging of the digestive system, including
      1. Ultrasound procedures
   2. Computed tomography
   3. Magnetic resonance imaging
   4. Vascular radiology procedures
   5. Nuclear medicine procedures
   b. Endoscopic procedures
   c. Specialized dilation procedures
   d. Percutaneous cholangiography
   e. Percutaneous endoscopic gastrostomy
   f. Liver and mucosal biopsies
   g. Gastric, pancreatic, and biliary secretory tests
   h. Other diagnostic and therapeutic procedures utilizing enteral intubation and bougienage
   i. Gastrointestinal motility studies
   j. Sclerotherapy
   k. Enteral and parenteral alimentation
   l. Liver transplantation
m. Pancreatic needle biopsy
n. ERCP, including papillotomy and biliary stent placement

2. Opportunities also must be provided for the resident to gain competence in the performance of the following procedures. A skilled preceptor must be available to teach and to supervise them. The performance of these procedures must be documented in the resident’s record, giving indications, outcomes, diagnoses, and supervision(s).

a. Esophagogastroduodenoscopy; residents should perform a minimum of 100 supervised studies
b. Esophageal dilation; residents should perform a minimum of 15 supervised studies
c. Proctoscopy
d. Flexible sigmoidoscopy; residents should perform a minimum of 25 supervised studies
e. Colonoscopy with polypectomy; residents should perform a minimum of 100 supervised colonoscopies and 20 supervised polypectomies
f. Percutaneous liver biopsy; residents should perform a minimum of 20 supervised studies
g. Percutaneous endoscopic gastrostomy; residents should perform a minimum of 10 supervised studies
h. Biopsy of the mucus of esophagus, stomach, small bowel, and colon
i. Other diagnostic and therapeutic procedures utilizing enteral intubation and bougienage
j. Gastrointestinal motility studies
k. Nonvariceal hemostasis (upper and lower); residents should perform 20 supervised cases, including 10 active bleeders
l. Variceal hemostasis; residents should perform 10 supervised cases, including five active bleeders
m. Enteral and parenteral alimentation

C. Formal Instruction

The program must include emphasis on the pathogenesis, manifestations, and complications of gastrointestinal disorders, including the behavioral adjustments of patients to their problems. The impact of various modes of therapy and the appropriate utilization of laboratory tests and procedures should be stressed. Additional specific content areas that must be included in the formal program (lectures, conferences, and seminars) include

1. Anatomy, physiology, pharmacology, and pathology related to the gastrointestinal system, including the liver
2. The natural history of digestive diseases
3. Factors involved in nutrition and malnutrition
4. Surgical procedures employed in relation to digestive system disorders and their complications
5. Prudent, cost-effective, and judicious use of special instruments, tests, and therapy in the diagnosis and management of gastrointestinal disorders
6. Liver transplantation
7. Sedation and sedative pharmacology

D. Research Experience

See paragraphs K and L, Section V, Specific Program Content, Program Requirements for Residency Education in the Subspecialties of Internal Medicine.

E. Evaluation

See section VI, Evaluation, Program Requirements for Residency Education in the Subspecialties of Internal Medicine.

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tionships with other disciplines including but not limited to general surgery, orthopaedics, ophthalmology, otolaryngology, urology, audiology, occupational therapy, and speech therapy should be maintained. Additionally, a liaison must be established with the departments of nursing and social work.

C. Geriatric Care Team
There must be a meaningful experience with a physician-directed interdisciplinary geriatric team at the acute-care hospital (on the inpatient service or in the outpatient setting) or in a family practice center and, if possible, in one of the long-term-care facilities. Essential members include a geriatrician, a nurse, and a social worker. Additional desirable members of the team include a variety of individuals representing other disciplines such as neurology, psychiatry, physical medicine and rehabilitation, physical therapy, pharmacy, and chaplaincy. Regular team conferences must be held.

III. Facilities/Resources
A patient population adequate to meet the needs of the training program must be available in the facilities in which the educational experiences take place. Individuals of both sexes with a spectrum of chronic illness and potential for rehabilitation must be available. At all facilities utilized by the program the resident must be given opportunities to provide meaningful care. At each setting certain activities are mandated. The program must include the following:

A. Acute-Care Hospital
The acute-care hospital central to the geriatric medicine program must be an integral component of a teaching center. It must have the full range of services usually ascribed to an acute-care general hospital, including intensive care units, emergency room, operating rooms, diagnostic laboratory and imaging services, and pathology department.

B. Long-Term-Care Institution
One or more long-term-care institutions, such as a skilled nursing facility or chronic-care hospital, is a necessary component of the geriatric medicine program. The total number of beds available must be sufficient to permit a comprehensive educational experience. The institutions must be approved by the appropriate licensing agencies of the state, and the standard of facilities and care in each must be consistent with those promulgated by the Joint Commission on the Accreditation of Healthcare Organizations.

C. Long-Term Noninstitutional Care
At least one noninstitutional care service, for example, home care, day care, or life care, is a necessary component of the geriatric medicine program.

D. Ambulatory Care Program
The ambulatory care program must comprise a minimum of 25% of the resident's time over 18 months. Each resident should evaluate approximately one to three new geriatric patients and four to eight follow-up geriatric patients each week. This must include at least ½ day per week spent in a continuity of care experience. This experience must be designed to render care in a geriatric clinic or family practice center to elderly patients who may require the services of multiple medical disciplines (including but not limited to neurology, gynecology, urology, psychiatry, podiatry, orthopaedics, dentistry, audiology, and ophthalmology) as well as nursing, social work, and nutrition. The opportunity to render continuing care and to coordinate the implementation of recommendations from these medical specialties and disciplines is mandatory. Thus, medical records must include information pertinent to the assessment and management of older patients, including the functional assessment.

E. Additional Educational Environment
Peer interaction is essential for residents. To achieve this goal, an accredited training program must be present in at least one relevant specialty other than internal medicine.

There must be a formal affiliation agreement between each long-term-care facility included in the program and the sponsoring institution, in which each institution must acknowledge its responsibility to provide a high quality of care, adequate resources, and administrative support for the educational mission. In addition, there must be a letter of agreement between each long-term-care facility and office of the director of the geriatric medicine program that guarantees the director appropriate authority at the long-term-care institution to carry out the training program.

IV. Specific Program Content
All major dimensions of the curriculum should be structured educational experiences for which written goals and objectives, a specific methodology for teaching, and a method of evaluation exist. The curriculum must ensure the opportunity for residents to achieve the cognitive knowledge, psychomotor skills, interpersonal skills, professional attitudes, and practical experience required of a physician in the care of the aged.

Didactic as well as clinical learning opportunities must be available to the resident. Conferences or seminars/workshops in geriatric medicine should be specifically designed for the resident to augment the clinical experiences.

As the residents progress through their training, they must have the opportunity to teach personnel such as nurses, allied health personnel, medical students, and residents. Appropriate experiences designed to refine educational and teaching skills of the residents and to develop the necessary administrative skills must be provided.

Appropriate supervision of the residents must be provided during all of their educational experiences.

The following components must be provided:

A. Geriatric Medicine Consultation Program
This program must be formally available in the ambulatory setting, the inpatient service, and/or emergency medicine in the acute-care hospital.

B. Long-Term-Care Experience
In the long-term-care institutional setting each resident must have a minimum of 12 months of continuing longitudinal clinical experience with an assigned panel of patients for whom the resident is the primary provider. Additional block time long-term-care experience is encouraged. Emphasis during the longitudinal experience should be focused on (1) the approaches to diagnosis and treatment of the acutely and chronically ill frail elderly in a less technologically sophisticated environment than the acute-care hospital, (2) working within the limits of a decreased staff/patient ratio compared with acute-care hospitals, (3) a much greater awareness of and familiarity with physical medicine and rehabilitation, and (4) the challenge of the clinical and ethical dilemmas produced by the illness of the very old.

Experience with home visits and hospice care must be included. The resident must be exposed to the organizational and administrative aspects of home health care.

C. Research Program
There must be evidence of faculty involvement in research, and the faculty must provide a suitable research environment for the residents. Because gerontological research spans a very broad spectrum, from molecular biology to health and social policy, the research capabilities and resources of the faculty intensively involved in clinical geriatric education may not meet the needs of all residents. Therefore, working relationships with faculty from the
relevant disciplines will be important, and some may be selected as research mentors for geriatric medicine residents. The disciplines within public health are especially likely to be relevant. However, the primary responsibility for the resident must reside with the program director in geriatric medicine. The residents must be exposed to and take part in research programs that provide an environment conducive to a questioning attitude and critical analysis. The residents should help design, conduct, and evaluate a research project in the area of geriatric medicine and prepare its results for publication. The completion of a research project during the training program is strongly encouraged.

D. Geriatric Psychiatry
Identifiable structured didactic and clinical experiences in geriatric psychiatry must be included in the program of each resident. Behavioral sciences such as psychology/social work and others must be included in the curriculum.

E. Curriculum
The training program must provide opportunities for the residents to develop clinical competence in the overall field of geriatric medicine. The curriculum of the program must exhibit, as a minimum, the following content and skill areas:

1. Current scientific knowledge of aging and longevity, including theories of aging, the physiology and natural history of aging, pathologic changes with aging, and epidemiology and diseases of the aged.

2. Aspects of preventive medicine, including nutrition, exercise, and screening for and immunization against disease. Instruction about and experience with community resources dedicated to these activities should be included.

3. Geriatric assessment (both cognitive and functional); activities of daily living (ADL); the instrumental activities of daily living (IADL); the appropriate use of the history, physical and mental examination, and the laboratory.

4. Appropriate coordination of the actions of multiple health professionals, including physicians, nurses, social workers, dietitians, and rehabilitation experts, in the assessment and implementation of treatment.

5. Topics of special interest to geriatric medicine, including but not limited to cognitive impairment, falls, incontinence, osteoporosis, fractures, dysthermias, sensory impairment, pressure ulcers, and malnutrition.

6. Diseases that are especially prominent in the elderly or that have different characteristics in the elderly, including neoplastic, cardiovascular, neurologic, musculoskeletal, metabolic, and infectious disorders.

7. Pharmacologic problems associated with aging, including changes in pharmacokinetics and pharmacodynamics, drug interactions, overmedication, polypharmacy, and compliance issues.

8. Psychosocial aspects of aging, including housing, depression, bereavement, and anxiety.

9. The economic aspects of supporting services, including Title III of the Older Americans Act, Medicare, Medicaid, and cost containment.

10. Ethical and legal issues especially pertinent to geriatric medicine, including limitation of treatment, competency, guardianship, right to refuse treatment, advance directives, wills, and durable power of attorney for medical affairs.

11. General principles of geriatric rehabilitation, including those applicable to patients with orthopedic, rheumatologic, cardiac, and neurologic impairments. These principles should include those related to the use of physical medicine modalities, exercise, functional activities, assistive devices, environmental modifi-

ication, patient and family education, and psychosocial and recreational counseling.

12. Management of patients in long-term-care settings, including noninterventions, knowledge of the administration of long-term institutions (including, for example, safety regulations), and the continuum from short- to long-term care.

13. Research methodologies related to geriatric medicine, including biostatistics, clinical epidemiology, medical information, information sciences, decision analysis, critical literature review, and research design, including cross-sectional and longitudinal methods. (The training identified in paragraphs 12 and 13 may be appropriate to the receipt of an academic degree in public health or hospital administration.)

14. Preoperative assessment and involvement in postoperative management.

15. Iatrogenic disorders and their prevention.

16. Communication skills with patients, families, professional colleagues, and community groups, including presenting case reports, literature searches, and research papers.

17. The pivotal role of the family in caring for many elderly and the community resources (formal support systems) required to support both patient and family.

V. Certification
Those planning to seek a Certificate of Added Qualifications from the American Board of Internal Medicine or the American Board of Family Practice should communicate with the administrative officer of the board as listed in the Graduate Medical Education Directory to ascertain the full requirements.

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Program Requirements for Residency Education in Hematology

I. Educational Program

A. A subspecialty educational program in hematology must be organized to provide training and experience at a sufficient level for the resident to acquire the competency of a specialist in the field. It must be 2 years in duration.

B. Clinical experience must include opportunities to observe and manage patients with a wide variety of blood diseases on an inpatient and outpatient basis. The resident must be given opportunities to assume continuing responsibility for acutely and chronically ill patients in order to observe the evolution of blood diseases as well as the benefits and adverse effects of therapy.

C. The program should include emphasis on basic pathophysiologic mechanisms and therapy of diseases of the blood. Appropriate utilization of laboratory tests, imaging techniques, biopsies, and procedures used for the diagnosis and treatment of hematologic disorders should be stressed.

II. Faculty
See Section III, Faculty, of the Program Requirements for Residency Education in the Subspecialties of Internal Medicine.

III. Facilities and Resources
Modern inpatient, ambulatory care, and laboratory facilities to accomplish the overall educational program must be available and functioning. Specifically, the resources that must be available to the program include hematology and coagulation laboratories; a pathology department; a blood bank; immunodiagnostic, diagnostic, and therapeutic radiology services; and nuclear medicine services.
There must also be electron microscopy and facilities for clinical pharmacology and tumor immunology. The program must also participate in a multidisciplinary tumor conference that includes discussion of neoplastic blood disorders and hematologic-oncology protocol studies. In addition, there should be medical oncology and pediatrics programs with which hematology residents can relate formally in an educational experience.

It is highly desirable to have the support of the nursing, rehabilitation medicine, pain management, dietetic, and social services in the care of patients with neoplastic blood disorders so that the resident may see the role of other specialties in the total care of patients with hematologic and/or neoplastic diseases.

IV. Specific Program Content

A. Clinical Experience

The training program must have enough patients to provide residents with adequate opportunity to develop clinical competence in the broad field of hematology. Inpatient assignments should be of sufficient duration to permit continuing care of a majority of the patients throughout their hospitalization. In addition, the program must provide residents with experience in an ambulatory care setting for at least ½ day each week for the entire 2 years of training.

B. Technical and Other Skills

1. The program must provide residents with the opportunity to develop competence to work effectively as part of a multidisciplinary team.

2. The program must provide the opportunity to gain competence or expertise in the performance and (where applicable) interpretation of the following:
   a. Bone marrow aspiration and biopsy, including preparation, staining, examination, and interpretation of blood smears, bone marrow aspirate, and touch preparations and interpretation of bone marrow biopsies
   b. Measurement of the complete blood count, including platelets and white cell differential, using automated or manual techniques with appropriate quality control
   c. Administration of chemotherapeutic agents and biological products through all therapeutic routes
   d. Management and care of indwelling venous access catheters
   e. Therapeutic phlebotomy
   f. Therapeutic thoracentesis and paracentesis
   g. Correlation of clinical information with the findings of cytology, histology, and imaging techniques

3. The program should provide experience or observation of the following:
   a. Apheresis procedures
   b. Performance and interpretation of partial thromboplastin time, prothrombin time, platelet aggregation, and bleeding time
   c. Bone marrow and peripheral stem cell harvest for transplantation
   d. Fine needle aspiration and biopsy

C. Specific Program Content

The residents should have formal instruction, clinical experience and opportunities to acquire knowledge in the following:

1. Morphology, physiology, and biochemistry of blood, marrow, lymphatic tissue, and the spleen

2. Related basic fields, including immunology, basic and clinical pharmacology and pharmacokinetics, cell and molecular biology, tumor immunology, molecular genetics, and prenatal diagnosis

3. Basic molecular and pathophysiologic mechanisms, diagnosis, and therapy of diseases of the blood, including anemias, dis-eases of white blood cells, and disorders of hemostasis and thrombosis

4. Etiology, epidemiology, natural history, diagnosis, pathology, staging, and management of neoplastic diseases of the blood, blood-forming organs, and lymphatic tissues

5. Immunophenotyping, cytochemical studies, and cytogenetic and DNA analysis of neoplastic disorders of blood, blood-forming organs, and lymphatic tissues

6. Molecular mechanisms of hematopoietic and lymphopoietic malignancies, including the nature of oncogenes and their products

7. Relevant chemotherapeutic drugs, biologic products, and growth factors and their mechanisms of action, pharmacokinetics, clinical indications, and limitations

8. Multidrug chemotherapy protocols and combined modality therapy for hematopoietic and lymphopoietic malignancies

9. Principles and application of radiation medicine to hematopoietic and lymphopoietic malignancies

10. Management of the neutropenic and/or immunocompromised patient

11. Effects of systemic disorders and drugs on the blood, blood-forming organs, and lymphatic tissues

12. Allogeneic and autologous bone marrow transplantation and the nature and management of posttransplant complications

13. Tests of hemostasis and thrombosis for both congenital and acquired disorders and regulation of antithrombotic therapy

14. Treatment of patients with disorders of hemostasis and the biochemistry and pharmacology of coagulation factor replacement therapy

15. Transfusion medicine, including the evaluation of antibodies, blood compatibility, and the use of blood-component therapy and apheresis

16. Indications and application of imaging techniques in patients with blood disorders

17. Psychosocial management of patients with hematologic disorders

18. Personal development, attitudes, and coping skills of physicians and other health-care professionals who care for critically ill patients

19. Pain management in patients with blood disorders

20. Rehabilitation and psychosocial aspects of clinical management of patients with blood disorders

21. Hospice and home care

22. Recognition and management of paraneoplastic disorders

23. Clinical epidemiology and medical statistics, including clinical study and experimental protocol design, data collection, and analysis

24. Participation in a tumor board

25. Human immunodeficiency virus-related malignancies

D. Research Experience

See paragraphs K and L, Section V, Specific Program Content, Program Requirements for Residency Education in the Subspecialties of Internal Medicine.

E. Evaluation

See Section VI, Evaluation, Program Requirements for Residency Education in the Subspecialties of Internal Medicine.

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Program Requirements for Residency Education in Hematology and Oncology

I. Educational Program
A. A subspecialty educational program in combined hematology and oncology must be organized to provide training and experience at a sufficient level for the resident to acquire the competency of a specialist in the field. It must be 3 years in duration.
B. Clinical experience must include opportunities to observe and manage both inpatients and outpatients with a wide variety of blood and neoplastic disorders. The resident must be given opportunities to assume continuing responsibility for acutely and chronically ill patients in order to observe the evolution of blood diseases and the natural history of cancer as well as the benefits and adverse effects of therapy.
C. The program should include an emphasis on basic pathophysiological mechanism and therapy of blood disorders. Appropriate utilization of laboratory tests, imaging techniques, biopsies, and procedures used for the diagnosis and treatment of hematologic and oncologic disorders must be stressed.

II. Faculty
A. The combined subspecialty program faculty must include a minimum of six (three for each discipline) qualified teaching faculty members, including the program director. Each must devote at least 20 hours per week to teaching, research, administration, and/or the critical evaluation of the performance, progress, and competence of the resident.
B. These faculty members must either be certified in the subspecialties by the American Board of Internal Medicine or possess equivalent qualifications. Further, at least two of the faculty must be certified in hematology and at least two must be certified in oncology.
C. Faculty members who are certified in infectious diseases, pulmonary diseases, endocrinology, and gastroenterology by the American Board of Internal Medicine or who have obtained equivalent training and experience must be available to participate in the education of residents in hematology/oncology. The program must also have the support of other clinical specialties, including psychiatry, gynecology, pediatrics, nuclear medicine, pathology, radiation therapy, and surgical specialties.

III. Facilities and Resources
A. Modern inpatient, ambulatory care, and laboratory facilities to accomplish the overall educational program must be available and functioning at the primary site. Specifically, there must be advanced pathology services, including immunopathology, resources for nuclear medicine imaging, blood banking, blood therapy facilities, coagulation laboratories, and radiation oncology facilities. There must also be electron microscopy facilities available for clinical pharmacology and tumor immunology. A modern diagnostic radiologic service, a general surgical service and its support, and pediatric support must be available. The program must also participate in a multidisciplinary tumor conference and cancer protocol studies.
B. It is highly desirable to have the support of oncologic nursing, rehabilitation medicine, dietetic, and social services so that the resident may see the role of other specialists in the total care of the cancer patient.

IV. Specific Program Content
A. Clinical Experience
The training program must have enough patients to provide residents with adequate opportunity to develop clinical competence in the broad field of hematology and oncology. Inpatient assignments should be of sufficient duration to permit continuing care of a majority of the patients throughout their hospitalization. The program must contain 18 months devoted to clinical training. In addition, the program must provide residents with experience in an ambulatory care setting at least 1/2 day each week for 36 months of training.
B. Technical and Other Skills
1. The program must provide residents with the opportunity to develop competence to work effectively as part of a multidisciplinary team.
2. The program must provide the opportunity to gain competence or expertise in the performance and (where applicable) interpretation of the following:
   a. Bone marrow aspiration and biopsy, including preparation, staining, examination, and interpretation of blood smears, bone marrow aspirates, and touch preparations and interpretation of bone marrow biopsies
   b. Measurement of the complete blood count, including platelets and white cell differential, using automated or manual techniques with appropriate quality control
   c. Administration of chemotherapeutic agents and biological response modifiers through all therapeutic routes
   d. Management and care of indwelling venous access catheters
   e. Therapeutic phlebotomy
   f. Therapeutic thoracentesis and paracentesis
   g. Pelvic examination
   h. Serial measurement of palpable tumor masses
   i. Correlation of clinical information with cytology, histology, and imaging techniques
3. The program should provide experience or observation of the following:
   a. Apheresis procedures
   b. Performance and interpretation of partial thromboplastin time, prothrombin time, platelet aggregation, and bleeding time
   c. Bone marrow and peripheral stem cell harvest for transplantation
   d. Fine needle aspiration and biopsy
C. Specific Program Content
The residents should have formal instruction, clinical experience, or opportunities to acquire knowledge in the following:
1. Morphology, physiology, and biochemistry of blood, marrow, lymphatic tissue, and the spleen
2. Basic molecular and pathophysiological mechanisms, diagnosis, and therapy of diseases of the blood, including anemias, diseases of white cells, and disorders of hemostasis and thrombosis
3. Etiology, epidemiology, natural history, diagnosis, pathology, staging, and management of neoplastic disorders
4. Immune markers, immunophenotyping, cytochemical studies, and cytogenetic and DNA analysis of neoplastic disorders
5. Molecular mechanisms of neoplasia, including the nature of oncogenes and their products
6. Chemotherapeutic drugs, biologic products, and growth factors and their mechanisms of action, pharmacokinetics, clinical indications, and limitations, including their effects, toxicity, and interactions
7. Multidrug chemotherapy protocols and combined modality therapy in the treatment of neoplastic disorders
8. Principles and application of surgery and radiation therapy in the treatment of neoplastic disorders
9. Management of the neutropenic and/or immunocompromised patient
10. Effects of systemic disorders, infections, solid tumors, and drugs on the blood, blood-forming organs, and lymphatic tissues
11. Allogeneic and autologous bone marrow transplantation and the nature and management of posttransplant complications
12. Indications and application of imaging techniques in patients with blood and neoplastic disorders
13. Pathophysiology and patterns of solid tumor metastases
14. Principles of gynecologic oncology
15. Pain management in the cancer patient
16. Rehabilitation and psychosocial management of patients with hematologic and neoplastic disorders
17. Hospice and home care for the cancer patient
18. Recognition and management of paraneoplastic disorders
19. The etiology of cancer, including predisposing causal factors leading to neoplasia
20. Cancer prevention and screening
21. Participation in a tumor board
22. Tests of hemostasis and thrombosis for both congenital and acquired disorders and regulation of antithrombotic therapy
23. Treatment of patients with disorders of hemostasis and the biochemistry and pharmacology of coagulation factor replacement
24. Transfusion medicine, including the evaluation of antibodies, blood compatibility, and the use of blood component therapy and apheresis procedures
25. Personal development, attitudes, and coping skills of physicians and other health-care professionals who care for critically ill patients
26. Human immunodeficiency virus-related malignancies

D. Research
See paragraphs K and L, Section V, Specific Program Content, Program Requirements for Residency Education in the Subspecialties of Internal Medicine.

E. Evaluation
See Section VI, Evaluation, Program Requirements for Residency Education in the Subspecialties of Internal Medicine.

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Program Requirements for Residency Education in Infectious Disease

I. Educational Program
A subspecialty educational program in infectious disease must be organized to provide training and experience at a sufficient level for the resident to acquire the competency of a specialist in the field. It must be 2 years in duration.

II. Faculty
See Section III, Faculty, Program Requirements for Residency Education in the Subspecialties of Internal Medicine.

III. Facilities and Resources
Modern facilities to accomplish the overall educational program must be available and functioning at the primary training site. Specifically, there must be access to a laboratory for clinical microbiology, including diagnostic bacteriology, immunology, mycology, parasitology, and virology. Facilities for the isolation of patients with infectious diseases must be available. It is highly desirable that the training program be conducted in a setting in which training programs in surgery, obstetrics, gynecology, pediatrics, and other medical and surgical specialties and subspecialties are available.

IV. Specific Program Content
A. Clinical Experience
1. Clinical experience must include opportunities to observe and manage adult patients with a wide variety of infectious diseases on both an inpatient and an ambulatory basis. Such opportunities must encompass longitudinal experiences in a continuum of care to observe the course of illness and the effects of therapy. Therapeutic modalities should include management of antibiotic administration in such settings as the hospital, the office, or in conjunction with home-care services. Experience with pediatric infectious diseases is encouraged. Ambulatory care experience to provide both consultative services and continuing care in the broad field of general infectious diseases must be included in the training program.
2. Residents must have formal instruction, clinical experience, or opportunities to gain expertise in the prevention, evaluation, and management of the following disorders:
   a. The febrile patient, specifically presenting in association with rash or as fever of unknown origin
   b. Upper respiratory tract infections
   c. Pleuropulmonary and bronchial infections
   d. Urinary tract infections
   e. Peritonitis and other intra-abdominal infections
   f. Cardiovascular infections
   g. Central nervous system infections
   h. Skin and soft tissue infections
   i. Infections related to trauma, including burns and animal and human bites
   j. Gastrointestinal infections and food poisoning
   k. Bone and joint infections
   l. Infections of the reproductive organs
   m. Sexually transmitted diseases
   n. Infections of the eye
   o. Viral hepatitides
   p. Sepsis syndromes
   q. Nosocomial infections
   r. Human immunodeficiency virus infection and acquired immunodeficiency syndrome
   s. Infections in the immunocompromised or neutropenic host
   t. Infections in patients with acute leukemia and lymphomas
   u. Infections in marrow transplant recipients
   v. Infections in solid organ transplant recipients
   w. Infections in geriatric patients
   x. Infections in travelers
   y. Infections in parenteral drug abusers

B. Technical and Other Skills
The program must provide for instruction in the cognitive aspects of the following:
1. Mechanisms of action and adverse reactions of antimicrobial agents; the conduct of pharmacologic studies to determine absorption and excretion of antimicrobial agents; methods of determining antimicrobial activity of a drug; techniques to determine concentration of antimicrobial agents in the blood and other body fluids; the appropriate use and management of antimicrobial agents in a variety of clinical settings, including the hospital, ambulatory practice, and the home
2. The utility of procedures for specimen collection relevant to infectious disease, including but not limited to bronchoscopy, thoracentesis, arthrocentesis, lumbar puncture, and aspiration of abscess cavities, including soft-tissue infections
3. Culture techniques and methods for identification in tissues and fluids for bacteria, mycobacteria, fungi, viruses, rickettsiae, chlamydiae, and parasites
4. The sensitivity, specificity, efficacy, benefits, and risks of emerging technologies such as those for rapid microbiological diagnosis and the use and limitations of imaging techniques in the diagnosis and follow-up of infectious processes
5. Principles and practice of hospital epidemiology
6. Principles of chemoprophylaxis and immunoprophylaxis to enhance resistance
7. Mechanisms of action of biological products, including monoclonal antibodies, cytokines, interferons, interleukins, and colony-stimulating factors, and their applications in the treatments of infectious diseases or their role in enhancing the immune response

C. Formal Instruction
Additional specific content areas that must be included in the formal program (lectures, conferences, and seminars) include:
1. The factors that determine the outcome between host and parasite, including microbial virulence factors and host defense mechanisms
2. Basic concepts of immunology
3. The epidemiology, clinical course, manifestations, diagnosis, treatment, and prevention of major infectious agents including viruses, chlamydiae, mycoplasma and ureaplasma, rickettsioses, bacteria including spirochetes and mycobacteria, mycoses, protozoa, and helminths
4. Quality assurance and cost containment in the clinical practice of infectious diseases

D. Research Experience
See paragraphs K and L, Section V, Specific Program Content, Program Requirements for Residency Education in the Subspecialties of Internal Medicine.

E. Evaluation
See Section VI, Evaluation, Program Requirements for Residency Education in the Subspecialties of Internal Medicine.

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Program Requirements for Residency Education in Nephrology

I. Educational Program
A. A subspecialty educational program in nephrology must be organized to provide training and experience at a sufficient level for the resident to acquire the competency of a specialist in the field. It must be 2 years in duration.
B. Clinical experience must include opportunities to observe and manage patients with a wide variety of kidney-related diseases on an inpatient and outpatient basis. The residents must be given opportunities to assume continuing responsibility for both acutely and chronically ill patients in order to learn the natural history of renal diseases as well as the effectiveness of therapeutic programs.

II. Faculty
See Section III, Faculty, of the Program Requirements for Residency Education in the Subspecialties of Internal Medicine.

III. Facilities and Resources
A. Modern inpatient, ambulatory care, and laboratory facilities to accomplish the overall educational program must be available and functioning. Specifically, there must be facilities for acute and long-term hemodialysis, continuous arterial or venous hemofiltration, acute and chronic peritoneal dialysis, renal biopsy, and lithotripsy. The following must be available: a radiology service that can provide modern renal-related procedures, a diagnostic radionuclide laboratory, electron microscopy for renal biopsy material, biochemistry and serologic laboratories, a nutrition support service, and relevant social services. A meaningful working relationship must exist with other services, including surgery, urology, obstetrics, gynecology, pediatrics, psychiatry, pathology, and radiology.
B. The sponsoring institution must be approved to perform renal transplantation or have a formal written agreement with such an institution ensuring that nephrology residents receive the requisite experience with renal transplantation. The training program must have access to at least ten new renal transplants per year per clinical resident and be responsible for the longitudinal follow-up of at least 20 patients with transplants per resident.
C. The training program should be of sufficient size to ensure adequate exposure of residents to patients with acute renal failure and a chronic dialysis patient population, including patients that utilize home dialysis treatment modalities, to ensure adequate training in chronic dialysis.
D. The training program must afford the residents the opportunity to care for patients with renal and other disorders in the intensive care unit setting.

IV. Specific Program Content
A. Clinical Experience
1. The training program must provide opportunities for residents to develop clinical competence in the field of nephrology. A sufficient number of new and follow-up patients of appropriate ages, including the adolescent and geriatric age groups, and of both sexes must be available to ensure adequate inpatient and outpatient experience for each subspecialty resident. A minimum of 12 months should be devoted to clinical experiences.
2. Experience in ambulatory settings that includes consultative as well as continuing care must occur at least ½ day each week throughout at least 18 months of the training program. Residents should, on average, be responsible for one to three new patients and three to six return patients during each half-day session.
3. Residents must have formal instruction, clinical experience, or opportunities to acquire expertise in the prevention, evaluation, and management of the following disorders:
   a. Disorders of mineral metabolism, including nephrolithiasis and renal osteodystrophy
   b. Disorders of fluid, electrolyte, and acid-base regulation
   c. Acute renal failure
   d. Chronic renal failure and its management by conservative methods, including nutritional management of uremia
   e. End-stage renal disease
   f. Hypertensive disorders
   g. Renal disorders of pregnancy
   h. Urinary tract infections
   i. Tubulo-interstitial renal diseases, including inherited diseases of transport, cystic diseases, and other congenital disorders
   j. Glomerular and vascular diseases, including the glomerulonephritides, diabetic nephropathy, and atheroembolic renal disease
   k. Disorders of drug metabolism and renal drug toxicity
4. Special experiences including specialty units and research experience.
   a. Renal transplantation: Each resident must have a minimum of 2 months of experience, preferably consecutively, on an active renal transplant service. Clinical experience must entail supervised involvement in the decision making for patients during the pre- and posttransplant care. This experience must include:
      1. Evaluation and selection of transplant candidates
      2. Preoperative evaluation and preparation of transplant recipients
      3. Immediate postoperative management of transplant recipients, including administration of immunosuppressants
      4. Clinical diagnosis of all forms of rejection including laboratory, histopathologic, and imaging techniques
      5. Medical management of rejection, including use of immunosuppressant drugs and other agents
      6. Recognition and medical management of the surgical and nonsurgical complications of transplantations
      7. Long-term follow-up of transplant recipients in the ambulatory setting
   b. Dialysis and extracorporeal therapy: Each resident should have exposure to dialysis and extracorporeal therapies during the equivalent of at least 4 months of the training program. Clinical experience must entail supervised involvement in decision making for patients undergoing these therapies. This experience must include:
      1. Evaluation and selection of patients for acute hemodialysis or continuous renal replacement therapies
      2. Evaluation of end-stage renal disease patients for various forms of therapy and their instruction regarding treatment options
      3. Drug dosage modification during dialysis and other extracorporeal therapies
      4. Evaluation and management of medical complications in patients during and between dialyses and other extracorporeal therapies, including dialysis access, and an understanding of their pathogenesis and prevention
      5. Long-term follow-up of patients undergoing chronic dialysis, including their dialysis prescription and modification and assessment of adequacy of dialysis
      6. An understanding of the principles and practice of peritoneal dialysis, including the establishment of peritoneal access, the principles of dialysis catheters, and how to choose appropriate catheters
      7. An understanding of the technology of peritoneal dialysis, including the use of cyclers
      8. Assessment of peritoneal dialysis efficiency, using peritoneal equilibration testing and the principles of peritoneal biopsy
      9. An understanding of how to write a peritoneal dialysis prescription and how to assess peritoneal dialysis adequacy
     10. The pharmacology of commonly used medications and their kinetic and dosage alteration with peritoneal dialysis
     11. An understanding of the complications of peritoneal dialysis, including peritonitis and its treatment, exit site and tunnel infections and their management, hernias, plural effusions, and other less common complications and their management
     12. An understanding of the special nutritional requirements of the hemodialysis and peritoneal dialysis patient

B. Technical and Other Skills
1. The procedural skills in which residents must be given sufficient experience to gain expertise, including the indications, complications, and interpretation of results, are
   a. Urinalysis
   b. Percutaneous biopsy of both autologous and transplanted kidneys
   c. Peritoneal dialysis
   d. Placement of temporary vascular access for hemodialysis and related procedures
   e. Acute and chronic hemodialysis
   f. Placement of peritoneal catheters
   g. Renal ultrasound
   h. Continuous hemofiltration, arteriovenous and/or venovenous
2. Residents are encouraged to develop knowledge and expertise in the following procedures, including their cost-effectiveness and application to patient care:
   a. Radiology of vascular access
   b. Balloon angioplasty of vascular access
   c. Therapeutic plasmapheresis
   d. Bone biopsy
   e. Placement of peritoneal catheters

C. Formal Instruction
1. Specific content areas that must be included in the formal program (lectures, conferences, and seminars) include:
   a. Renal anatomy, physiology, and pathology
   b. Pathogenesis, natural history, and management of congenital and acquired diseases of the kidney and urinary tract and renal diseases, associated with systemic disorders such as diabetes, collagen-vascular diseases, and pregnancy
   c. Normal mineral metabolism and its alteration in renal diseases, metabolic bone disease, and nephrolithiasis
   d. Normal and abnormal blood pressure regulation
   e. Clinical pharmacology, including drug metabolism and pharmacokinetics and the effects of drugs on renal structure and function
   f. Nutritional aspects of renal disorders
   g. Immunology, including:
      1. Basic principles
      2. Immunologic mechanisms of renal disease
      3. Fundamental aspects of diagnostic laboratory immunology relevant to renal diseases
   h. Transplantation—the structured curriculum for renal transplantation must, as a minimum, include:
      1. Biology of transplantation rejection
      2. Indications for and contraindications to renal transplantation
      3. Principles of transplant recipient evaluation and selection
      4. Principles of evaluation of transplant donors, both live and cadaveric, including histocompatibility testing
      5. Principles of organ harvesting, preservation, and sharing
      6. Psychosocial aspects of organ donation and transplantation
      7. The pathogenesis and management of urinary tract infections
      8. The pathogenesis and management of acute renal failure
     9. Indications for and interpretations of radiologic tests of the kidney and urinary tract
     10. Disorders of fluids and electrolytes and acid-base balance
   i. Dialysis and extracorporeal therapy
      1. The kinetic principles of hemodialysis and peritoneal dialysis
      2. The indication for each mode of dialysis
      3. The short-term and long-term complications of each mode of dialysis and their management
4. The principles of dialysis access (acute and chronic vascular and peritoneal), including indications, techniques, and complications
5. Urea kinetics and protein catabolic rate
6. Dialysis modes and their relation to metabolism
7. Nutritional management of dialysis patients
8. Dialysis water treatment, delivery systems, and reuse of artificial kidneys
9. The artificial membranes used in hemodialysis and biocompatibility
10. The psychosocial and ethical issues of dialysis

D. Research Experience
See paragraphs K and L, Section V, Specific Program Content, Program Requirements for Residency Education in the Subspecialties of Internal Medicine.

E. Evaluation
See Section VI, Evaluation, Program Requirements for Residency Education in the Subspecialties of Internal Medicine.

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Program Requirements for Residency Education in Oncology

I. Educational Program
A. A subspecialty educational program in oncology must be organized to provide training and experience at a sufficient level for the resident to acquire the competency of a specialist in the field. It must be 2 years in duration.
B. Clinical experience must include opportunities to observe and manage patients with a wide variety of neoplastic diseases on an inpatient and outpatient basis. The resident must be given opportunities to assume continuing responsibility for both acutely and chronically ill patients to learn the natural history of cancer as well as the effectiveness of therapeutic programs.
C. The program should include emphasis on basic pathophysiology mechanisms and therapy of oncologic diseases. Appropriate utilization of laboratory tests, imaging techniques, biopsies, and procedures used for the diagnosis and treatment of oncologic disorders must be stressed.

II. Faculty
A. See Section III, Faculty, Program Requirements for Residency Education in the Subspecialties of Internal Medicine.
B. Faculty members who are subspecialty certified by the American Board of Internal Medicine in their respective disciplines or who have obtained equivalent training and experience in infectious disease, pulmonary disease, endocrinology, gastroenterology, and hematology must be available to participate in the education of residents in oncology. The program must also have the support of other clinical specialties, including psychiatry, gynecology, pediatrics, nuclear medicine, pathology, neurology, neurosurgery, radiation therapy, and surgical specialties.

III. Facilities and Resources
A. Modern inpatient, ambulatory care, and laboratory facilities to accomplish the overall educational program must be available and functioning. Specifically, there must be advanced pathology services, including immunopathology, resources for nuclear medicine imaging, blood banking, blood therapy facilities, and radiation oncology facilities. There must also be electron microscopy facilities available for clinical pharmacology and tumor immunology. A modern diagnostic radiologic service, a general surgical service and its support, and pediatric support must be available. The program must also participate in a multidisciplinary tumor conference and cancer protocol studies.
B. It is highly desirable to have the support of oncologic nursing, rehabilitation medicine, pain management, dietetic, and social services so that the resident may see the role of other specialties in the total care of the cancer patient.

IV. Specific Program Content
A. Clinical Experience
The training program must have enough patients to provide opportunity to develop clinical competence in the broad field of oncology. Inpatient assignments should be of sufficient duration to permit continuing care of a majority of the patients throughout their hospitalization. In addition, the program must provide residents with experience in an ambulatory care setting at least ½ day each week for the entire 2 years of training.
B. Technical and Other Skills
1. The program must provide residents with the opportunity to develop competence to work effectively as part of a multidisciplinary team.
2. The program must provide the opportunity to gain competence or expertise in the performance and (where applicable) interpretation of the following:
   a. Serial measurement of palpable tumor masses
   b. Bone marrow aspiration and biopsy and their interpretation
   c. Administration of chemotherapeutic agents and biological products through all therapeutic routes
   d. Management and care of indwelling access catheters
   e. Measurement of the complete blood count, including platelets and white cell differential, using automated or manual techniques with appropriate quality control
   f. Therapeutic thoracentesis and paracentesis
   g. Pelvic examination
   h. Correlation of clinical information with the findings of cytology, histology, and imaging techniques
C. Specific Program Content
The residents should have formal instruction, clinical experience, and opportunities to acquire knowledge in the following:
1. The etiology of cancer, including predisposing causal factors leading to neoplasia
2. Fundamental concepts of cellular and molecular biology, cytogenetics, immunology, basic and clinical pharmacology, pharmacokinetics, toxicity, and tumor immunology
3. Etiology, epidemiology, and natural history of cancer
4. Diagnosis, pathology, staging, and management of neoplastic disorders
5. Immune markers, immunophenotyping, cytochemical studies, and cytogenetic and DNA analysis of neoplastic disorders
6. Molecular mechanisms of neoplasia, including the nature of oncogenes and their products
7. Principles of gynecologic oncology
8. Pathophysiology and patterns of tumor metastases
9. Indications and application of imaging techniques in patients with neoplastic disorders
10. Chemotherapeutic drugs, biologic products, and growth factors and their mechanisms of action, pharmacokinetics, clinical indications and limitations, including their effects, toxicity, and interactions
11. Multiagent chemotherapeutic protocols and combined modality therapy of neoplastic disorders
13. Principles of, indications for, and complications of bone marrow transplantation and peripheral stem cell harvests, including the management of posttransplant complications
14. Thin (or fine) needle aspiration biopsy
15. Concepts of supportive care, including hematologic, infectious disease, and nutritional
16. Management of the neutropenic and/or immunocompromised patient
17. Pain management in the cancer patient
18. Rehabilitation and psychosocial aspects of clinical management of the cancer patient
19. Hospice and home care for the cancer patient
20. Recognition and management of paraneoplastic disorders
21. Cancer prevention and screening
22. Clinical epidemiology and medical statistics, including clinical study and experimental protocol design, data collection, and analysis
23. Participation in a tumor board
24. Personal development, attitudes, and coping skills of physicians and other health-care professionals who care for critically ill patients
25. Human immunodeficiency virus-related malignancies

D. Research Experience
See paragraphs K and L, Section V, Specific Program Content, Program Requirements for Residency Education in the Subspecialties of Internal Medicine.

E. Evaluation
See Section VI, Evaluation, Program Requirements for Residency Education in the Subspecialties of Internal Medicine.

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Program Requirements for Residency Education in Pulmonary Disease

I. Educational Program
A. A subspecialty educational program in pulmonary disease must be organized to provide training and expertise at a sufficient level for the resident to acquire the competency of a specialist in the field. It must be 2 years in duration.
B. Clinical experience must include opportunities to observe and manage inpatients and outpatients with a wide variety of pulmonary disease. The resident must be given opportunities to assume continuing responsibility for both acutely and chronically ill patients in order to learn the natural history of pulmonary disease as well as the effectiveness of therapeutic programs.

II. Faculty
See Section III, Faculty, Program Requirements for Residency Education in the Subspecialties of Internal Medicine.

III. Facilities and Resources
A. Modern facilities to accomplish the overall educational program must be available and functioning at the primary training site. These include inpatient and ambulatory care facilities, a laboratory for pulmonary function tests and exfoliative cytology, and extensive pathology services. Appropriate space and staffing for pulmonary procedures must be available. Finally, special facilities for intensive care, postoperative care, and respiratory care services must also be provided at the primary training site.
B. There should be a close liaison with other services, including pediatrics, radiology, pathology, thoracic surgery, microbiology, laboratory medicine, occupational medicine, immunology, physical medicine, and rehabilitation. In addition, there should be a working relationship with the otorhinolaryngology and anesthesiology services. A sleep laboratory must also be available.

IV. Specific Program Content
The program must provide the environment, patient population, and resources for residents to develop clinical competence in the field of pulmonary diseases. All elements of the specific content must be provided either by clinical experience and/or by didactic instruction.

A. Clinical Experience
The program must provide the environment and resources for residents to acquire knowledge of and have clinical experience with a broad spectrum of pulmonary disease including but not limited to the following:
1. Obstructive lung diseases, including asthma, bronchitis, emphysema, bronchiectasis, and cystic fibrosis
2. Pulmonary malignancy—primary and metastatic
3. Pulmonary infections, including tuberculosis, fungal, and those in the immunocompromised host, eg, human immunodeficiency virus-related infections
4. Diffuse interstitial lung disease
5. Pulmonary vascular disease, including primary and secondary pulmonary hypertension and the vasculitis and pulmonary hemorrhage syndromes
6. Occupational and environmental lung diseases
7. Iatrogenic respiratory diseases, including drug-induced disease
8. Acute lung injury, including radiation, inhalation, and trauma
9. Pulmonary manifestations of systemic diseases, including collagen vascular disease and diseases that are primary in other organs
10. Respiratory failure, including the adult respiratory distress syndrome, acute and chronic respiratory failure in obstructive lung diseases, and neuromuscular respiratory drive disorders
11. Disorders of the pleura and the mediastinum
12. Genetic and developmental disorders of the respiratory system
13. Sleep disorders

B. Technical and Other Skills
1. The program must provide the environment and resources for the resident to acquire knowledge of and competence in performing the following:
   a. Pulmonary function tests to assess respiratory mechanics, gas exchange, and respiratory drive, including spirometry, flow-volume studies, lung volumes, diffusing capacity, arterial blood gas analysis, and exercise studies
   b. Calibration and operation of hemodynamic recording systems
   c. Diagnostic and therapeutic procedures, including thoracocentesis, pleural biopsy, flexible fiber-optic bronchoscopy and related procedures, endotracheal intubation, percutaneous arterial puncture and cannulation, central venous catheterization, and pulmonary artery balloon flotation catheterization
   d. Ventilatory support, weaning, and respiratory care techniques
   e. Examination and interpretation of sputum, bronchopulmonary secretions, pleural fluid/tissue, and lung tissue for infectious agents, cytology, and histopathology
2. The program should provide the environment and resources for the resident to develop clinical competence in performing the following:
   a. Inhalation challenge studies
b. Thoracostomy tube insertion and drainage
c. Percutaneous needle aspiration and/or cutting lung biopsy
d. Endobronchial laser therapy

3. The program must provide the environment and resources for the resident to acquire knowledge of and ability to interpret the following:
   a. Imaging procedures, including chest roentgenograms, computed axial tomograms, radionuclide scans, pulmonary angiograms, and other radiologic procedures
   b. Sleep studies

4. The program must provide the environment and resources for residents to develop expertise in monitoring and supervising special services, including:
   a. Critical care or respiratory care units
   b. Pulmonary function laboratories
   c. Respiratory physical therapy and rehabilitation
   d. Respiratory care techniques and services

C. Basic Sciences
The program must provide instruction in the basic sciences with particular emphasis on:
1. Molecular biology
2. Pulmonary physiology
3. Pulmonary immunology

D. Research Experience
See paragraphs K and L, Section V, Specific Program Content, Program Requirements for Residency Education in the Subspecialties of Internal Medicine.

E. Evaluation
See Section VI, Evaluation, Program Requirements for Residency Education in the Subspecialties of Internal Medicine.

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Program Requirements for Residency Education in Pulmonary Disease and Critical Care Medicine

I. Educational Program
A. A combined subspecialty program in pulmonary disease and critical care medicine must be organized to provide training and experience at a sufficient level for the resident to acquire the competency of a specialist in both disciplines. Because of some degree of congruity in the knowledge base, the clinical skills, and the patient populations for each of these subspecialty areas, it is possible to compress the duration of the educational experience and still ensure these competencies. However, the combined training program must be 3 years in duration, and all of the educational experiences and program content explicitly required for a training program in each area must be present in the combined program.

B. With respect to pulmonary disease, clinical experience must include opportunities to observe and manage inpatients and outpatients with a wide variety of pulmonary disease. The residents must be given opportunities to assume continuing responsibility for both acutely and chronically ill patients in order to learn the natural history of pulmonary disease as well as the effectiveness of therapeutic programs. There should be an educational emphasis on pulmonary physiology and its correlation with clinical disorders.

C. With respect to critical care medicine, the program must be structured to provide at least 12 months of meaningful patient care responsibility in critical care units; at least 6 of these months must be devoted to the care of critically ill medical patients in a medical intensive care unit (MICU), a cardiac intensive care unit (CICU), or equivalent. If there is a separate CICU, residents must spend at least 1 month in that unit.

D. To provide evidence of substantial institutional support in those disciplines most relevant to critical care medicine, the sponsoring institution’s primary training site must sponsor accredited subspecialty programs in cardiovascular disease and infectious disease as well as an accredited residency program in general surgery. The presence of training programs in these disciplines ensures the extensive educational, patient care, and research resources that are essential to the learning environment for critical care medicine residents. Furthermore, peer interaction is essential in the education of critical care medicine residents.

E. The sponsoring institution(s) must care for patients with major trauma and must have an active open heart surgery program.

F. Institutional policies should be established to govern the educational resources committed to critical care training programs and to ensure cooperation of all involved disciplines.

II. Faculty and Organization of the Staff
A. The training program must be under the direction of an internist who is certified in pulmonary disease and/or critical care medicine by the American Board of Internal Medicine or who has obtained equivalent training and experience. If the program director does not have appropriate credentials in both specialties, an appropriately credentialed full-time faculty member must be identified as responsible for the educational program in the second specific area.

B. The combined subspecialty program faculty at the primary training site must include a minimum of six (three for each discipline) qualified teaching faculty members, including the program director. Each must devote at least 20 hours per week to teaching, research, administration, and/or the critical evaluation of the performance, progress, and competence of the resident. At least two of these faculty must be certified in pulmonary disease (or possess equivalent qualifications) and at least two must be certified in critical care medicine (or possess equivalent qualifications). For programs with more than six residents enrolled, a ratio of such faculty to residents of at least 1:1 must be maintained.

The primary training site must also have (1) at least two institutionally based faculty members each in nephrology, gastroenterology, and hematology who devote substantial effort to the education of critical care medicine residents and (2) faculty members in geriatric medicine and oncology who participate in the education of residents.

All faculty noted above must be certified in their subspecialties by the American Board of Internal Medicine or possess equivalent qualifications.

Faculty members in anesthesiology, neurology, and neurosurgery who are certified by an American Board of Medical Specialties member board in their respective disciplines or who have equivalent training and experience must also participate at the primary training site in the education of residents in critical care medicine.

C. The critical care teaching staff must have privileges regarding the admission, treatment, and discharge of their own patients on critical care units.

D. Because critical care training is multidisciplinary in nature, faculty from several related disciplines, such as general surgery,
Program Requirements for Residency Education in Pulmonary Disease and Critical Care Medicine

thoracic surgery, urology, orthopaedic surgery, and obstetrics-gynecology, must be available to participate in the training program. A collegial relationship must exist between the director of the critical care training program and the teaching staff to enhance the educational opportunities for all internal medicine residents and subspecialty residents. See General Information Section, Program Requirements for Residency Education in the Subspecialties of Internal Medicine.

III. Facilities and Resources
A. Modern facilities to accomplish the overall educational program must be available and functioning at the primary training site. These include inpatient and ambulatory care facilities, a laboratory for pulmonary function tests and exfoliative cytology, and extensive pathology services.

Appropriate space and staffing for pulmonary procedures must be available at the primary training site. Facilities for training in microbiology procedures, pulmonary rehabilitation, and a sleep laboratory also must be available.

B. The critical care unit(s) must be located in a designated area within the hospital and must be constructed and designed specifically for the care of critically ill patients. Whether operating in separate locations or in combined facilities, the program must provide the equivalent of a medical intensive care unit, a surgical intensive care unit, and a coronary care unit. Available facilities must be adequate to care for patients with acute myocardial infarction, severe trauma, shock, recent open heart surgery, recent major thoracic or abdominal surgery, and severe neurologic and neurosurgical conditions.

C. In units to which a resident is assigned, an average census of at least five patients per resident is required. A sufficient number of knowledgeable personnel and the necessary equipment to care for critically ill patients must be available. Personnel should include specially trained nurses and technicians who are skilled in critical care instrumentation, respiratory function, and laboratory medicine. A supporting laboratory should be available to provide complete and prompt laboratory evaluation. Modern imaging services and an active emergency service must be available. Nutritional support services also must be available.

IV. Specific Program Content
A. The training program must provide the environment, patient population, and resources for residents to develop clinical competence in the fields of pulmonary diseases and critical care medicine. It must include a minimum of 6 months of training specific to pulmonary disease and 6 months of training specific to critical care medicine. It may include up to 6 months of experience common to both disciplines.

B. Because critical care medicine is multidisciplinary in nature, clinical experience must include opportunities to manage adult patients with a wide variety of serious illnesses and injuries requiring treatment in a critical care setting. Therefore, residents should be assigned for a minimum of 3 months to additional rotations, which may include surgical, shock/trama, and/or neurologic/neurosurgical intensive care units; pediatric intensive care unit; cardiac catheterization laboratory; burn unit; dialysis unit; anesthesia service; high-risk pregnancy intensive care unit; and transplant unit.

C. The resident must be given opportunities to assume responsibility, under appropriate supervision, for the care of patients throughout their stay in the critical care unit(s) and to monitor the subsequent course of patients throughout the remainder of their hospital stay. To assess the various aspects of critical care, the resident also must have organized opportunities to learn about former critical care patients after hospital discharge, including clinical pathological correlations when appropriate.

D. Opportunities also must be available for residents to acquire those skills required to organize, administer, and direct a critical care unit and to work effectively as a member of a multidisciplinary team.

E. For training in pulmonary disease, the program must provide the environment and resources for residents to acquire knowledge of and have clinical experience with a broad spectrum of pulmonary disease, including but not limited to the following:

1. Obstructive lung diseases, including asthma, bronchitis, emphysema, bronchiectasis, and cystic fibrosis
2. Pulmonary malignancy—primary and metastatic
3. Pulmonary infections, including tuberculous, fungal, and those in the immunocompromised host
4. Diffuse interstitial lung disease
5. Pulmonary vascular disease, including primary and secondary pulmonary hypertension and the vasculitis and pulmonary hemorrhage syndromes
6. Occupational and environmental lung diseases
7. Iatrogenic respiratory diseases, including drug-induced disease
8. Acute lung injury, including radiation, inhalation, and trauma
9. Pulmonary manifestations of systemic diseases, including collagen vascular diseases that are primary in other organs
10. Respiratory failure, including the adult respiratory distress syndrome, acute and chronic respiratory failure in obstructive lung diseases, and neuromuscular respiratory drive disorders
11. Disorders of the pleura and the mediastinum
12. Genetic and developmental disorders of the respiratory system
13. Sleep disorders

F. The program must provide the environment and resources for the resident to acquire knowledge (indications, contraindications, complications, and limitations) of and competence in performing the following:

1. Establishment of airway
2. Maintenance of open airway in nonintubated, unconscious, paralyzed patients
3. Oral and nasotracheal intubation
4. Breathing, ventilation
   a. Ventilation by bag or mask
   b. Mechanical ventilation using pressure-cycled, volume-cycled, and negative pressure mechanical ventilators
5. Use of reservoir masks and continuous positive airway pressure masks for delivery of supplemental oxygen, humidifiers, nebulizers, and incentive spirometry
6. Weaning and respiratory care techniques
7. Management of pneumothorax (needle insertion and drainage systems)
8. Maintenance of circulation
   a. Arterial puncture and blood sampling
   b. Insertion of central venous, arterial, and pulmonary artery balloon flotation catheters
   c. Basic and advanced cardiopulmonary resuscitation
   d. Cardioversion
9. Pulmonary function tests to assess respiratory mechanics, gas exchange, and respiratory drive, including spirometry, flow volume studies, lung volumes, diffusing capacity, arterial blood gas analysis, and exercise studies
10. Diagnostic and therapeutic procedures, including thoracentesis, pleural biopsy, flexible fiberoptic bronchoscopy, and related procedures
8. Calibration and operation of hemodynamic recording systems
9. Ventilatory support, weaning, and respiratory care techniques
10. Examination and interpretation of sputum, bronchopulmonary
secretions, pleural fluid/tissue, and lung tissue for infectious agents; cytology; and histopathology

The program must provide the environment and resources for the
resident to acquire knowledge of and ability to interpret the
following:

1. Imaging procedures including:
   a. Chest roentgenograms
   b. Computed axial tomograms
   c. Radionuclide scans
   d. Pulmonary angiograms
   e. Other radiologic procedures
2. Sleep studies

The program must provide the environment and resources for
residents to develop expertise in monitoring and supervising spe-
cial services, including:

1. Critical care units
2. Pulmonary function laboratories
3. Respiratory physical therapy and rehabilitation services
4. Respiratory care techniques and services

The program should provide the environment and resources for
the resident to develop clinical competence in performing the
following:

1. Inhalation challenge studies
2. Thoracostomy tube insertion and drainage

In addition to the educational experience listed above, the training
program must provide opportunities for the residents to ac-
quire knowledge of and to develop clinical competence in:

1. Physiology, pathophysiology, molecular biology, diagnosis, and
   therapy of disorders of the cardiovascular, respiratory, renal, gastro-
   intestinal, genitourinary, neurologic, endocrine, hematologic, mus-
   culoskeletal, and immune systems as well as of infectious diseases
2. Electrolyte and acid-base physiology, pathophysiology, diagnos-
   is, and therapy
3. Metabolic, nutritional, and endocrine effects of critical ill-
   nesses
4. Hematologic and coagulation disorders secondary to critical ill-
   nesses
5. Critical obstetric and gynecologic disorders
6. Management of the immunosuppressed patient
7. Management of anaphylaxis and acute allergic reactions
8. Trauma
9. Pharmacokinetics, pharmacodynamics, drug metabolism and
   excretion in critical illness
10. Use of paralytic agents
11. Ethical, economic, and legal aspects of critical illness
12. Psychosocial and emotional effects of critical illnesses
13. Iatrogenic and nosocomial problems in critical care medicine
14. Personal development, attitudes, and coping skills of physi-
   cians and other health-care professionals who care for critically
   ill patients
15. Biostatistics and experimental design
16. Occupational Safety and Health Administration (OSHA) regu-
   lations and universal precautions and protection of health-
   care workers

The training program must provide opportunities for residents to
learn the indications, contraindications, limitations, and compli-
cations of the following critical care procedures and the technical
skills necessary to perform them:

1. Parenteral nutrition
2. Monitoring/bioengineering
   a. Utilization, zeroing, and calibration of transducers
   b. Use of amplifiers and recorders

The program also must provide opportunities to learn the indica-
tions, contraindications, limitations, and complications of the
following procedures. Practical experience is recommended:

1. Pericardiocentesis
2. Transvenous pacemaker insertion
3. Peritoneal dialysis
4. Peritoneal lavage
5. Aspiration of major joints
6. Percutaneous needle aspiration and/or cutting core biopsy
7. Endobronchial laser therapy
8. Intracranial pressure monitoring

Experience also must be provided in the analysis of data pertain-
ing to the following:

1. Cardiac output determinations by thermodilution and/or other
techniques
2. Evaluation of oliguria
3. Management of massive transfusions
4. Management of hemostatic defects
5. Interpretation of antibiotic levels and sensitivities
6. Monitoring and assessment of metabolism and nutrition
7. Calculation of oxygen content, intrapulmonary shunt, and al-
   veolar arterial gradients
8. Pharmacokinetics

V. Research Experience
See paragraphs K and L, Section V, Specific Program Content, Pro-
gram Requirements for Residency Education in the Subspecialties
of Internal Medicine.

VI. Evaluation
See Section VI, Evaluation, Program Requirements for Residency
Education in the Subspecialties of Internal Medicine.

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Program Requirements for Residency Education in Rheumatology

I. Educational program
A subspecialty educational program in rheumatology must be or-
ganized to provide training and experience at a level sufficient for
the resident to acquire competence in the field. It must be 2 years in
duration.

II. Faculty
See Section III, Faculty, of the Program Requirements for Resi-
dency Education in the Subspecialties of Internal Medicine. The
faculty must include individuals with sufficient knowledge of bio-
chemistry, molecular genetics, immunology, and pathology of
connective tissue and the immune system to provide a strong back-
ground in basic science as well as competence in clinical
rheumatology.

III. Facilities and Resources
A. Modern facilities to accomplish the overall educational program
must be available and functioning at the primary educational
site. These include inpatient facilities for chronic care
at primary, secondary, and tertiary levels; imaging facilities, including computerized tomography and magnetic resonance imaging; and a fully equipped clinical laboratory providing service on a 24-hour basis and equipped with a compensated polarized light microscope for use by residents. Rehabilitation medicine facilities and ambulatory care facilities also must be available. Resources for specialized tests used by rheumatologists must be available on the premises or by contract arrangement.

B. There must be a meaningful working relationship, including availability for teaching and consultation at the primary site, with faculty in radiology and orthopaedic surgery and also with allied health professionals in physical therapy and occupational therapy.

IV. Specific Program Content

A. Clinical Experience

1. Clinical experience must include opportunities to manage both inpatients and outpatients with rheumatic diseases and other illnesses with rheumatologic manifestations as a member of a multidisciplinary team.

2. The training program must provide the environment and resources for the residents to gain experience in the diagnosis and treatment of patients with:
   a. Diffuse connective tissue diseases
   b. Rheumatoid arthritis
   c. Systemic lupus erythematosus
   d. Scleroderma
   e. Polymyositis
   f. Spondyloarthropathies
   g. Vasculitis
   h. Crystal-induced synovitis
   i. Osteoarthritis
   j. Nonarticular rheumatic diseases, including fibromyalgia
   k. Nonsurgical, exercise-related (sports) injury
   l. Systemic diseases with rheumatic manifestations
   m. Metabolic diseases of bone (including osteoporosis)
   n. Infection of joints
   o. Joint surgery
   p. Rheumatologic problems requiring rehabilitation therapy

   It is desirable that programs with the qualified faculty and facilities provide training in pediatric rheumatic disease.

B. Ambulatory Care

Each resident must have the equivalent of a full day of continuity care experience each week for the first 12 months and at least ½ day a week for the second 12 months. During each half-day session, one to three new patients and four to eight return patients must be seen by each resident.

C. Technical and Other Skills

1. The program must provide sufficient experience for the resident to acquire skill in the performance and interpretation of:
   a. The use of nonsteroidal anti-inflammatory drugs, disease-modifying drugs, biologic response modifiers, glucocorticoids, cytotoxic drugs, antihyperuricemic drugs, and antibiotic therapy for septic joints
   b. Examination of patients, to include a specific examination of structure and function of all joints, both axial and peripheral, as well as periarticular structure and muscle units
   c. Construction of differential diagnosis for complexes of symptoms and signs related to rheumatologic diseases
   d. Diagnostic aspiration and analysis by light and polarized light microscopy of synovial fluid from diarthrodial joints, bursae, and tenosynovial structures
   e. Therapeutic injection of diarthrodial joints, bursae, tenosynovial structures, and entheses

2. The program must provide sufficient experience for the resident to acquire skill in the performance and/or interpretation of:
   a. Biopsies of tissues relevant to the diagnosis of rheumatic diseases
   b. Bone and joint imaging techniques, including bone density measurements
   c. Nailfold capillary microscopy
   d. Administration of controlled clinical trials in rheumatic diseases

3. The program must provide residents with sufficient experience in the indications for arthroscopy.

4. The program must provide opportunities for residents to acquire skill in understanding electromyogram and nerve conduction studies.

D. Formal Instruction

Additional specific content areas that, as a minimum, must be included in the formal program (lectures, conferences, and seminars) include:

1. Anatomy, genetics, immunology, biochemistry, and physiology of connective tissue, bone, muscle, including purine metabolism
2. Pathologic aspects of rheumatic diseases and metabolic diseases of bone, including osteoporosis
3. Nonarticular manifestations of rheumatic diseases
4. Emotional factors that influence or result from rheumatic diseases
5. The scientific basis of the methodology, indications, and interpretations of laboratory tests and imaging procedures used in diagnosis and follow-up of patients with rheumatic diseases
6. Indications for and interpretation of electromyograms, nerve conduction studies, and muscle/nerve biopsy
7. Pharmacology, pharmacokinetics, drug metabolism, drug side effects, drug interactions, and costs of therapy of agents used in the therapy of rheumatologic diseases
8. Principles of rehabilitation (physical therapy and occupational therapy) for patients with rheumatic diseases and exercise-related (sports) illnesses
9. Indications for surgical and orthopaedic consultation in acute and chronic rheumatic diseases
10. Basic principles of decision analysis relating to diagnostic tests to define illness and recommend therapy
11. Principles of clinical epidemiology and health services research, including biostatistics, medical information systems, information sciences, critical literature review, and clinical trials and experimental protocol research design
12. Rheumatic problems in the geriatric population
13. Ethical and socioeconomic issues relating to the practice of rheumatology

E. Research Experience

See paragraphs K and L, Section V, Specific Program Content, Program Requirements for Residency Education in the Subspecialties of Internal Medicine.

F. Evaluation

See Section VI, Evaluation, Program Requirements for Residency Education in the Subspecialties of Internal Medicine.

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Program Requirements for Residency Education in Internal Medicine
Sports Medicine

I. Introduction
In addition to complying with the requirements below, each program must comply with the Program Requirements for Residency Education in the Subspecialties of Internal Medicine.

II. Scope and Duration of Training
An educational program in sports medicine must be organized to provide a well-supervised experience at a level sufficient for the resident to acquire the competence of a physician with added qualifications in this field. It shall be 1 year in duration.

The practice of sports medicine is the application of the physician’s knowledge, skills, and attitudes to those engaged in sports and exercise. Thus, the program must provide training in the development of the clinical competencies needed to diagnose and manage medical illnesses and injuries related to sports and exercise, for example, first-degree sprains, strains, and contusions, including appropriate referrals of, for example, fractures, dislocations, and third-degree sprains. Clinical experience must include injury prevention, preparticipation evaluation, management of acute and chronic illness or injury, and rehabilitation as applied to a broad spectrum of undifferentiated patients. There must be experience functioning as a team physician and in the promotion of physical fitness and wellness.

The program should emphasize physiology and biomechanics; principles of nutrition; pathology and pathophysiology of illness and injury; pharmacology, effects of therapeutic, performance-enhancing, and mood-altering drugs; psychological aspects of exercise, performance, and competition; ethical principles; and medical-legal aspects of exercise and sports.

III. Teaching Staff
In addition to the program director, each program must have at least one other faculty member with similar qualifications who devotes a substantial portion of professional time to the training program.

The teaching staff must include orthopedic surgeons who are engaged in the operative management of sports injuries and other conditions and who are readily available to teach and provide consultation to the residents. Teaching staff from the disciplines of nutrition, pharmacology, pathology, exercise physiology, physical therapy, behavioral science, physical medicine and rehabilitation, and clinical imaging also should be available to assist in the educational program. Coaches and athletic trainers also should be included.

IV. Facilities and Resources
The program must include the following:

A. Patient Population
A patient population that is unlimited by age or gender and is adequate in number and variety to meet the needs of the training program must be available. The program director must ensure that residents are accorded meaningful patient responsibility with the supervision of a faculty member at all facilities and sites.

B. Sports Medicine Clinic
There must be an identifiable clinic that offers continuing care to patients who seek consultation regarding sports- or exercise-related health problems. The nonsurgical residents must be supervised by a physician who has qualifications in sports medicine and is certified by the American Board of Emergency Medicine, the American Board of Family Practice, the American Board of Internal Medicine, or the American Board of Pediatrics or who possesses suitable equivalent qualifications.

Adequate, up-to-date diagnostic imaging and rehabilitation services must be readily available and accessible to clinic patients. Consultation in medical and surgical subspecialties, physical therapy, nursing, nutrition, and pharmacy must be available. The opportunity to render continuing care and to organize recommendations from other specialties and disciplines is mandatory and will require that medical records include information pertinent to the assessment and management of patients with health problems related to sports and exercise.

C. Sporting Events/Team Sports/Mass-Participation Events
The program must have access to sporting events, team sports, and mass-participation events during which the resident can have meaningful patient responsibility.

D. Acute-Care Facility
There must be an acute-care hospital with a full range of services associated with and in proximity to the sponsoring residency. This facility must be readily accessible to patients served by the program.

V. Educational Program
The curriculum must provide the educational experiences necessary for the residents to achieve the cognitive knowledge, psychomotor skills, interpersonal skills, professional attitudes, and practical experience required of physicians in the care of patients with health problems related to sports and exercise.

Didactic as well as clinical learning opportunities must be provided as part of the required curriculum for all residents. Conferences or seminars/workshops in sports medicine should be specifically designed for the residents to augment the clinical experiences.

All educational activities must be adequately supervised while allowing the resident to assume progressive responsibility for patient care. The clinical activities in sports medicine should represent a minimum of 50% of the time in the program. The remainder of the time should be spent in didactic, teaching, and/or research activities and in the primary care or emergency medicine ambulatory facility.

Residents must spend 1/4 day per week maintaining their skills in their primary specialty.

Participation in the following must be required of all residents:

A. Preparticipation Evaluation of the Athlete
The program must ensure that all sports medicine residents are involved in the development and conduct of preparticipation examination programs.

B. Acute Care
The resident must have appropriate authority and responsibility to participate meaningfully in the medical care that is provided to acute-care patients (see Scope and Duration of Training, above). In addition, the program should arrange for residents to observe representative inpatient and outpatient operative orthopedic procedures.

C. Sports Medicine Clinic Experience
The resident must attend patients in a continuing, comprehensive manner, providing consultation for health problems related to sports and exercise. The resident shall spend at least 1 day per week for 10 months of the training period in this activity.

If patients are hospitalized, the resident should follow them during their inpatient stay and resume outpatient care following the
hospitalization. Consultation with other physicians and professionals in other disciplines should be encouraged.

D. On-Site Sports Care

The resident should participate in planning and implementation of all aspects of medical care at various sporting events. The program must ensure that supervised sports medicine residents provide on-site care and management to participants in these events.

In addition, the resident must participate in the provision of comprehensive and continuing care to a sports team. Preferably, the experience should include several teams that engage in seasonal sports.

E. Mass-Participation Sports Events

The resident should participate in the planning and implementation of the provision of medical coverage for at least one mass-participation event. The program must ensure that its residents have experience that includes providing medical consultation, direct patient care, event planning, protection of participants, coordination with local EMS systems, and other medical aspects of those events.

VI. Specific Knowledge and Skills

A. Clinical

The program must provide educational experiences for the residents to develop clinical competence in the overall field of sports medicine.

The curriculum must include but not be limited to the following content and skill areas:

1. Anatomy, physiology, and biomechanics of exercise
2. Basic nutritional principles and their application to exercise
3. Psychological aspects of exercise, performance, and competition
4. Guidelines for evaluation prior to participation in exercise and sport
5. Physical conditioning requirements for various activities
6. Special considerations related to age, gender, and disability
7. Pathology and pathophysiology of illness and injury as it relates to exercise
8. Effects of disease, eg, diabetes, cardiac conditions, and arthritis, on exercise and the use of exercise in the care of medical problems
9. Prevention, evaluation, management, and rehabilitation of injuries
10. Understanding pharmacology and effects of therapeutic, performance-enhancing, and mood-altering drugs
11. Promotion of physical fitness and healthy lifestyles
12. Functioning as a team physician
13. Ethical principles as applied to exercise and sports
14. Medical/legal aspects of exercise and sports
15. Environmental effects on exercise
16. Growth and development related to exercise

B. Patient Education/Teaching

The program must provide the experiences necessary for the residents to develop and demonstrate competence in patient education regarding sports and exercise. They must have experience teaching others, eg, nurses, allied health personnel, medical students, residents, coaches, athletes, other professionals, and members of patients' families. There also must be relevant experience working in a community sports medicine network involving parents, coaches, certified athletic trainers, allied medical personnel, residents, and physicians.

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Program Requirements for Residency Education in Medical Genetics

I. Duration and Scope of Accredited Programs in Medical Genetics

A. Description of the Specialty

1. Clinical medical geneticists are physicians who provide comprehensive diagnostic, management, and genetic counseling services for patients with genetic, or possibly genetic, disorders. They also plan and coordinate large-scale screening programs for inborn errors of metabolism, hemoglobinopathies, chromosome abnormalities, neural tube defects, and other genetically influenced conditions.
2. Clinical medical geneticists are able to (a) diagnose and manage genetic disorders; (b) provide patient and family counseling; (c) use their knowledge of heterogeneity, variability, and natural history of genetic disorders in patient-care decision making; (d) elicit and interpret individual and family medical histories; (e) interpret clinical genetic and specialized laboratory testing information; (f) explain the causes and natural history of genetic disorders and genetic risk assessment; and (g) interact with other health-care professionals in the provision of services for patients with genetically influenced disorders.

B. Scope of Education

1. Accredited graduate medical education programs in medical genetics must provide the formal instruction and appropriately supervised clinical experience necessary for residents to develop the knowledge, skills, and attitudes essential to the practice of clinical medical genetics.
2. Programs must provide (a) opportunities for residents to become involved in research and teaching and (b) education in the basic sciences and clinical areas pertinent to medical genetics, including mendelian genetics, cytogenetics, diagnosis and treatment of inborn errors of metabolism, molecular diagnosis, syndrome identification and dysmorphology, teratology, reproductive genetics, congenital malformations, multifactorial disorders, mental retardation and developmental disabilities, genetic screening, social and ethical issues in medical genetics, genetic counseling, and quantitative human genetics.

C. Program Length

1. A clinical medical genetics residency may be accredited to provide 2 and/or 4 years of graduate medical education
   a. Physicians who have completed an Accreditation Council for Graduate Medical Education (ACGME)-accredited residency are eligible for appointment to a 2-year medical genetics residency.
   b. A medical genetics program director may appoint a resident to a 2-year program following 2 or more years of ACGME-accredited residency education.
   c. A 4-year program must include 2 years of pregenetics education in other ACGME-accredited residencies followed by 2 years of education in clinical medical genetics. A 4-year program must be designed prospectively by the director of the medical genetics residency and the directors of the programs to which residents will be assigned during the 2 years of pregenetics education.
2. In both 2-year and 4-year programs, the 24 months of genetics education must include at least 18 months of broad-based, clinically oriented medical genetics activities.

D. Program Goals and Objectives

1. Program Description
   a. The director and teaching staff must prepare and comply with written educational goals for the program.
   b. A written description of the educational program must be prepared and distributed to residents and teaching staff.
   c. The program description must include:
      1. A summary of the program's educational goals
      2. A listing and description of all required rotations and other assignments
      3. The goals and objectives of each rotation/assignment
      4. The duration of each rotation/assignment
      5. A description of resident opportunities for teaching and research
   d. A description of the manner in which residents are supervised

2. Program Design
   a. All educational components of the program should be related to program goals.
   b. The program design and/or structure must be approved by the Residency Review Committee (RRC) as part of the regular review process.
   c. Participation by any institution providing more than 3 months of training in a 2-year program or 6 months of training in a 4-year program requires prior approval by the RRC

II. Institutional Resources

A. Graduate medical education in medical genetics must be sponsored by institutions that are able to provide sufficient faculty, administrative support, financial resources, comprehensive medical library services, research facilities, office space, support staff, and clinical facilities to meet the educational needs of residents and enable the residency to comply with accreditation requirements. Affiliations may be made with other institutions/laboratories to meet educational needs.

B. Institutions sponsoring medical genetics programs should also sponsor ACME-accredited programs in pediatrics, internal medicine, and obstetrics/gynecology.

C. Program institutions must have a clinical cytogenetics laboratory, a clinical biochemical genetics laboratory, and a clinical molecular genetics laboratory, each of which provides an appropriate volume and variety of medical genetics-related services and has an adequate number of qualified staff.

D. Program institutions must provide a sufficient number and variety (e.g., pregnant and nonpregnant, all ages) of inpatients and outpatients to permit residents to gain experience with the natural history of a wide range of genetic disorders.

III. Program Personnel

The program director and the teaching staff are responsible for the general administration of the program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director

1. There must be a single program director who has the authority to direct the entire clinical medical genetics program and is able to devote sufficient time to fulfill the responsibilities required to meet the educational goals of the program, including the implementation of sound administrative practices and the provision of adequate facilities, teaching staff, resident staff, support staff, and other educational resources.

2. The program director must be:
   a. A physician who has a valid license to practice medicine in the state where the institution that sponsors the program is located.
   b. Certified in Clinical Genetics by the American Board of Medical Genetics (ABMG) or possess suitable equivalent qualifications.
   c. A member in good standing of the medical staff of the institution that sponsors the program.
   d. Experienced in medical education in general and graduate medical education in genetics in particular and possess the requisite clinical, educational, and administrative abilities needed to direct a medical genetics program.

3. Responsibilities of the program director include:
   a. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.
   b. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.
   c. Selection, supervision, and evaluation of the teaching staff and other program personnel at each institution participating in the program.
   d. The supervision of residents in accordance with explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.
   e. Regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician.

   The program director, with participation of members of the teaching staff, shall:
   1. At least semiannually evaluate the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures.
   2. Communicate each evaluation to the resident in a timely manner.
   3. Advise residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.
   4. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.
   f. The provision of a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has completed the program and demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.
   g. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.
   h. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching
Program Requirements for Residency Education in Medical Genetics

staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.
i. Continuing involvement in scholarly activities, participation in key national scientific human genetics meetings, and contribution to medical education both locally and nationally.
j. Communication with the RRC, including the program information that is prepared for periodic accreditation site visits and reviews. The director must also notify the committee secretary of significant changes in the program, including:
1. Change of program director.
2. Major changes in institutional affiliation. Any change in formal affiliation with institutions where residents are assigned for required educational experiences requires prior approval from the RRC.
3. An increase in the RRC-approved maximum number of residents in the program. Requests for increases in a program's resident complement require the prior approval of the RRC.
k. Ensuring that residents are clearly informed in writing of program requirements, including the duration of the resident's course of study.

4. As continuity of the leadership of a residency is crucial to educational quality, frequent changes in the directorship and extended periods of temporary leadership have been found to have an adverse impact on programs. Therefore, institutions must develop and implement policies and procedures to ensure continuity when the program director departs, is on sabbatical, or is unable to meet his or her duties for any other reason.

B. Teaching Staff
1. There must be a sufficient number of teaching staff with documented qualifications to instruct and supervise adequately all the residents in the program. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities.
2. There must be at least three members of the teaching staff (including the program director) who are certified by the ABMG (or possess equivalent qualifications) and are members of the medical staffs at program institutions. At least two of these individuals must be certified in Clinical Medical Genetics.
3. The individual responsible for resident education in biochemical genetics must be ABMG-certified in biochemical genetics. The person responsible for resident education in molecular genetics must be ABMG-certified in molecular genetics. The individual responsible for resident education in clinical cytogenetics must be ABMG-certified in clinical cytogenetics.
4. There must be a sufficient number of teaching staff so that program faculty are readily available to residents and able to meet effectively their patient care, educational, and research responsibilities.
5. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.
6. Members of the teaching staff must regularly and actively participate in program rounds, conferences, and journal clubs.
7. Members of the teaching staff must participate in appropriate scientific societies (particularly through presentations at meetings) and pursue their own continuing education.
8. Members of the teaching staff must demonstrate an active interest in genetics research (particularly in projects that are funded following peer review and/or result in publications in peer-reviewed journals) and provide guidance and technical support (eg, research design, statistical analysis) for residents who are involved in research or other scholarly activities.
9. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.
10. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.
11. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

C. Number of Residents
When reviewing a program for accreditation, the RRC will approve a maximum total number of residents to be appointed to a program. That number will be based primarily on the number, qualifications, and commitment of the teaching staff; the volume and variety of genetics patients available for educational purposes; and program facilities, finances, and organization.

D. Other Program Personnel
There must be a sufficient number of appropriately qualified patient care, administrative, technical, clerical, and other staff to support all the educational activities of the program.

IV. Program Facilities
A. Adequate space and equipment must be available to meet the educational goals of the program. In addition to space for patient care activities, this requires meeting rooms, classrooms, office space, research facilities, and facilities for record storage and retrieval.
B. Office and laboratory space must be provided for the residents for both patient-care work and participation in scholarly activities.
C. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions. The institutional library should contain standard journals and texts in genetics and related fields of medicine and provide services for the electronic retrieval of information from national medical databases to permit timely literature review.
D. Residents must have access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.
E. Residents should have access to computer-based genetic diagnostic systems.
F. The audiovisual resources available for educational purposes should be adequate to meet the goals and objectives of the program.

V. Educational Program
The residency must be organized to provide a well-structured, integrated, and progressive educational experience in clinical medical genetics. The residents must have the opportunity to develop the abilities to diagnose genetic disorders, counsel patients, and manage the broad range of clinical problems that are encompassed within medical genetics. Because of the complex nature and multiple system involvement of genetic disorders, residents must be ex-
posed to multidisciplinary and interdisciplinary models during the program and must become proficient at organizing teams of health-care professionals to provide the necessary resources for their patients. As medical genetics involves families and individuals of all ages, residents must be competent to work with both adults and children and must have an opportunity to gain an understanding of family dynamics as they relate to issues of diagnosis, counseling, and management.

A. Clinical Components

1. Patient Population
   Residents must have the opportunity to care for a number of patients and families sufficient to permit them to develop an understanding of the wide variety of medical genetic problems, including mendelian disorders, inborn errors of metabolism, diseases of chromosome number and structure, multifactorial disorders, syndromes, congenital malformations, other birth defects, and other genetically influenced conditions. Typically, this will mean that programs will care for at least 100 different patients or families per year for each resident. These patients and families must be seen in outpatient and inpatient settings.

2. Correlation of Laboratory and Clinical Experiences
   Clinical biochemical genetic, molecular genetic, and cytogenetic laboratories must be integral components of each program, and residents must have regular opportunities to develop their abilities to understand and critically interpret laboratory data. Residents should develop an understanding of the appropriate use of laboratories during diagnosis, counseling, and management of patients with genetic disorders. Toward this end, resident education must include ongoing participation in the working conferences of laboratories as well as discussion of laboratory data during other clinical conferences.

3. Other Health-Care Professionals
   Residents must have regular opportunities to work with genetic counselors, nurses, nutritionists, and other health-care professionals who are involved in the provision of clinical medical genetics services.

4. Responsibilities for Patient Care
   The development of mature clinical judgment requires that residents, properly supervised, be given responsibility for patient care commensurate with their ability. This can be achieved only if the resident is involved in the decision-making process and in the continuity of patient care. Residents must be given the responsibility for direct patient care in all settings, including planning and management, both diagnostic and therapeutic, subject to review and approval by the attending physician.
   a. Supervision
      Residents must be supervised by appropriately qualified faculty at all times. Residents must be provided with rapid and reliable systems for communicating with supervising residents and attendings. Attending physicians or supervising residents with appropriate experience for the severity and complexity of the patient’s condition must be available to residents at all times and must be able to respond in a timely fashion.
   b. Progressive Responsibility
      The responsibility given to residents for patient care should depend on their knowledge, skill, experience, and the complexity of the patient’s counseling or medical problems. The degree of responsibility accorded to a resident, both professional and administrative, must be increased progressively. This includes responsibility in such areas as patient care, leadership, teaching, organization, and administration. The program must provide residents with experience in direct and progressively responsible patient management as they advance through the program so that those completing the program will have developed sound clinical judgment.

c. Duty Hours and Personal Responsibility
   The physician’s responsibilities for continuing patient care transcend normal working hours. To fulfill this obligation, provisions for night and weekend call must be established. However, residents must not be regularly required to perform difficult or prolonged duties. Therefore, the program director must ensure assignment of reasonable in-hospital duty hours. Residents at all levels should be able to spend, on average, at least 1 full day out of 7 free of hospital duties and should be on call in the hospital no more often than every third night, except in the maintenance of continuity of care. There should be adequate opportunity to rest and to sleep when on duty for 24 hours or more. On-call rooms arranged to permit adequate rest and privacy should be available for each resident on night duty in the hospital. There should be adequate backup support if needed to maintain appropriate patient care.

B. Academic Components

1. Basic Sciences
   a. Each resident must participate formally, through lectures or other didactic sessions, in the equivalent of a 1-year graduate level course in basic, human, and medical genetics, including but not limited to population and quantitative genetics, mendelian and nonmendelian genetics, cytogenetics, biochemical genetics, and molecular genetics.
   b. Research seminars should be a part of the training experience but shall not be considered an acceptable alternative to this basic science didactic component.

2. Research and Scholarly Activity
   a. Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility.
   b. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of the faculty must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:
      1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.
      2. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations’ meetings and publication in their journals.
      3. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.
      4. Offering of guidance and technical support (e.g., research design, statistical analysis) for residents involved in research.
      5. Provision of support and facilities for resident participation in scholarly activities. In addition to direct research involvement, residents and faculty should participate in journal clubs, research seminars, work-in-progress sessions, and reviews of intradepartmental and interdepartmental research activity.
3. Clinical Conferences
Clinical teaching conferences must be organized by the faculty for the residents, and attendance by the residents and the faculty must be documented. These conferences must be distinct from the basic science lectures and didactic sessions. Clinical teaching conferences may include formal didactic sessions on clinical laboratory topics, medical genetics rounds, journal clubs, and follow-up conferences for genetic clinics.

4. Presence of Other Learners
   a. The presence of other learners in medical genetics and in other specialties within program institutions is essential to the maintenance of a stimulating educational environment.
   b. The appointment of other individuals for special training or education, such as fellows, residents from other specialties, and medical students, must not dilute or detract from the educational opportunities of the medical genetics residents.

VI. Evaluation
A. Evaluation of Residents
   1. Regular oral and written evaluations of residents must include comment on both clinical and academic work. Evaluations of residents' patient care activities must address their abilities to carry out clinical genetic evaluations, perform appropriate clinical procedures, understand the methodologies involved in genetic laboratory tests, interpret test results, and counsel patients and families.
   2. There must be formal evaluation by the faculty of each resident's knowledge, performance, and growth at least twice each year, and residents must have the opportunity to review confidential, written evaluations of their performance with the program director.

B. Evaluation of Faculty
   1. Individual members of the teaching staff must be confidentially evaluated by the program director and the residents at least once each year.
   2. Faculty evaluations should include comment on teaching ability, research and other scholarly activity, availability to the residents, and commitment to the training program, as well as clinical knowledge and skill.

C. Evaluation of the Program
   1. The educational effectiveness of the program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed.
   2. There must be regular written, confidential evaluation of the program by the sponsoring institution, program director, and teaching staff.
   3. At least once each year, residents and members of the teaching staff should provide the director with written evaluations of the program that give particular attention to the program's success in meeting its educational goals and objectives as well as accreditation requirements.
   4. One measure of the quality of a medical genetics residency is the performance of its residents on certifying examinations of the ABMG.

VII. Certification and Accreditation
A. The RRC for Medical Genetics is responsible for accreditation of graduate medical education programs in clinical medical genetics. The ABMG is responsible for certification of individual physicians in medical genetics.
B. Questions about accreditation of residency programs should be directed to the secretary of the RRC.

C. Questions about certification in medical genetics should be directed to the office of the ABMG.

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Program Requirements for Residency Education in Neurological Surgery

I. Introduction
A. Definition of Discipline
   Neurological surgery is a medical discipline that provides the operative and nonoperative management (e.g., prevention, diagnosis, evaluation, treatment, critical care, and rehabilitation) of disorders that affect the central, peripheral, and autonomic nervous systems, including their supporting structures and vascular supply, and the operative and nonoperative management of pain. As such, neurological surgery encompasses the modern treatment of disorders of the brain, meninges, skull, and their blood supply; including the cranial vessels and vertebrae; disorders of the pituitary gland; disorders of the spinal cord, meninges, and spine; disorders of the cranial and spinal nerves throughout their distributions; and disorders of the autonomic nervous system.

B. Duration and Scope of Education
   1. The educational program must be diversified and well-balanced.
   2. The training program in neurological surgery must include a minimum of 1 year of training in an Accreditation Council for Graduate Medical Education (ACGME)-accredited program in general surgery or at least 1 year of a program accredited for the acquisition of fundamental clinical skills, which must include at least 6 months of surgical disciplines other than neurological surgery. This training should be completed prior to undertaking the third year of neurological surgery training.
   3. The neurological surgery training program is 60 months in duration, in addition to the year of acquisition of fundamental clinical skills, and must provide 36 months of clinical neurological surgery at the sponsoring institution or one of its approved participating institutions.
   4. Twenty-one months of the total 60 months may be devoted to any of several aspects of the training program, depending on the needs of the resident. It may be spent in the study of the basic sciences, neuroradiology, neuropathology, or other appropriate subject matters related to the neurosciences as agreed upon by individual residents and the program director.
   5. A block of training of 3 months minimum in an ACGME-accredited neurology training program must be arranged for all residents, unless they have previously had a minimum of 1 year of formal residency training in an accredited neurology training program.
   6. There must be a 12-month period of time as senior/chief resident on the clinical service of neurological surgery in the sponsoring institution or its approved participating institutions. This is considered an essential component in each resident's planned program. The program must provide the residents with experience.

1. The program director should consult the American Board of Neurological Surgery for certification requirements concerning any training conducted outside the approved institutions of the program.

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in direct and progressively responsible patient management as they advance through training.
   a. The senior/chief resident must have major or primary responsibility for patient management with faculty supervision.
   b. The senior/chief resident should also have administrative responsibility as designated by the program director.

7. Residents must be introduced to the practice of neurosurgery in an outpatient setting where nonemergency patients are seen by the resident for evaluation before and after surgical procedures. A crucial element of this experience is the clear understanding by the patient that the resident is involved in making decisions concerning diagnostic and participates in operative procedures and follow-up care.

8. Prior to entry into the program, each resident must be notified in writing of the length of training. The prescribed length of training for a particular resident may not be changed without mutual agreement during his or her program unless there is a break in his or her training or the resident requires remedial training. Any training additional to the accredited residency must be based on a clear educational rationale and must not interfere with the education and training of the residents enrolled in the program.

C. Accreditation Guidelines

1. Training programs in neurological surgery are accredited by the Residency Review Committee (RRC) by authority of the ACGME. A list of accredited training programs in neurological surgery is published annually in the Graduate Medical Education Directory.

2. To be accredited by the ACGME as an educational program in neurological surgery must be in substantial compliance with both the Program Requirements for Residency Education in Neurological Surgery and the Institutional Requirements of the Essentials of Accredited Residencies in Graduate Medical Education. Programs must be able to demonstrate their compliance with these requirements at the time of their site visit and subsequent review by the RRC.

3. When a change in leadership occurs within an accredited neurological surgery residency, the program must be site-visited within 18 months and reviewed by the RRC in approximately 2 years following the appointment of the new program director.

II. Institutional Organization

A. Sponsoring Institution

An educational program in neurological surgery must have one sponsoring institution within a single geographic location with primary responsibility for the entire program. Appropriate institutions include medical schools, hospitals, and medical foundations. The institution must demonstrate commitment to the program in terms of financial and academic support.

B. Participating Institutions

Participating institutions include the sponsoring institution and other integrated and/or affiliated institutions approved by the RRC for training purposes (see surgical requirements for affiliated status). Participating institutions must promote the educational goals of the program rather than simply enroll the program and must not be added primarily for the purpose of meeting service needs.

1. An integrated institution must function as a single neurological surgery service with the sponsoring institution or, in exceptional circumstances, with an approved affiliate of the sponsoring institution. The program director must demonstrate to the RRC that the clinical service operates as a single unit in the assignment of residents and their faculty supervisors, the formulation of call and backup schedules, and in the convening of teaching conferences and related educational activities.

2. An affiliated institution functions as a separate neurological surgical service with a local training director under the direction of the program director and should be sufficiently close to the sponsoring institution to ensure peer interaction and regular attendance at joint conferences and other activities. Appropriate exceptions may be considered for special resource hospitals (e.g., pediatric, trauma, and spine).

3. Training at an additional institution, proposed for affiliated status, may be approved on a provisional basis for a maximum of 2 years, at which time such training must be either fully approved or withdrawn at the discretion of the RRC. Ordinarily, a site visit will not be necessary to confirm the permanent approval of a provisionally approved participating institution.

4. The number and distribution of participating institutions must not preclude satisfactory participation by residents in teaching and training exercises.

5. Affiliated institutions that are geographically separated from the sponsoring institution are not desirable and are acceptable only if they offer special resources that significantly augment the overall educational experience of the training program.

6. Rotations to affiliated and integrated institutions must be based on a clear statement of the value of such institutions to the teaching program as a whole.

C. Number and Quality of Residents

1. One of the measures of a training program is the quality of residents chosen and the ability of the program to ensure a steady increase in the resident's knowledge and skills.

2. The RRC will review the selection process of residents and seek evidence that the program evaluates the progression of the residents during training.

3. Where there is demonstrated excellence in providing educational experience for the residents, as determined by the RRC, a program may be authorized to enroll more than one resident per year. The ability to do so does not depend on any multiplication of the minimum requirements as established by the Program Requirements for Residency Education in Neurological Surgery. In determining the size of a resident complement, the RRC will consider:
   a. Presence of a faculty of national stature in neurological surgery
   b. Quality of the educational program
   c. Quality of clinical care
   d. Total number and distribution of cases
   e. Quality of clinical and basic research
   f. Quality of residents trained by the program, including numbers of residents starting and finishing the program, number of graduates who take written and oral examinations of the American Board of Neurological Surgery, and the number of graduates passing these written and oral examinations
   g. Facilities

4. The number of residents at each year of training in a given program, except as provided below, shall not exceed the number approved by the most recent accreditation review of that program. Should a vacancy occur at any level of training in a program, the program director has the option of appointing a new resident at a level that might overlap with that of another resident in training, provided that such appointments do not adversely affect the training experience of residents already in the program. Furthermore, over a 5-year period, commencing at the time when the resident whose departure created the vacancy would have completed training, the average number of residents graduating yearly must not exceed the number approved by the RRC.
III. Faculty Qualifications and Responsibilities

The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director Qualifications
1. There must be a single program director responsible for the program.
2. The program director shall be a neurological surgeon who possesses and practices the necessary administrative, teaching, and clinical skills and has experience to conduct the program.
3. The program director shall be certified by the American Board of Neurological Surgery or possess suitable equivalent qualifications in neurological surgery satisfactory to the RRC.
4. The program director shall be licensed to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)
5. The program director shall have an appointment in good standing to the medical staff of an institution participating in the program.

B. Program Director Responsibilities
The program director must assume responsibility for all aspects of the training program and devote sufficient time to the educational program, including the following:
1. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.
2. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.
3. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program.
4. The supervision of residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff.
5. Regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician.
6. The provision of a written final evaluation for each resident who completes the program, as specified in paragraph VI.I.
7. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.
8. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undue stress on residents must be evaluated and modified.
9. Preparation of an accurate statistical and narrative description of the program as requested by the RRC for Neurological Surgery.
10. Notifying the executive secretary of the RRC in writing of any major change in the program that may significantly alter the educational experience for the residents, including:
   a. Changes in leadership of the department, such as the appointment of a permanent or acting program director and/or departmental chairman.
   b. Changes in administrative structure, such as alteration in the hierarchical status of the program department within the institution.
11. The director of the program must obtain prior approval of the RRC for the following changes in the program to determine if an adequate educational environment exists to support these changes:
   a. The addition or deletion of any participating institution to which residents rotate
   b. The addition or deletion of any institutional rotation
   c. Any change in the resident complement of the program
   d. Any change in the format of the training program (including fellowships within the program)

Upon review of a proposal for a major change in a program, the RRC may determine that a site visit is necessary.

C. Other Teaching Faculty Qualifications and Number
1. All clinical faculty members shall possess the necessary experience and administrative, teaching, and clinical skills to conduct the program.
2. All clinical faculty members who are neurological surgeons shall be certified by, or be in the certification process of, the American Board of Neurological Surgery or possess equivalent qualifications in neurological surgery satisfactory to the RRC.
3. There must be a sufficient number of teaching staff with documented qualifications to instruct and supervise adequately all the residents in the program. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities. Under most circumstances, there should be a minimum of three neurological surgeons associated with the training program.
4. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities. Neurological surgery faculty participation in undergraduate medical education is highly desirable.
5. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.
6. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

D. Training Directors at Participating Institutions
1. The training director shall be a qualified neurological surgeon appointed by and responsible to the program director in each geographically separate institution. This individual must be responsible for the education of the residents and will also supervise the educational activities of other neurological surgeons relating to resident education in that institution. Appropriate exceptions may be considered for special resource hospitals.
2. These appointments will generally be for a 1-year period and can be renewable to ensure continuity of leadership.
3. The training director in neurological surgery at each participating institution must have major clinical responsibilities at that institution.

E. Scholarly Activity of Faculty
The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not
all members of a teaching staff must be investigators, the staff as a
whole must demonstrate broad involvement in scholarly activity.
This activity should include:
1. Active participation of the teaching staff in clinical discussions,
rounds, and conferences in a manner that promotes a spirit of in-
quiry and scholarship. Scholarship implies an in-depth under-
standing of basic mechanisms of normal and abnormal states and
the application of current knowledge to practice.
2. Participation in journal clubs and research conferences.
3. Active participation in regional or national professional and sci-
entific societies, particularly through presentations at the organiza-
tions' meetings and publication in their journals.
4. Participation in research, particularly in projects that are funded
following peer review and/or result in publications or presenta-
tions at regional and national scientific meetings.
5. Offering of guidance and technical support (e.g., research design,
statistical analysis) for residents involved in research.
6. Provision of support for resident participation in scholarly
activities.
F. Other Program Personnel
Programs must be provided with the additional professional, technical,
and clerical personnel needed to support the administration
and educational conduct of the program.

IV. Facilities and Resources
A. Inpatient Facilities
1. Inpatient facilities available for training programs in neurological
surgery should be geographically identifiable and have an ade-
quate number of beds, support personnel, and proper equipment
to ensure quality education.
2. Inpatient facilities may vary from one participating institution to
another but should support essential prerequisites for excellence
in patient care and teaching.
3. The presence of a neurological surgery operating room with micro-
surgical capabilities and an intensive care unit specifically for
the care of neurological surgery patients is highly desirable to a
training program, as are other units for specialized neurological
surgery care.
4. Similarly, neurological surgery beds should be on a unit design-
ated for neurosurgery patients.
B. Outpatient Facilities
Residents must use outpatient facilities, clinic, and office space for
training purposes in the regular preparative evaluation and postop-
erative follow-up for cases for which the resident has responsibility.
C. Research Facilities
1. There should be space and support personnel for research identifi-
able in the neurological surgery division or department, and
some activity should be ongoing in this area.
2. Clinical and/or basic research opportunities should be available to
the neurological surgical resident with appropriate faculty
supervision.
D. Library
1. Residents must have ready access to a major medical library,
either at the institution where the residents are located or
through arrangement with convenient nearby institutions.
2. Library services should include the electronic retrieval of informa-
tion from medical databases.
3. There must be access to an on-site library or to a collection of
appropriate texts and journals in each institution participating in
a residency program. On-site libraries and/or collections of texts
and journals must be readily available during nights and
weekends.

V. Educational Program
The director and teaching staff of a program must prepare and com-
ply with written educational goals for the program. All educational
components of a residency program should be related to program
goals. The program design and/or structure must be approved by
the RRC for Neurological Surgery as part of the regular review
process.
A. Clinical Components
A current, well-organized, written plan for rotation of residents
among the various services and institutions involved must be main-
tained and must be available to the residents and faculty.
1. Patient Requirements
There shall be sufficient patients admitted each year to ensure
that the resident participates in the care of patients suffering
from the full spectrum of neurosurgical diseases.
2. This participation must include substantial experience in the man-
agement (including critical care) and surgical care of adult and
pediatric patients and should include disorders of the spine and
of the peripheral nerves, cerebrovascular disease including extracranial
vascular disease, trauma, and tumors of the nervous
system.
a. A program must demonstrate to the satisfaction of the RRC
that it has both the volume of patients under neurological care
and the breadth and depth of academic support to ensure that
it has the capability of providing excellent neurological sur-
gery training to residents.
b. The former must be substantiated in part by a compilation of
annual institutional operative data and resident operative
data (including that from residents rotating on the service
from other programs) provided in a format prescribed by
the RRC. Under some circumstances, the program may be re-
quired to include data for a period of up to 3 years prior to the
date of the submitted program information forms for accredita-
tion or reaccreditation. The entire surgical experience of the
most recently graduating resident(s) must be submitted each
time the program has its periodic review.
c. The profile of clinical experience reported to the RRC must be
limited to that utilized in the resident's educational program.
It also is understood that the educational requirements of the
resident must be considered at all times, and assignment to a
clinical service that limits or precludes educational opportuni-
ties will be adversely considered in evaluation of the program.
d. Within the total clinical facilities available to the training pro-
gram, there should be a minimum of 300 major neurological
surgery procedures per year per finishing resident. It must be
understood that achievement of this minimum number of clinical
procedures will not ensure accreditation of a training
program.
e. The minimum number of clinical procedures (see paragraph
V.A.2) is suggested with the understanding that the majority of
the procedures must occur at the sponsoring institution.
f. The presence within a given training program of this neurologi-
cal surgery workload and the distribution of the surgical expe-
rience are equally important. For instance, the cases should be
appropriately distributed among cranial, extracranial, spi-
nal, and peripheral nerve surgical procedures and should rep-
resent a well-balanced spectrum of neurological surgery in
both adults and children. This spectrum should include cranio-
tomies for trauma, verified neoplasms, aneurysms, and vascu-
lar malformations; extracranial carotid and vertebral artery
surgery; transphenoidal and stereotaxic surgery; and spinal
procedures of a sufficient number and complexity using mod-
dern techniques that encompass a variety of disorders (such as
trauma, neoplasia, infection, and degenerative disorders).
Program Requirements for Residency Education in Neurological Surgery

g. No affiliated hospital unit in the training program should be a component of a training program unless there are a minimum of 100 major neurological surgery procedures per year distributed appropriately among the spectrum of cases as described in paragraph f, above. Again, exception may be made if a hospital offers special clinical resources, e.g., stereotactic surgery, trauma, or pediatric neurological surgery, that significantly augment the resources of the training program as a whole.

3. Residents must have opportunities to evaluate patients referred for elective surgery in an outpatient environment. Under appropriate supervision, this experience should include obtaining a complete history, conducting an examination, ordering (if necessary) and interpreting diagnostic studies, and arriving independently at a diagnosis and plan of management. Comsonant with their skills and level of experience, residents should be actively involved in preoperative decision-making and subsequent operative procedures under the supervision of the attending physician who has ultimate responsibility for the patient. Residents should similarly be actively involved in postsurgical care and follow-up evaluation of their patients to develop skills in assessing postoperative recovery, recognizing and treating complications, communicating with referring physicians, and developing the physician-patient relationship. Preoperative interview and examination of patients already scheduled for a surgical procedure will not satisfy these requirements.

B. Didactic Components

There must be a well-coordinated schedule of teaching conferences, rounds, and other educational activities in which both the neurological surgery faculty and the residents participate. Conferences must be coordinated among institutions in a training program to facilitate attendance by a majority of staff and residents.

C. Resident Policies

1. Supervision

   The program director must ensure, direct, and document proper supervision of residents at all times. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians. Attending physicians or supervising residents with appropriate experience for the severity and complexity of the patient’s condition must be available at all times on site. The responsibility or independence given to residents in patient care should depend on their knowledge, manual skill, experience, and the complexity of the patient’s illness and the risk of the operation.

2. Progressive Responsibility

   Resident participation in and responsibility for operative procedures embracing the entire neurosurgical spectrum should increase progressively throughout the training period.

3. Continuity of Care

   Graduate training in neurological surgery requires a commitment to continuity of patient care, as practiced by qualified neurological surgeons. This continuity of care must take precedence—without regard to the time of day, day of the week, number of hours already worked, or on-call schedules. At the same time, patients have a right to expect a healthy, alert, responsible, and responsive physician dedicated to delivering effective and appropriate care.

4. Duty Hours

   a. The program director must establish an environment that is optimal for both resident education and patient care, while assuring that undue stress and fatigue among residents are avoided. It is his or her responsibility to ensure assignment of appropriate in-hospital duty hours so that residents are not required to perform excessively difficult or prolonged duties regularly. It is desirable that residents' work schedules be designed so that, on average, excluding extraordinary patient care needs, residents have at least 1 day out of 7 free of routine responsibilities and be on-call in the hospital no more often than every third night. Different rotations may require different working hours and patterns. There must be adequate backup so that patient care is not jeopardized during or following assigned periods of duty.

   b. A distinction must be made between on-call time in the hospital and on-call availability at home vis-a-vis actual hours worked. The ratio of hours worked and on-call time will vary, particularly at the senior levels, and therefore necessitates flexibility.

   c. During these hours residents must be provided with adequate sleeping, lounge, and food facilities. Support services must be such that the resident does not spend an inordinate amount of time in noneducational activities that can be discharged properly by other personnel.

5. Extracurricular Activities

   Residency training in neurological surgery is a full-time responsibility; activities outside the educational program must not interfere with the residents' performance in the educational process, as determined by the program director, and must not interfere with the residents' opportunities for rest, relaxation, and study.

D. Other Required Educational Components

Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility.

1. Educational experience in neuroradiology and neuropathology must be an integral part of the training program designed for the education of the neurological surgery residents. Such experience should be under the direction of qualified neuroradiologists and neuropathologists.

2. The program must provide opportunities for experience and instruction in the basic neurosciences.

3. The residents should participate in scholarly activities such as ongoing clinical and/or basic research projects with which appropriate faculty are involved.

4. Resident participation in undergraduate medical education is highly desirable.

5. Related Disciplines

   a. Recognizing the nature of the specialty of neurological surgery, it is unlikely that a program can mount an adequate educational experience for neurological surgery residents without approved training programs in related fields. Clinically oriented training programs in the sponsoring institution of the neurological surgery program should include accredited training programs in neurology, general surgery, internal medicine, pediatrics, and radiology.

   b. There should be clinical resources for the education of neurological surgery residents in anesthesiology, endocrinology, ophthalmology, orthopaedics, otolaryngology, pathology, and psychiatry. A lack of such resources will adversely affect the accreditation status of the neurological surgery program.

6. Appointment of Fellows

   a. The appointment of other individuals for special training or education, such as fellows, must not dilute or detract from the educational opportunities of regularly appointed residents.

   b. Programs must notify the RRC when they sponsor or participate in any clinical fellowships within institutions participating in the program before the commencement of such training and at each subsequent review of the program. Documenta-
tion must be provided describing the fellowship's relationship to and impact on the residency.

c. If fellows so appointed will, in the judgment of the RRC, detract from the education of the regularly appointed residents, the accreditation status of the program may be adversely affected.

VI. Evaluation

The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Written evaluations by residents should be utilized in this process.

A. The program director is responsible for the annual collection, compilation, and retention of the number and types of neurological surgery procedures performed in all institutions and facilities utilized in the clinical education of residents. This information must be provided on request in the format and form specified by the RRC.

B. Annually, the program director must ensure the compilation of a comprehensive record of the number and type of operative procedures performed by each resident completing the program. This record must include all of the procedures in which the neurological surgery resident was either surgeon or assistant and must be signed by both the resident and the program director as a statement of its accuracy. This information must be provided upon request in the format specified by the RRC. These records must be accurately maintained by the program director.

C. The knowledge, skills, professional growth, and progress of each resident, including professional conduct, must be evaluated by the program director in consultation with the teaching staff in a semianual, written review. These evaluations must be provided to and discussed with each resident in a timely manner. Appropriate criteria and procedures must be used.

D. Residents must be advanced to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.

E. The program must maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.

F. At least annually, all individual faculty members must be formally evaluated by the program director of neurological surgery as well as by the residents. A mechanism for sharing the results of such evaluations with the faculty that preserves individual resident confidentiality must be employed.

G. At least annually, the program ratings and conferences must be evaluated by both residents and faculty. The results of these evaluations should be kept on file.

H. The thoroughness of resident, faculty, and program evaluations, as well as the accurate and timely provision of program-related information to the RRC, will be monitored in the overall review of the residency program.

I. The program director must provide a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.

VII. Board Certification

A. Performance on Examination

One measure of the quality of a program is the participation in and performance of its graduates on the examinations of the American Board of Neurological Surgery. The number of residents completing training and taking and passing the certification examinations will be part of the RRC's evaluation of the program.

B. Certification Requirements

Residents who seek certification by the American Board of Neurological Surgery should communicate with the secretary of the board to be sure that the requirements for certification have been fulfilled. The current address of this office is published in each edition of the *Graduate Medical Education Directory*. Requests regarding evaluation of educational programs in neurological surgery and all related program inquiries should be addressed to the Executive Secretary of the Residency Review Committee for Neurological Surgery, 515 N State St Ste 2000, Chicago, IL 60610.

ACGME June 1994 Effective July 1995

Program Requirements for Residency Education in Pediatric Neurological Surgery

I. Introduction and Purpose

Programs in pediatric neurological surgery are designed to augment the education of neurological surgeons in the unique aspects of nervous system disease in infants and children. Participation in such training is not a prerequisite for the care of pediatric patients with neurological surgical disease by neurosurgeons who have completed training in an accredited neurological surgery program.

II. Prerequisites and Training Requirements

A. The pediatric neurological surgery resident must have completed at least 36 months of clinical neurological surgery training including the chief resident year in an Accreditation Council for Graduate Medical Education (ACGME)-accredited neurological surgery program.

B. The additional pediatric training will not be considered as part of the 36-month minimum clinical surgery requirement for neurological surgery residency training.

C. The period of training in a pediatric neurological surgery program is 2 years, and must not include pediatric rotations completed during the basic 36 months of clinical neurological surgery.

III. Structure of Programs

Specific requirements for such additional training are as follows:

A. The training must be sponsored by a neurological surgery residency accredited by the ACGME.

B. The institutions where such training may be conducted must include appropriate inpatient, outpatient, emergency, and intensive care facilities for direct resident involvement in providing comprehensive pediatric neurological surgical care.

C. In addition to the other associated training programs required in the Program Requirements for Residency Education in Neurological Surgery, there must be an ACGME-approved training program in child neurology at the institution sponsoring the pediatric neurological surgery program that is supervised by a certified or comparably qualified child neurologist.

IV. Faculty

There must be at least two qualified neurological surgeons actively involved in the additional pediatric training who are diplomates of the American Board of Neurological Surgery or who possess equivalent qualifications in neurological surgery.
A. At least one of these faculty members must have special expertise in the area of nervous system disease in infants and children and must concentrate his or her practice in pediatric neurological surgery. This individual shall serve as the director of the additional training.

B. The director of the pediatric neurological surgery training must be appointed by and be responsible to the program director of the sponsoring neurological surgery residency program.

C. There must be evidence of significant and consistent involvement of other qualified neurological surgery faculty in the clinical, didactic, and research components of the additional training.

D. The pediatric neurological surgery faculty must demonstrate participation in scholarly pursuits that include teaching, research, and publications.

V. Patient Population

The patient population must include a wide variety of pediatric neurological surgery cases, including congenital disorders, neoplasia, trauma, infection, and vascular diseases.

A. The program must have a sufficient number, variety, and complexity of major pediatric surgical procedures, as determined by the Residency Review Committee (RRC), performed per year to qualify as a sponsor of a single specialty pediatric neurological surgery resident. Additional resident positions may be approved by the RRC based on the guidelines for increases in resident complements established in the Program Requirements for Residency Education in Neurological Surgery.

B. The program director of the sponsoring neurological surgery training program must ensure that the additional pediatric neurological surgery training enhances the educational opportunities for the entire program. This training must not detract from the pediatric training of other neurological surgery residents.

C. The program director must submit the entire operative experience of the resident in the format prescribed by the RRC. The list of operative cases must be made available for committee review at the time of the review of the core program and the pediatric neurological surgery program.

VI. Curriculum

A. At least 12 months must be spent in clinical pediatric neurological surgery training and must include management responsibilities for intensive care patients.

B. There must be a minimum of 3 months of training in child neurology. The remaining 9 months should be spent training in related disciplines, such as pediatric neuro-ontology, neuroradiology, infectious disease, and research.

C. The program should provide opportunities for the resident to engage in clinical and/or basic research.

D. The resident should actively participate in scholarly activities.

E. Frequent, regularly scheduled, and coordinated pediatric neurological surgery clinical conferences and teaching rounds must be held. Other faculty and resident participation in them should be documented.

F. The resident should have a well-defined role in the education of neurological surgery residents and medical students.

G. There must be a systematic, semianual, written evaluation of each resident's performance, which is discussed with the resident.

VII. Resident Policies

A. Graduate training in pediatric neurological surgery requires a commitment to continuity of patient care as it is practiced by qualified neurological surgeons. This continuity of care must take precedence—without regard to the time of day, day of the week, number of hours already worked, or on-call schedules. At the same time, patients have a right to expect a healthy, alert, responsible, and responsive physician dedicated to delivering effective and appropriate care.

B. The program director must establish an environment that is optimal for resident education and for patient care, while ensuring that undue stress and fatigue are avoided. It is his or her responsibility to ensure assignment of appropriate in-hospital duty hours so that the pediatric neurological surgery resident is not required to perform excessively difficult or prolonged duties regularly. During these hours the resident must be provided with adequate sleeping, lounge, and food facilities. There should be adequate backup so resident care is not jeopardized during or following assigned periods of duty. Support services must be such that the resident does not spend an inordinate amount of time in noneducational activities that can be discharged properly by other personnel.

C. A distinction must be made between on-call time in the hospital and on-call availability at home versus actual hours worked. The ratio of hours worked to on-call time will vary and therefore requires a set pattern of established hours.

D. The program director must ensure, direct, and document proper supervision of the resident at all times. The resident must be provided with rapid, reliable systems for communicating with supervising attending physicians. Physicians with experience appropriate to the severity and complexity of the patient's condition must be available at all times on site. The responsibility or independence given to the resident in patient care should depend on his or her knowledge, manual skill, and experience, as well as on the complexity of the patient's illness and the risk of the operation(s).

ACGME: February 1991 Effective: July 1995

Program Requirements for Residency Education in Neurology

I. Introduction

A. Duration and Scope of Training

Approved residencies in neurology must provide 3 years of graduate education in neurology. It is highly desirable that this be preceded by 12 months of general internal medicine. At the same time, the program meeting these requirements may be of two types:

1. Those that provide 4 years of residency training, the first year of which must include a broad clinical experience in general inter-
nal medicine. This year must include at least one of the following: (a) 8 months of internal medicine with primary responsibility in patient care or (b) 6 months in internal medicine with primary responsibility in patient care, and a period of at least 2 months' total time in pediatrics and/or emergency medicine. Residents must spend no more than 2 months in neurology during this year.

2. Those that provide 3 years of residency training but accept only residents who have had an initial first year of graduate training in accredited programs in the United States or Canada. This first year should have the minimum requirements as noted in 1, above.

B. Objectives

- The purpose of the training program is to prepare the physician for the independent practice of clinical neurology. This training must be based on supervised clinical work with increasing responsibility for outpatients and inpatients. It must have a foundation of organized instruction in the basic sciences. Training should include not only the specific diseases of the nervous system of different age groups but also the neurological complications of medical and surgical conditions.

C. Program Design

All educational components of a residency program should be related to program goals.

1. The program design and structure must be approved by the Residency Review Committee (RRC) for Neurology as part of the regular review process.

2. Participation by any institution providing 6 months or more of training in a program of 3 or more years must be approved by the RRC.

II. Personnel

The director and teaching staff of a program must prepare and comply with written educational goals for the program. The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director

There must be a single program director responsible for the program.

1. Qualifications of the program director include
   a. Requisite and documented clinical, educational, and administrative abilities and experience.
   b. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)
   c. Certification by the American Board of Psychiatry and Neurology (ABPN) or suitable equivalent qualifications.
   d. Appointment in good standing to the medical staff of an institution participating in the program.

2. Responsibilities of the program director include
   a. Devotion of sufficient time to provide leadership to the program and supervision of the residents.
   b. Monitoring the content and ensuring the quality of the program.
   c. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.

   d. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.
   e. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program.
   f. The supervision of residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervising physicians.
   g. Regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician.

   - The program director, with participation of members of the teaching staff, shall:
     1. At least semiannually evaluate the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures.
     2. Communicate each evaluation to the resident in a timely manner.
     3. Advise residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.
     4. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.

h. The provision of a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.

i. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.

j. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.

k. Preparation of an accurate statistical and narrative description of the program as requested by the RRC.

B. Teaching Staff

1. The program must have a sufficient number of qualified staff involved in the teaching of residents in each of the component institutions of the program. The staff must devote sufficient time to the program to ensure a basic and clinical education for the residents.

2. Staff members should be certified by the ABPN or have equivalent qualifications.

3. It is desirable that the educational and training background of the staff provide a diversity of ideas in meeting the goals of providing patient care, teaching, and research.

4. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, and a commitment to their own continuing medical education.
5. The staff should actively pursue clinical or basic research interests in the neurosciences and provide to the residents the opportunity to share these experiences.

6. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

7. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

8. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contributions of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

C. Other Program Personnel

Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

D. Residents

The exact number of residents that may be appointed to a given program is not specifically designated. However, the program must maintain a sufficient number of residents to provide the critical mass needed to promote an intellectually stimulating educational atmosphere for the residents. A program should have a critical mass of a minimum of two residents in neurology in each year of the program. The important exchanges of ideas and mutual stimulation that develop among the neurology residents themselves can be fostered by choosing residents from different schools and backgrounds. Programs that fail to recruit any new residents for 2 consecutive years will be subject to adverse action.

III. Clinical and Educational Facilities and Resources

A. Facilities

Inpatient beds under the clinical control of neurology are required. It is desirable that neurology patients be cared for in one area to enhance patient care and proper training. Neurology residents should be involved in the care of patients with neurological disorders who require intensive care. There should be adequate outpatient facilities, examining areas, conference rooms, and research laboratories. There should be adequate space for offices for the staff members. Space for study, chart work, and dictation must be available for the residents. There must be adequate contemporary clinical laboratory facilities that report rapidly the results of necessary laboratory evaluations, including chemical, electrophysiological, imaging, and other studies usually associated with neurological services. Adequate chart and record-keeping systems must be in use for patient treatment.

B. Library

Library accessibility is important to a good residency. Because of diversification in the neurological sciences, the library needs are great, covering not only clinical texts, monographs, and journals in clinical neurology but also the basic neurosciences and behavioral sciences. While it may be impossible for a department to maintain a large collection outside a general medical library, essential references must be maintained and be accessible at all times. Library services should include the electronic retrieval of information from medical databases. For multi-institutional programs, residents on rotation at a distance from the general medical library or the department library may find that access to a comprehensive computerized database is adequate during that portion of their training. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

IV. Educational Program

A. Curriculum

1. Patient care, teaching, and research must be present in every training program. It is, therefore, essential that the neurology residency program contain a component of care to patients. This component should be so designed as to ensure a balance between patient care and education that achieves for the trainee an optimal educational experience consistent with the best medical care. Patient care opportunities should include inpatient, outpatient, and consultation experiences.

2. In the program there must be a minimum of 18 months (full-time equivalent) of clinical adult neurology with primary responsibility in patient care.

3. Residents in neurology must have experience with neurological disorders in children under the supervision of a qualified child neurologist. This must consist of a minimum of 3 months (full-time equivalent) in clinical child neurology with primary responsibility in patient care. Particular emphasis should be given to understanding the growth and development of the nervous system.

4. To ensure an appropriate educational environment and prevent an excessive patient load, the program should provide for the following:
   a. Residents should be allowed to spend an average of at least 1 full day out of 7 away from the hospital.
   b. Residents should be assigned on-call duty in the hospital no more than once a week.
   c. There should be adequate physician coverage if unexpected patient care needs create resident fatigue sufficient to jeopardize patient care during on-call periods.

B. Seminars and Conferences

It is highly desirable that trainees attend conferences in the various disciplines. These should include neuropathology, electroencephalography, electromyography, neuroradiology, child neurology, neuroophthalmology, and general neurological conferences. There should be gross and microscopic pathology conferences utilizing recent pathological specimens. Clinical pathological conferences are particularly valuable. It is useful to give increased responsibility for the planning and supervision of the conferences to the trainee. The resident should be kept informed of major developments in both the basic and clinical sciences relating to neurology. This should be accomplished by attendance at periodic seminars, journal clubs, lectures, didactic courses, and meetings of local and national neurological societies.

C. Teaching Rounds

Clinical teaching rounds shall be conducted at appropriate intervals. These rounds must be supervised by staff or faculty. They should occur not less than 3 days per week, although it is highly desirable that they be held on a daily basis. Residents must take an active role in this activity.

D. Clinical and Basic Science Teaching

1. Clinical Science
   a. The resident must have instruction and practical experience in obtaining an orderly and detailed history from the patient, in
conducting a thorough examination (general mental status, neurological, etc.), and in organizing and recording data. The training must include the indications for various laboratory and special diagnostic procedures (e.g., radiological and radioisotope studies, computed tomography, magnetic resonance imaging, electroencephalography, electromyography and nerve conduction studies, psychological testing, and other investigations pertinent to clinical neurology) and their interpretation. The resident must have the opportunity to learn to correlate the information derived from these neurodiagnostic studies with the clinical history and examination in formulating a differential diagnosis and management plan for patients with disorders of the nervous system. Often this is best obtained by participating in and performing laboratory procedures and attending instructional exercises in which clinical correlations with laboratory data are emphasized.

b. The residents must be provided with opportunities to learn the basic principles of psychiatry and to learn about the psychological aspects of the patient-physician relationship and the importance of personal, social, and cultural factors in disease processes and their clinical expression. This should include an opportunity to become familiar with the principles of psychotherapy and psychiatric diagnosis. An opportunity to learn the indications for and complications of drugs used in psychiatry is essential.

c. Residents must be provided with adequate opportunities to learn the basic principles of rehabilitation for neurological disorders. Because large numbers of chronically disabled patients have neurological disorders, it is especially important for the neurologist to have education, training, and experience in the management of such patients. The resident must become familiar with disorders of aging as they affect the nervous system.

2. Basic Science
Residents must be provided with an adequate background in those basic sciences on which clinical neurology is founded. These include neuroanatomy, neuropathology, neurophysiology, neuropsychology, neurochemistry, neuropharmacology, and the application of genetics and epidemiology to neurological disorders. Because it is not possible for residents to spend time in each of these subspecialties within the 3-year period of training, the particular resident's capabilities and needs must be considered. An extensive exposure in one or more of these areas is desirable for each trainee. Didactic courses in basic sciences are necessary to provide an overall review and understanding of the field. A particularly good way for the trainee to review the basic sciences is to participate in the teaching and laboratory supervision of the neuroscience courses that are offered in medical schools.

E. Resident/Patient Ratio
The number of patients must be neither too large nor too small to provide a sound educational program. There is no set rule regarding the number of patients necessary for each resident. It is the program director's responsibility to see to it that the number of patients is appropriate. They must be diversified as to age and sex, short-term and long-term neurologic problems, and inpatients and outpatients.

F. Faculty/Resident Ratio
In general, there should be faculty with diverse interests and skills to make the breadth of teaching appropriate to a program meeting these program requirements, to ensure adequate clinical exposure for residents, and to provide continued interaction (e.g., through seminars, conferences, teaching rounds, and the like) among residents and faculty.

G. Diagnostic Skills
Programs must provide mechanisms for the evolution of increasing responsibility and professional maturation of residents. Early clinical assignments should be based on direct patient responsibility for a limited number of patients. Subsequent assignments must place the resident in a position of taking increased responsibility for patients and into a liaison relationship with staff and referring physicians. Night call is an excellent method of furthering the resident's ability to make clinical judgments in the evaluation and care of patients. In this way the resident matures to a point of eventually assuming full responsibility. Adequate faculty supervision, however, is essential throughout the program. Reserving the hospital consultation services for the later portions of the program when a resident is most experienced is an excellent manner of inducing this responsibility. Neurological training must include assignment on a consultation service to the medical, surgical, obstetrics and gynecology, pediatric, and psychiatry services and their subspecialties, to provide broad exposure to the many neurological complications of systemic diseases. The program must afford residents the opportunity to gain an appreciation of the surgical management of disorders of the nervous system. The existence of a neurosurgical service with close interaction with the neurology service is essential.

H. Experience on Inpatient and Outpatient Services
The importance of inpatient experience is obvious. Clinical neurology can be mastered only at the bedside, in the outpatient clinic, in the staff physician's offices, and in the emergency department. While much of this education will take place through supervised experience in caring for inpatients on the neurology service, a supervised experience in the outpatient clinic also is important. The resident should have individual responsibility, with supervision, for following selected patients with a variety of diagnoses throughout the neurology training.

I. Electives and Subspecialty Experience
While a wide range of clinical experience is mandatory, each resident should be counseled and aided in planning various parts of the program in accordance with individual capabilities and future plans. Clinical assignments need not be identical for each resident. Elective time should accommodate individual interests.

J. Resident and Program Evaluation
Resident evaluation by staff should be made after each rotation so that areas of weakness and strength can be communicated to the resident. Records of resident rotations and performance shall be maintained. Periodic review of the resident's performance is essential for planning his or her subsequent educational program. Residents should have the opportunity to evaluate the program at least annually. The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Written evaluations by residents should be utilized in this process.

K. Resident Participation in Research
Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, training must be conducted in centers by neurology departments in which there is
Program Requirements for Residency Education in Neurology

active research, in both clinical and basic neuroscience. This activity should include:
1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.
2. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.
3. Offering of guidance and technical support (e.g., research design, statistical analysis) for residents involved in research.
4. Provision of support for research opportunities for residents.

L. Resident Responsibility for Teaching
The mixture of neurology residents with medical, neurosurgical, pediatric, and psychiatry residents who may be rotating on the neurology service broadens the educational experience. Teaching of other residents, medical students, nurses, and other health-care personnel, formally or informally, are other important aspects of the resident’s education in neurology.

V. Other
A. Special Training for Child Neurologists
Please refer to the program requirements for accreditation of programs offering training for special qualification in child neurology. Those requirements are a part of the essentials for those training programs applying for the prerogative to educate residents for such special qualification. The core program may achieve or retain accreditation whether or not it has an accredited program in child neurology.

B. Use of Board Examinations
One measure of the quality of a training program is the proportion of its residents who take the examinations of the ABPN and the proportion who pass those examinations.

C. Leave Policy
Each program should develop an equitable leave and vacation policy, in accordance with overall institutional policy.

D. Evaluation
The provisions of the institutional requirements of the ACGME must also be met for approval of a neurology residency training program.

ACGME: June 1992 Effective: July 1995

Program Requirements for Residency Education in Child Neurology

General Information
A. The initial application for a program in child neurology will not require a site visit, but will require submission of all application materials and information, signed by the director of the program in child neurology and cosigned by the directors of the accredited programs in both pediatrics and neurology.
B. Subsequent review of child neurology programs will be in conjunction with the survey and review of the core program in neurology. A separate set of forms still will have to be completed by the child neurology program director. In special cases determined by the Residency Review Committee (RRC), a child neurology program may be surveyed and reviewed separately. The RRC will also entertain interim requests and, on occasion, ask for interim progress reports.
C. The RRC will designate programs as being accredited or not accredited. No further delineation of accreditation categories will be utilized. The accreditation of a program will be directly tied to that of the core. If either core program (neurology or pediatrics) is subsequently accredited on a probationary basis, this is simultaneously a warning to the related child neurology program that accreditation is in jeopardy. Withdrawal of accreditation of either core program will result in a simultaneous loss of accreditation of the child neurology program.
D. If the core programs remain in good standing but the RRC judges the child neurology program to be in noncompliance with the Program Requirements for Residency Education in Child Neurology, a warning will be issued. If these deficiencies are not corrected, accreditation may be withdrawn from the child neurology program. The Procedures for Proposed Adverse Actions and for Appeal of Adverse Actions may be utilized by programs from which accreditation has been withdrawn in an action separate from withdrawal of accreditation of either of the core programs.
E. Inquiries about accreditation of child neurology programs should be directed to the Executive Secretary of the RRC for Neurology.

I. Introduction
A. Duration and Scope of Training
Training in child neurology shall encompass a total of 3 years, which can be initiated following 2 years of residency training in pediatrics in an accredited pediatric residency training program in the United States or Canada. As an alternative to 2 years of residency training in pediatrics, a resident can train in one PG-1 year, as described in the Program Requirements for Residency Education in Neurology.

I. This material constitutes the Program Requirements for Residency Education in Child Neurology. The reader should refer as well to the Program Requirements for Residency Education in Neurology for information on requirements for core programs, to which programs in child neurology must be attached. The reader is also referred to the Institutional Requirements of the Essentials of Accredited Residencies in Graduate Medical Education and to other publications of the Accreditation Council for Graduate Medical Education (ACGME), which outline the composition and function of all Residency Review Committees (RRCs); indicate the actions that any RRC may take, as well as the actions that the ACGME may take; and describe the appeals procedure, types of programs, and the relationships among the RRCs, their parent organizations, and the ACGME.

Requests to have a program accredited to train residents in child neurology (or related inquiries regarding resident programs) should be addressed to Executive Secretary, RRC for Neurology, 515 N State St, Ste 5000, Chicago, IL 60610. All inquiries as to whether a physician is qualified to be examined for certification in neurology with special qualification in child neurology should be addressed to Executive Vice President, American Board of Psychiatry and Neurology (ABPN), 500 Lake Cook Rd, Ste 335, Deerfield, IL 60015.
Section I.A.1, and 1 year of residency training in pediatrics. Another training alternative is 1 year of pediatrics plus 1 year of basic neuroscience training. The program director must review and determine the acceptability of these total 2 years of training. With respect to child neurology training, 1 year of training must be in clinical adult neurology. One year of training shall be referred to as flexible, and the resident must have the opportunity to learn electrodagnostic neurology, neuropathology, neuroradiology, neuro-ophthalmology, psychiatry, and the basic neurosciences. One year of training shall be in clinical child neurology.

B. Objectives
The objective of the total training outlined above is to provide the resident with a learning experience that will ensure that he or she will be competent in the discipline of clinical neurology with special skills in the diagnosis and management of neurological disorders of the newborn infant, early childhood, and adolescence.

C. Program Design
All educational components of a residency program should be related to program goals.
1. The program design and/or structure must be approved by the RRC for Neurology as part of the regular review process.
2. Participation by any institution providing 6 months or more of training in a program must be approved by the RRC.

II. Personnel
The director and teaching staff of a program must prepare and comply with written educational goals for the program. The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director
There must be a single program director responsible for the program.
1. Qualifications of the program director include:
   a. Requisite and documented clinical, educational, and administrative abilities and experience.
   b. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)
   c. Certification by the American Board of Psychiatry and Neurology (ABPN) with Special Qualification in Child Neurology or suitable equivalent qualifications.
   d. Appointment in good standing to the medical staff of an institution participating in the program.

2. Responsibilities of the program director include:
   a. Devotion of sufficient time to provide leadership to the program and supervision of the residents. (It is highly desirable that the director be a full-time faculty member.)
   b. Monitoring the content and ensuring the quality of the program.
   c. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.
   d. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.

   e. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program.
   f. The supervision of residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.
   g. Regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician.
   h. The provision of a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.
   i. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.
   j. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.
   k. Preparation of an accurate statistical and narrative description of the program as requested by the RRC.

B. Teaching Staff
1. There must be a sufficient number of teaching staff with documented qualifications to instruct and supervise adequately all the residents in the program. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities. In addition to the program director, the program providing training in child neurology must have at least one additional physician who has completed training in this specialty. It is highly desirable that he or she be a full-time member of the department/division of child neurology.
2. Staff members should be certified by the ABPN in Neurology with Special Qualification in Child Neurology or possess equivalent qualifications.
3. Staff shall devote sufficient time to the training program to ensure adequate clinical training of the residents in child neurology and will be primarily involved in direction of the residents during their 1 year of clinical child neurology.
4. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a
commitment to their own continuing medical education, and participation in scholarly activities.

5. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

6. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

7. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

C. Other Program Personnel
Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

D. Residents
Programs that fail to recruit any new residents for 4 consecutive years will be subject to adverse action.

III. Clinical and Educational Facilities and Resources

A. Facilities
The department/division of child neurology shall be part of the department of pediatrics and/or the department of neurology. There shall be ample space with desk availability for study, dictation, and chart work by the residents. Outpatient and inpatient areas may be those used by the parent department. The patient record system will be that used by the parent department in which the clinical activities of the department/division take place.

B. Library
1. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.
2. Library services should include the electronic retrieval of information from medical databases.
3. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

IV. Educational Programs

A. Curriculum
Two of the 3 years of the training program are largely clinical experiences on the inpatient and outpatient services. The other "flexible" year must be designed to provide the resident with expertise in the basic neurosciences in addition to electrodagnostic neurology and neuropathology. The specific curriculum during this year will be determined by the responsible services and will be dictated by the method by which these disciplines are taught in the individual institution. The exposure to and experience of the child neurology resident in the basic neurosciences must be equivalent to that of the resident in the core adult neurology program.

B. Seminars and Conferences
It is highly desirable that the child neurology resident attend and take part in the primary teaching conferences directed by the departments of neurology and pediatrics in which the department/division resides. The department/division of child neurology shall also conduct teaching conferences in which the resident must take an active role at appropriate intervals.

C. Teaching Rounds
Clinical rounds shall be conducted at regular intervals during the 1 year of training in clinical child neurology. These rounds must be supervised and directed by the staff or faculty of the child neurology department/division. The resident in child neurology must take an active role in this activity.

D. Clinical and Basic Science Teaching
1. Clinical Science
a. The resident must have instruction and practical experience in obtaining an orderly and detailed history from the patient, in conducting a thorough examination (general mental status, neurological, etc.), and in organizing and recording data. The training must include the indications for various laboratory and special diagnostic procedures (x, radiological and radiographic studies, computed tomography, magnetic resonance imaging, electroencephalography, electromyography and nerve conduction studies, psychological testing, and other investigations pertinent to clinical child neurology) and their interpretation. The resident must have the opportunity to learn to correlate the information derived from these neurodiagnostic studies with the clinical history and examination in formulating a differential diagnosis and management plan for patients with disorders of the nervous system. Often this is best obtained by participating in and performing laboratory procedures and attending instructional exercises in which clinical correlations with laboratory data are emphasized.
b. The residents must be provided with opportunities to learn the basic principles of psychiatry and to learn about the psychological aspects of the patient-physician relationship and the importance of personal, social, and cultural factors in disease processes and their clinical expression. This should include an opportunity to become familiar with the principles of psychopathology and psychiatric diagnosis. An opportunity to learn the indications for and complications of drugs used in psychiatry is essential.
c. Residents must be provided with adequate opportunities to learn the basic principles of rehabilitation for neurological disorders. Because large numbers of chronically disabled patients have neurological disorders, it is especially important for the neurologist to have education, training, and experience in the management of these chronic patients.

2. Basic Science
Residents must be provided with an adequate background in those basic sciences upon which clinical child neurology is founded. These include neuroanatomy, neuropathology, neurophysiology, neuropsychology, neurochemistry, neuropharmacology, and the application of genetics and epidemiology to neurological disorders. Residents should be given the opportunity to acquire familiarity with the principles of psychopathology. Didactic courses in all or some of the basic sciences are necessary to provide an overall review and understanding of the field as it relates to child neurology. A particularly good way for the resident to review the basic sciences is to participate in the teaching and laboratory supervision of the neuroscience courses that are offered in medical schools.
E. Resident/Patient Ratio

1. During the year of training in clinical child neurology, the resident must work in the outpatient clinic on a regular but not necessarily daily basis and also on the inpatient service on the same basis. While the resident-to-patient ratio will vary from time to time, on average, the resident should manage, in supervised fashion, not less than eight outpatients per week during the time period that he or she is assigned to that area. On the inpatient service, the resident should directly manage no fewer than four hospitalized child neurology patients per week, on average. Assignments must be such that the resident is given increasing responsibility for patients, with evident liaison with staff and referring physicians.

2. To ensure an appropriate educational environment and prevent an excessive patient load, the program should provide for the following:
   a. Residents should be allowed to spend an average of at least 1 full day out of 7 away from the hospital.
   b. Residents should be assigned on-call duty in the hospital no more frequently than an average of every third night.
   c. There should be adequate physician coverage if unexpected patient care needs create resident fatigue sufficient to jeopardize patient care during or following on-call periods.

F. Faculty/Resident Ratio

In general, there should be enough faculty with diverse interests and skills to make the breadth of teaching appropriate to a program meeting these program requirements; to ensure adequate clinical exposure for residents; and to provide continued interaction (e.g., through seminars, conferences, teaching rounds, and the like) among residents and faculty.

G. Diagnostic Skills

Programs must provide opportunities for increasing responsibility and professional maturity of residents. Early clinical assignments should be based on direct patient responsibility for a limited number of patients. Subsequent assignments must place the resident in a position of taking increased responsibility for patients and into a liaison relationship with staff and referring physicians. Night call is an excellent method of furthering the resident's ability to make clinical judgments in the evaluation and care of patients. In this way the resident matures to a point of eventually assuming full responsibility. Adequate faculty supervision, however, is essential throughout the program. Reserving the hospital consultation services for the later portions of the program when a resident is most experienced is an excellent manner of inducing this responsibility. Neurological training must include assignment on a consultation service to the medical, surgical, pediatric, and psychiatry services and their subspecialties, to provide broad exposure to the many neurological complications of systemic diseases. The program must afford residents the opportunity to gain an appreciation of the surgical management of disorders of the nervous system. The existence of a neurosurgical service with close interaction with the neurology service is essential.

H. Experience in Outpatient and Inpatient Services

The resident in child neurology shall take part in outpatient activities on a periodic basis and shall be actively involved, with direct faculty supervision, with a wide variety of neurologic problems in infants and children. The outpatient experience must be designed to ensure that the resident will have the opportunity of follow-up care of patients he or she has seen previously. Inpatients with neurologic disorders may be admitted to beds under the direct supervision of the division of child neurology or admitted to beds under the supervision of members of the department of pediatrics or the department of neurology. Night call, including call to the emergency department and neonatal and other intensive care units, is an essential part of the training experience. In any case, the resident in child neurology shall have responsibility, with faculty supervision, in the discussion regarding decisions that pertain to diagnostic approaches and treatment. Such patients must be examined on a daily basis by the child neurology resident with appropriate and periodic notes made by the child neurology resident in the hospital records. Proper patient care must include direct inspection and review of all diagnostic radiologic procedures performed on the patient being followed or attended to by the child neurology resident.

I. Electives and Subspecialty Experience

While a wide range of clinical experience is mandatory, each resident should be counseled and aided in planning various parts of the program in accordance with individual capabilities and future plans. Clinical assignments need not be identical for each resident. Elective time should accommodate individual interests.

J. Resident Evaluation

The program director shall be responsible for the evaluation of the progress of each resident in the child neurology program at intervals of not less than every 6 months and for communicating the evaluation to the resident. This evaluation must incorporate evaluations obtained from faculty in the department of neurology during the resident's rotation on the adult clinical service and flexible experiences, together with evaluations obtained from other faculty in the department/division of child neurology. The residents should have an opportunity to evaluate the program annually. The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Written evaluations by residents should be utilized in this process.

K. Resident Participation in Research and Other Scholarly Activity

The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity, and child neurology training must be conducted in centers where there is active research activity both in clinical and basic neuroscience fields. This activity should include:

1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.
2. Participation in journal clubs and research conferences.
3. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.
4. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.
5. Offering of guidance and technical support (e.g., research design, statistical analysis) for residents involved in research.
6. Provision of support and encouragement for resident participation in scholarly activities.

V. Other

A. Relation to Core Programs

The 3 years of training in child neurology must take place in a center in which there are accredited residency programs in both pediat-
Program Requirements for Residency Education in Child Neurology

Program Requirements for Residency Education in Clinical Neuropophysiology

General Information
A. The initial application for a program in clinical neuropophysiology will not require an on-site survey, but will require submission of all application materials and information signed by the director of the program in clinical neuropophysiology and the director of the accredited program in neurology. The Residency Review Committee (RRC) for Neurology will take initial action based on a “paper review” of the program, namely, a review without survey.

B. Subsequent review of clinical neuropophysiology programs will be in conjunction with the survey and review of the core program in neurology. A separate set of forms will have to be completed by the clinical neuropophysiology program director. In special cases determined by the RRC, a clinical neuropophysiology program will be surveyed and reviewed separately. The RRC will also entertain interim requests and, on occasion, ask for interim progress reports.

C. The RRC will designate programs as being accredited or not accredited. No further delineation of accreditation categories will be utilized. The accreditation of a program will be directly tied to that of the core. If the core program in neurology is subsequently accredited on a probationary basis, this is simultaneously a warning to the related clinical neuropophysiology program that accreditation is in jeopardy. Withdrawal of accreditation of the core program in neurology will result in a simultaneous loss of accreditation of the clinical neuropophysiology program.

D. If the core program remains in good standing but the RRC judges the clinical neuropophysiology program to be in noncompliance with the program requirements for clinical neuropophysiology, a warning will be issued. If these deficiencies are not corrected, accreditation may be withdrawn from the clinical neuropophysiology program. The Procedures for Proposed Adverse Actions and for Appeal of Adverse Actions may be utilized by programs from which accreditation has been withdrawn in an action separate from withdrawal of accreditation of the core program.

E. Inquiries about accreditation of clinical neuropophysiology programs should be directed to the Executive Secretary of the RRC for Neurology.

I. Introduction

A. Definition
Clinical neuropophysiology is an area of medicine in which selected neurologic disorders involving central, peripheral, and autonomic nervous systems and muscles are assessed, monitored, and treated using a combination of clinical evaluation and electrophysiological testing. A derangement of the normal physiology of the nervous system underlies these selected disorders, and an assessment of the electrophysiological abnormalities is an integral part of the evaluation process.

Clinical neuropophysiology requires a detailed knowledge of the normal physiology of the nervous system, the altered abnormal electrophysiology, and the disease states involved. Clinical neuropophysiology is not confined to diagnostic techniques, but includes the application of electrical, magnetic, and mechanical methods to the evaluation and treatment of a wide range of diseases including the epilepsies, demyelinating disorders of the nervous system, stroke, Parkinson’s disease and other movement disorders, sleep disorders, traumatic disorders, congenital and genetic disorders, intracranial mass lesions, and degenerative diseases. Another application of increasing importance is the use of intraoperative monitoring to guide surgical interventions.

B. Duration and Scope of Training
Training in neuropophysiology shall encompass a total of 1 year, which must be preceded by the completion of a residency program in neurology, child neurology, general psychiatry, or physical medicine and rehabilitation accredited in the United States. The training must be separate and distinct from all training required for certification in neurology, child neurology, general psychiatry, or physical medicine and rehabilitation. The 1 year in clinical neuropophysiology should be in a program that provides training in the broad area of clinical neuropophysiology. The training should cover this broad area and include extensive experience in one or more of the following: evoked potential studies, motor and sensory nerve conduction studies, diagnostic electromyography, single fiber electromyography, electrodiagnostic movement disorder assessment, electroencephalography, testing of motor and sensory reflexes, polysomnography, and testing of autonomic function.

C. Objective
The objective of the total training outlined above is to provide the resident with the opportunity to develop the expertise necessary to evaluate and manage patients using the procedures and techniques of clinical neuropophysiology.

D. Program Design
All educational components of a residency program should be related to program goals.
1. The program design and/or structure must be approved by the RRC for Neurology as part of the regular review process.
2. Participation by any institution providing 2 months or more of training in a program must be approved by the RRC.

II. Personnel
The director and teaching staff of a program must prepare and comply with written educational goals for the program. The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director
There must be a single program director responsible for the program.
1. Qualifications of the program director include:
   a. Requisite and documented clinical, educational, and administrative abilities and experience.
   b. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)
c. Certification by the American Board of Psychiatry and Neurology (ABPN) with Special Qualification in Clinical Neurophysiology or suitable equivalent qualifications, as determined by the RRC.
d. Appointment in good standing to the medical staff of an institution participating in the program.
2. Responsibilities of the program director include:
a. Devotion of sufficient time to provide leadership to the program and supervision of the residents in the program. (It is highly desirable that the director be a full-time faculty member.)
b. Monitoring the content and ensuring the quality of the program.
c. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.
d. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.
e. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program.
f. The supervision of residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.
g. Regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician.
   The program director, with participation of members of the teaching staff, shall:
1. At least semiannually evaluate the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures.
2. Communicate each evaluation to the resident in a timely manner.
3. Advance residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.
4. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.
b. The provision of a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.
i. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.
j. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.
k. Preparation of an accurate statistical and narrative description of the program, as requested by the RRC.

B. Teaching Staff
1. There must be a sufficient number of teaching staff with documented qualifications to instruct and supervise adequately all the residents in the program. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities. The program providing training in clinical neurophysiology must have at least two faculty neurologists, including the director, who have completed training in this subspecialty. It is desirable that they be full-time members of the Department of Neurology.
2. Each of these members of the teaching staff should be certified by the ABPN with ABPN-added qualifications in clinical neurophysiology or possess suitable equivalent qualifications.
3. Expertise in the areas of electroencephalography, evoked potentials, nerve conduction studies, and electromyography must be represented among the director and the faculty. The RRC recognizes that expertise in clinical neurophysiology is available from physicians who are board certified in many medical specialties, particularly physical medicine and rehabilitation, anesthesia, internal medicine, and psychiatry, and actively encourages multidisciplinary cooperation in the training of residents.
4. The faculty shall devote sufficient time to the training program to ensure adequate clinical training of the resident in clinical neurophysiology and will be primarily involved in direction of the resident during the 1-year training.
5. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.
6. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.
7. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.
8. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

C. Other Teaching Staff
In addition, faculty with suitable training and experience from other disciplines may be included in the teaching program.

D. Other Program Personnel
Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

E. Residents
Programs that fail to recruit any new residents for 2 consecutive years will be subject to adverse action.
III. Clinical and Educational Facilities and Resources

A. Facilities
The section of clinical neurophysiology shall be within the Department or Division of Neurology and have facilities adequate for the educational program.

B. Library
1. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.
2. Library services should include the electronic retrieval of information from medical databases.
3. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

IV. Educational Programs

A. Curriculum
The training program is largely a clinical experience in which the resident develops and executes a plan of evaluation and treatment, including the appropriate technical skills to deal with patients with various neurological disorders.

B. Seminars and Conferences
The section of clinical neurophysiology shall conduct formal lectures and teaching conferences, including but not limited to electroencephalography, polysomnography, electromyography, nerve conduction studies, auditory evoked potentials, visual evoked potentials, somatosensory evoked potentials, motor evoked potentials, autonomic function studies, and monitoring of neural function during surgery. These must include clinical applications for relevance to underlying disease. The clinical neurophysiology resident must participate actively on a weekly basis in the primary teaching conferences directed by the Department of Neurology in which the section resides. Participation in clinical conferences dealing with epilepsy and neuromuscular disorders is of particular importance. The resident in clinical neurophysiology must have the opportunity to develop competencies in these areas.

C. Teaching and Supervision
Supervisory faculty and staff must be available on a full-time basis. The resident in clinical neurophysiology shall take an active role in the teaching and training of neurology residents in the Department of Neurology in which the section resides.

D. Clinical and Basic Science Teaching
1. Clinical Science
The resident must have instruction and practical experience to permit him or her to develop diagnostic, procedural, technical, and interventionals skills essential to the performance of clinical neurophysiology. The clinical experience must include opportunities to observe, evaluate, and manage patients of all ages with a wide variety of disorders of the nervous system and muscles, as well as to learn the effectiveness of the procedures. It should provide for basic and advanced training and education, as well as professional development. Clinical experience must include inpatient care, outpatient care, and support services in the fields of pathology, radiology, and engineering. Examples of clinical problems that should be included in the experience of the resident for the development of knowledge and skills specific to clinical neurophysiology include but are not limited to epilepsy, neuromuscular diseases, trauma and its sequelae, congenital and developmental disorders, sleep disorders, infections, metabolic disorders, neoplasia, vascular disorders, and degenerative diseases. There should be experience in the development and execution of a plan of evaluation and treatment, including the appropriate technical skills to deal with patients with the above disorders.

Experience should include training in each of the following:

a. Visual evoked potentials, auditory evoked potentials, somatosensory evoked potentials
b. Motor and sensory nerve conduction studies
c. Diagnostic electromyography and single fiber electromyography
d. Electrodiagnostic movement disorder assessment
e. Electroencephalography
f. Testing of motor and sensory reflexes
g. Testing of autonomic function
h. Polysomnography

The resident's experience should include independent studies of a sufficient number of patients to achieve competence in the assessment of patients with a wide range of clinical disorders.

2. Basic Science
Residents must be provided with an advanced and extensive background in those basic sciences on which clinical neurophysiology is founded. These include neurophysiology, neuroanatomy, neuropharmacology, and neuropathology. Didactic lectures and seminars in all or some of the basic sciences are necessary to provide an overall review and understanding of the field as it relates to clinical neurophysiology. A particularly good way for the resident to review the basic sciences is to participate in the teaching and laboratory supervision of the neuroscience courses that are offered in medical schools.

E. Resident/Patient Ratio
The number of patients must be adequate to provide a sound educational program. It is the program director's responsibility to ensure that the number of patients is appropriate. Patients must be diversified in terms of age, sex, short-term and long-term neurological problems, and inpatients and outpatients. The patients available to the resident must not interfere with the training of residents in the core neurology training program.

F. Faculty/Resident Ratio
In general, there should be enough faculty with diverse interests and skills to make the breadth of training appropriate to a program meeting these program requirements; to ensure adequate clinical experience for residents; and to provide continued interaction (eg, through seminars, conferences, clinical supervision) among residents and faculty.

G. Diagnostic Skills
Clinical assignments should include progressively increasing responsibility for patient care with direct supervision by the appropriate faculty member or staff. Adequate faculty supervision is essential throughout the program.

H. Subspecialty Experience
While a wide range of clinical experience is mandatory, each resident should have extensive experience in one or more areas of clinical neurophysiology. Clinical assignments need not be identical for each resident. Subspecialty experience should accommodate individual interests.
I. Resident Evaluation

Resident evaluation by staff should be made at regular intervals so that areas of weakness and strength can be communicated to the resident. Records shall be maintained documenting resident experience and performance. Periodic review of the resident's performance is essential for planning his or her subsequent educational program. The evaluation will include judging the fund of knowledge, basic clinical competence, general skills in the primary specialty, and specific technical skills required for clinical neurophysiology. The summary and final evaluation of the resident in clinical neurophysiology should be prepared by the program director of the clinical neurophysiology training program and should reflect the periodic evaluation of all the faculty. Each resident should be required to be proficient in the technical skills determined to be necessary for a clinical neurophysiologist and any related standards relevant to neurology. The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Written evaluations by residents should be utilized in this process.

J. Resident Participation in Research

The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity, and clinical neurophysiology training must be conducted in centers where there is research in clinical neurophysiology. The program should include opportunities for the resident to participate in clinical and basic research projects relating to the field of clinical neurophysiology. This activity should include:

1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.

2. Participation in journal clubs and research conferences.

3. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.

4. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.

5. Offering of guidance and technical support (eg, research design, statistical analysis) for residents involved in research.

6. Provision of support and encouragement for resident participation in scholarly activities.

K. Resident Responsibility

The resident's education in clinical neurophysiology is reinforced by teaching the discipline to other residents in neurology and other disciplines, medical students, nurses, and other health-care personnel. Residents must be given this opportunity.

L. Resident Duty Hours

To ensure an appropriate educational environment and prevent an excessive patient load, the program should provide for the following:

1. Residents should be allowed to spend an average of at least 1 full day out of 7 away from the hospital.

2. Residents should be assigned on-call duty in the hospital no more frequently than an average of every third night.

3. There should be adequate physician coverage if unexpected patient care needs create resident fatigue sufficient to jeopardize patient care during or following on-call periods.

V. Other

A. Relation to Core Program

The 1 year of training in clinical neurophysiology must take place in a center in which there is an accredited residency program in neurology and with the written approval and support of the director of the neurology program.

B. Use of Board Examinations

One measure of the quality of a training program is the proportion of its graduates who take the examination for added qualifications in clinical neurophysiology provided by the American Board of Psychiatry and Neurology, as well as their performance on such examinations.

C. Evaluation of the Program

The provisions of the Institutional Requirements for residency training of the Accreditation Council for Graduate Medical Education must also be met for approval of training in clinical neurophysiology.

ACGME: September 1994 Effective: September 1994

Program Requirements for Residency Education in Nuclear Medicine

I. Introduction

Nuclear medicine is the clinical and laboratory medical specialty that employs for diagnosis, therapy, and research the nuclear properties of radioactive and stable nuclides to evaluate metabolic, physiologic, and pathologic conditions of the body.

Residents in nuclear medicine must teach the basic skills and knowledge that constitute the foundations of nuclear medicine practice and must provide progressive responsibility for and experience in the application of these principles to the management of clinical problems. It is expected that the resident will develop a satisfactory level of clinical maturity, judgment, and technical skill that will, on completion of the program, render the resident capable of independent practice of nuclear medicine.

The director and teaching staff of a program must prepare and comply with written educational goals for the program. All educational components of a residency program should be related to program goals. The program design and/or structure must be approved by the Residency Review Committee (RRC) for Nuclear Medicine as part of the regular review process.

A. Training Period

Three years of residency training is considered necessary to train a physician in the specialty of nuclear medicine. Residents must complete in a satisfactory manner a 2-year residency training program in nuclear medicine that must be preceded by at least 1 year of satisfactory preparatory residency training in an Accreditation Council for Graduate Medical Education (ACGME)-accredited program that provides broad experience in clinical medicine, in which the primary emphasis is on the patient and the patient's clinical problems. Residents should have a sufficiently broad knowledge of medicine to obtain a pertinent history, perform an appropriate physical examination, and arrive at a differential diagnosis.

B. Scope of Training

The residency program in nuclear medicine should include the diagnostic, therapeutic, and investigational uses of radionuclides. It should be of sufficient breadth to ensure that all residents become
thoroughly acquainted with current nuclear medicine diagnostic and therapeutic applications. The training experience should ensure ample opportunity to attain competence in selecting the most appropriate nuclear medicine studies for the patient, performing these studies in the technically correct manner, interpreting the information obtained, correlating this information with other diagnostic studies, and treating and following up the patient who receives radionuclide therapy. Under adequate faculty supervision, the resident should participate directly in the performance of imaging studies, nonimaging measurements and assays, and therapeutic procedures.

II. Program Personnel

The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director

Qualifications: There must be a single program director responsible for the program. The qualifications of the program director include requisite and documented clinical, educational, and administrative abilities and experience. The program director must be certified by the American Board of Nuclear Medicine or possess suitable equivalent qualifications. She or he must have an appointment in good standing to the medical staff of an institution participating in the program and must be licensed to practice in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.) A complete curriculum vitae of the program director shall be filed with the executive secretary of the RRC at the time of appointment and updated with each review of the program by the RRC.

Responsibilities of the program director include:

1. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.
2. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.
3. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program.
4. The supervision of residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.
5. Regular evaluation of residents’ knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician.
6. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.
7. Provision of notice to the secretary of the RRC of any changes, as they occur, that might significantly alter the educational experience, such as a change in program director, a change in key faculty members, change in institutional affiliation, or a change in the number of residency positions offered.
8. Preparation of an accurate statistical and narrative description of the program as requested by the RRC.

B. Teaching Staff

The faculty who participate in the program must be qualified nuclear medicine physicians and basic scientists. The number of nuclear medicine faculty and the size of the technologist staff must be large enough to carry out the workload of the facility as well as the responsibilities of the teaching program. The ratio of faculty to residents shall be sufficient to ensure adequate clinical supervision of residents at all times and to provide teaching of the clinical and basic sciences.

All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.

A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

C. Other Program Personnel

Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

III. Resources

A. Institutional Sponsor

A residency program in nuclear medicine must have a single parent institution. Affiliations with other hospitals should be based on the value of such affiliation to the training program as a whole. Service or patient care responsibility alone at a participating institution does not constitute a suitable educational experience. Affiliation should be avoided with hospitals that are at such a distance from the parent institution as to make resident attendance at rounds and conferences impractical, unless there is a comparable educational experience at the affiliated hospital. Participation by any institution providing more than three months of training must be approved by the RRC.

B. Other Specialties

A nuclear medicine residency program requires the actual support of services in other specialties, notably medicine, surgery, radiology, and pathology. There should be other residency programs to provide an opportunity for interaction among residents in the various medical disciplines. Training resources should be such that the total number of residents in the institution is large enough to permit intellectual exchange with residents in the nuclear medicine program.

C. Facilities

The program must provide adequate space, equipment, and other pertinent facilities to ensure an effective educational experience for residents in nuclear medicine, taking into account the modern facilities and equipment required to practice nuclear medicine.

D. Library

Residents must have ready access to a major medical library with a representative selection of books and journals related to nuclear medicine, either at the institution where the residents are located or through arrangement with convenient nearby institutions. Library services should include the electronic retrieval of information from medical databases. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries
and/or collections of texts and journals must be readily available during nights and weekends.

E. Patient Population and Procedures
The institution sponsoring a residency program in nuclear medicine should be of such size and composition as to provide an adequate volume and variety of patients for resident training.

While the number of procedures may vary from one training program to another, a well-designed program will ensure resident involvement in at least 4,000 nuclear medicine imaging procedures annually, a wide variety of imaging procedures to include in vivo kinetic and body composition procedures, and at least 20 radionuclide therapeutic procedures. Imaging procedures should be distributed over the entire spectrum of nuclear medicine practice, including the pediatric age group. An approximate minimum of 200 pediatric nuclear medicine cases should be available over a 2-year period. Resident rotations to hospitals with a large pediatric caseload should be considered if the number of pediatric studies in the parent institution is fewer than 200 averaged over 2 years. Limited outside rotations may be utilized to supplement training in any other branch of nuclear medicine if there is not sufficient patient volume in the parent hospital.

IV. Training Objectives
The program must be structured so that the resident’s clinical responsibilities increase progressively during training. At the completion of the training program, residents should be able to plan and perform appropriate nuclear medicine procedures, to interpret the results, and to make an appropriate differential diagnosis. They should be qualified to recommend therapy or further studies. If radionuclide therapy is indicated, they should be capable of assuming responsibility for patient care.

V. Educational Program
A. Components
The training program must provide educational experience in the following areas:


2. Instrumentation: principles of instrumentation used in detection, measurement, and imaging of radioactivity with special emphasis on gamma cameras, including single photon and positron emission tomographic devices, and associated electronic instrumentation and computers employed in image production and display.

3. Mathematics, statistics, and computer sciences: probability distributions; medical decision making; basic aspects of computer structure, function, programming, and processing; applications of mathematics to tracer kinetics, compartmental modeling; and quantification of physiologic processes.

4. Radiation biology and protection: biological effects of ionizing radiation, means of reducing radiation exposure, calculation of the radiation dose, evaluation of radiation overexposure, medical management of persons overexposed to ionizing radiation, management and disposal of radioactive substances, and establishment of radiation safety programs in accordance with federal and state regulations.

5. Radiopharmaceuticals: reactor, cyclotron, and generator production of radionuclides; radiochemistry; pharmacokinetics; and formulation of radiopharmaceuticals.

6. Diagnostic use of radiopharmaceuticals: clinical indications, technical performance, and interpretation of in vivo imaging of the body organs and systems using radiopharmaceuticals, including use of external detectors and scintillation cameras, including single photon tomography, and, where available, positron emission tomography; exercise and pharmacologic stress testing, including the pharmacology of cardiovascular drugs; physiologic gating techniques; patient monitoring during interventional procedures; management of cardiac emergencies, including electrocardiographic interpretation and cardiopulmonary life support; and correlation of nuclear medicine procedures with other pertinent imaging modalities such as angiography, computed tomography, ultrasonography, and nuclear magnetic resonance imaging.

7. Nonimaging studies: training and experience in the application of a variety of nonimaging procedures, including instruction in the principles of immunology, radioimmunoassay and receptor assay technology; preparation of radiolabeled antibodies; radiopharmaceutical absorption, excretion, and dilution studies; cellular kinetics; and measurement of organ function.

8. Therapeutic uses of sealed radiopharmaceuticals: patient selection and management, including dose administration and dosimetry, radiation toxicity, and radiation protection considerations in the treatment of metastatic cancer and bone pain, primary neoplasms, solid tumors, and malignant effusions; and the treatment of hematologic and metabolic disorders.


B. Didactic Instruction
Didactic instruction for both imaging and nonimaging applications must be well organized, thoughtfully integrated, and carried out on a regularly scheduled basis. Exposure to the basic sciences should not be limited to didactic instruction. The resident’s activities also should include laboratory experience and regular contact with basic scientists in their clinical adjunctive roles. At least 200 hours should be devoted to basic science instruction.

C. Conferences
All residents must participate in regularly scheduled clinical conferences, including interdisciplinary conferences, in which the resident is responsible for presenting case materials and discussing the relevant theoretical and practical issues. There should be active resident participation in well-structured seminars that review the pertinent literature with respect to current clinical problems and that include discussion of additional topics to supplement the didactic curriculum.

D. Teaching Files
Teaching case files involving diagnostic and therapeutic nuclear medicine procedures should cover the full spectrum of clinical applications; they should be indexed, coded with cumulative and follow-up data, and readily accessible for resident use. There must be a mechanism for maintaining case records and treatment results to facilitate patient follow-up and to provide teaching material.

VI. Duty Hours
The practice of nuclear medicine requires 24-hour physician availability. Duty hours and night and weekend call for residents must reflect the concept of responsibility for patients and must provide for adequate patient care. Residents must not be required to regularly perform unduly prolonged duties. However, in no case should the resident go off duty until the proper care and welfare of the patient have been ensured. All residents should have the opportunity to spend an average of 1 full day out of 7 free of hospital duties and should be assigned on-call duty in the hospital no more frequently than, on average, every third night. It is the responsibility of the program director to ensure assignment of reasonable in-hospital and on-call duty hours.
Program Requirements for Residency Education in Nuclear Medicine

Resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction, should be monitored. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.

VII. Program Research and Scholarly Activity
Graduate medical education must take place in an environment of inquiry and scholarship, in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:
1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.
2. Participation in journal clubs and research conferences.
3. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.
4. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.
5. Offering of guidance and technical support (e.g., research design, statistical analysis) for residents involved in research.

VIII. Evaluation
Resident evaluation should be carried out at least every 4 to 6 months and should concern itself with intellectual abilities, technical skills, attitudes, and interpersonal relationships. Observation of the resident performing specific tasks, such as image interpretation, taking a history and performing a physical examination, choosing diagnostic studies, formulating patient management, and communicating effectively, should be included. There must be provision for appropriate and timely feedback of the content of these evaluations to the resident. Residents should be advanced to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth. The program must maintain a permanent record of the evaluation and counseling process for each resident. Such records must be accessible to the resident and other authorized personnel.

The program director must provide a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.

Residents should also be given the opportunity to evaluate the faculty and the program at least annually.

The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Written evaluations by residents should be utilized in this process. The teaching staff should also periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

IX. Additional Information
Programs that fail to recruit residents for at least 2 consecutive years will be subject to withdrawal of accreditation.
Residents who plan to seek certification by the American Board of Nuclear Medicine should communicate with the office of that board regarding the requirements for certification.
ACGME: February 1993 Effective: July 1995

Program Requirements for Residency Education in Obstetrics and Gynecology

I. Introduction
A. Program Goals
A residency program in obstetrics-gynecology must constitute a structured educational experience, planned in continuity with undergraduate and continuing medical education, in the health-care area encompassed by this specialty. While such residency programs contain a patient service component, they must be designed to provide education as a first priority and not function primarily to provide hospital service.

An educational program in obstetrics-gynecology must provide an opportunity for resident physicians to achieve the knowledge, skills, and attitudes essential to the practice of obstetrics and gynecology and provide opportunity for increasing responsibility, appropriate supervision, formal instruction, critical evaluation, and counseling for the resident.

B. Program Design
All educational components of a residency program should be related to program goals.
1. The program design and/or structure must be approved by the Residency Review Committee (RRC) for Obstetrics-Gynecology as part of the regular review process.
2. Participation by any institution providing 6 months or more of training in a program of 3 or more years must be approved by the RRC.

II. Institutions
A. Administration
The administration of the sponsoring institution must demonstrate a commitment to educational and scholarly activities by meeting all provisions of the Institutional Requirements of the Essentials for Accredited Residencies in Graduate Medical Education for approval of a residency program.

B. Participating Institutions
The RRC for Obstetrics-Gynecology, for the purpose of monitoring the structure of residencies, uses the following categories. In all cases, where more than one institution is involved, a formal written agreement must be developed between the responsible administrative bodies of those institutions.
1. Independent—An independent program is conducted within a single educational institution under a single program director.
Extramural rotations for a total of no more than 6 months are permitted under the regulations applied to all programs (see below).

2. Integrated—An integrated program is conducted within multiple educational institutions but under a single program director. Each educational institution must have the overall quality and level of supervision and the educational requirements demanded of an independent program. The residents may rotate at any level, including the final senior resident year. The program director must have authority over the educational program in each hospital, including the appointments and assignments of all teaching staff and all residents, and must ensure the uniformity of the educational experience for each resident. Additional extramural rotations for a total of no more than 6 months are permitted under the regulations applied to all programs (see below). If a program includes rotations for a total of more than 6 months for any resident at institutions other than those included in the integrated program, that program becomes an affiliated program.

3. Affiliated—An affiliated program is one in which any resident spends a total of more than 6 months in extramural rotations outside the parent institution (or institutions, in the case of integrated programs).

Extramural rotations may be arranged by the program director of either an independent or integrated program to enhance the educational experience of the residents. Only under exceptional circumstances, and with written prior approval of the RRC, may they be included in the final senior resident year. Residents are appointed by their parent program and assigned by it to the affiliated hospitals, where they may spend no more than one-third of the total residency and no more than 12 months in obstetrics-gynecology. Two types of extramural rotations may be considered:

a. If the total time of extramural rotation from the parent program by any resident during the entire residency exceeds 6 months, the program is considered to be an affiliated program and the entire program must receive prior approval by the RRC.

b. Rotations for a total of 6 months or less will not require that the program be designated as an affiliated program, and these rotations may be arranged by the program director without prior RRC approval.

C. Faculty

Each program must have a dedicated program director with an interested and competent teaching faculty sufficient in number and quality to be able to supervise and instruct the residents at all levels and in all of the practice areas of specialty. The director and teaching staff of a program must prepare and comply with written educational goals for the program. The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

1. Program Director

There must be a single program director responsible for the program.

a. Qualifications of the program director include:

1. Being a highly qualified member of the department with substantial experience in education in obstetrics and gynecology who must provide a significant commitment of time and effort to the residency program, demonstrate the ability to organize and direct the teaching program, and maintain a quality teaching staff.

2. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)

3. Certification by the American Board of Obstetrics-Gynecology or suitable equivalent qualifications.

4. Appointment in good standing to the medical staff of an institution participating in the program.

5. A reasonable tenure of office to ensure continuity of teaching efforts and departmental policy. The RRC must be notified of any change of program directors.

b. Responsibilities of the program director include:

1. Clearly defined assignment of responsibilities for resident education, including preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.

2. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.

3. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program.

4. The supervision of residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.

5. Regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician.

The program director, with participation of members of the teaching staff, shall:

a. At least semiannually evaluate the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures.

b. Communicate each evaluation to the resident in a timely manner.

c. Advise residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.

d. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.

6. Verification that residents have satisfactorily completed the program and provision of a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.

7. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.

8. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support.
services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.
9. Providing complete and accurate program information forms, including data concerning resident experience, to the RRC, so that a proper assessment of the program can be made.
10. Specific responsibility for all communications with the RRC and reporting of any major change in the residency program.

2. Attending Faculty
   a. An obstetrics-gynecology education program must have a sufficient number of attending staff with professional ability, enthusiasm, dedication, and a sense of responsibility for teaching residents. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities. It would be well for the staff to regard these attributes as a prerequisite to active faculty membership and promotion.
   b. It is desirable that the chief of service of the department be a diplomate of the American Board of Obstetrics-Gynecology.
   c. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.
   d. A member of the teaching staff of each participating institution must be designated to assume responsibility for the daily activities of the program at that institution, with overall coordination by the program director.
   e. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.
   f. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents. The teaching performance of the faculty must be reviewed at least annually.

3. Other Program Personnel
   Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

D. Scholarly Environment
   Documentation of scholarly activity on the part of the program and the faculty must be submitted at the time of program review. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad, ongoing involvement in scholarly activity. This activity should include:
   1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.
   2. Participation in journal clubs and research conferences.
   3. Participation in regional or national professional societies.
   4. Presentation and/or publication of studies.
   5. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.
   6. Offering of guidance and technical support (e.g., research design, statistical analysis) for residents involved in research.
   7. Provision of support for resident participation in scholarly activities.

E. Facilities
   1. Outpatient Facilities
      Because obstetricians-gynecologists function as providers of comprehensive care for women, experience in the care of ambulatory patients is essential in education programs. Because many of the patient problems seen in the hospital outpatient department are comparable to those seen in office practice, it is essential to provide a closely supervised experience in an active ambulatory setting that also ensures continuity of care for patients by the individual resident.
      Increasing responsibility should be given to the resident under the conscientious supervision of a qualified attending staff member.
   2. Inpatient Facilities
      Appropriate inpatient facilities must be available for achievement of educational objectives.
   3. Medical Records
      The fundamentals of good medical history taking and thoughtful, meticulous physical examination must be taught. Information gained by these procedures must be carefully recorded in the medical record. A reliable measure of the quality of a program is the quality of hospital records. These records should include daily appropriate progress notes by residents, together with a discharge summary. The hospital should maintain a record room with adequate cross-indexing and ready reference for study of patients’ charts. Periodic summaries of department statistics are essential for the evaluation of results and usually will be requested at the time a program is reviewed by the RRC.
   4. Medical Library
      The medical library is an important resource in the obstetrics-gynecology education program. The library need be sponsored by the hospital or the department, but it must be readily accessible to staff and residents, both during the day and in the evening, including weekends. In addition, there must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in the residency program. The textbooks should be kept up to date, and there should be an ample supply of current journals devoted to obstetrics-gynecology and related subjects. When a comprehensive library is not available in the hospital, an active reference system should be provided through ready access to larger medical libraries. Programs must provide instruction in retrieval and assessment of medical literature, and library services should include the electronic retrieval of information from medical databases.
   5. Residents’ Facilities
      Adequate facilities for residents to carry out their patient care and personal educational responsibilities are required. These include adequate on-call, lounge, and food facilities for residents while on duty and on call. Also required are clinical support services such as pathology and radiology, including laboratory and radiologic information retrieval systems that allow rapid access to results, and intravenous services, phlebotomy services, and messenger/transporter services in sufficient number to meet reasonable demands at all times.
F. Other Graduate Medical Education Programs
The program must exist in an educational environment that includes other relevant graduate medical education programs, such as internal medicine, pediatrics, surgery, and family practice.

III. Curriculum

A. General

1. Organization and Structure
   Resident education in obstetrics-gynecology consists of 4 years of accredited, clinically oriented graduate medical education, of which at least 3 years must be entirely in the specialty of obstetrics-gynecology. Residency programs preceded by a year of education sponsored by the program may contain more residents in that year than the number approved for each year of specialty education. Residency programs may, therefore, be of 3 or 4 years' duration, but programs of different lengths or quality in the same institution will not be approved.

   A program director, under suitable circumstances, may elect to credit a resident with a period of graduate education in obstetrics and gynecology gained by the resident before entering the program. The period of education must have been of 4 or more months' duration and must have been received in a hospital conducting a currently accredited residency in obstetrics-gynecology. This time may then be used to provide time, within the 36 months of obstetrics-gynecology, for appropriate electives on other clinical services. It may not be used to shorten the total length of the residency program.

   Programs differ widely in the types of experience they offer to physicians entering the first year of graduate education. Many programs include rotations to other clinical services, such as medicine, surgery, or neonatology. Other programs, however, offer predominantly experience in obstetrics-gynecology but may provide elective time later in the residency for rotations to other clinical services.

   The specific definition given to the first year of graduate education, as described in the institutional requirements, depends on the content of the education and the administrative structure developed for implementing and supervising the experience.

   The RRC has the responsibility for the review of all graduate education programs in obstetrics-gynecology seeking accreditation. If a program includes sponsorship of a first graduate year experience, then the RRC has the responsibility for review of that first graduate year.

   Forms, teaching activities in obstetrics-gynecology should be structured and regularly scheduled. They should generally consist of patient rounds, case conferences, journal clubs, and coverage of appropriate basic sciences pertinent to the specialty. In cross-disciplinary conferences such as perinatology, appropriate physicians from other specialties should be invited to participate.

   The patient population available to the education program should provide a variety of operative experience in obstetrics-gynecology. While the quality of the surgical experience in a hospital is more important than the actual number of cases, and while there is great value to a resident in acting as an assistant to a skilled and experienced obstetrician-gynecologist, it also is essential that the resident gain experience in management of patients by personal evaluation of the signs and symptoms and the physical and laboratory findings leading to a diagnosis and decision for therapy as well as by the performance of technical procedures. An acceptable residency program in obstetrics-gynecology must be able to provide substantial, diverse, and appropriate surgical experience after the residents have mastered the basic skills.

Every program, to be accredited, must have a written statement of the educational objectives for the residents in that program. One example of such objectives is set forth in the current "Educational Objectives for Residents in Obstetrics and Gynecology," produced under the auspices of The Council on Residency Education in Obstetrics and Gynecology (CREOG). Directors of the programs must be able to document that they are reviewing the implementation of the educational objectives and that the residents are indeed accomplishing what is anticipated of them. Any program that does not establish a system that clearly demonstrates that each resident has or has not successfully accomplished each of the items indicated in the program's statement of educational aims and objectives cannot be considered to be an adequate program.

It is not essential or desirable that all education programs be identical in structure or function. It is, however, mandatory that each residency program provide quality education and experience for each of the residents completing the program.

2. Resident Numbers

   The number of residents that can be adequately and responsibly educated depends on several interrelated factors. Clinical involvement alone does not constitute an educational experience. The provision of adequate supervision, education, individual evaluation, and administrative support is critical. With this, it is of utmost importance that each resident have sufficient independent operative and clinical responsibilities to prepare for practice in the specialty.

   The maximum number of residents in a program is linked to the number that can be accommodated within the framework of these requirements. Because one of the most important considerations is the clinical experience available to give each resident adequate primary responsibility, and because this usually centers on the senior resident year, the maximum number of residents in a program depends on how many senior residents the program can educate. Usually the maximum number of residents in a program is the number of senior residents the program can accommodate multiplied by three or four; depending on the length of the program.

   The minimum number of residents in an accredited program is two per year. Accreditation is granted on the basis of a balance between the educational resources and the number of residents in the program. The appointment of residents in excess of the approved number may adversely affect the quality of the total experience of each resident. Therefore, changes in the educational resources should be reported to the RRC, and proposed increases in the number of residents must first be approved in writing by the RRC.

   All requests for a change in the number of residents must demonstrate a distinct and substantial improvement in the educational opportunities for all residents in the program. Such requests must be based not only on the availability of an adequate patient population but also on adequate resources for supervision, education, and evaluation. A request for a change in the number of residents must describe the impact of total experience on each of the senior residents under the new circumstances. The request will be considered incomplete if it lists only expansion in beds, hospitals, or overall clinical experience and does not address the question of expansion of faculty and administrative support necessary to teach, supervise, and evaluate the additional residents. Conversely, a reduction in beds or hospitals, or other changes in the program that may lead to an anticipated decrease in total experience for the residents, must be promptly called to the attention of the RRC to determine if a reduction in
the number of resident positions in a given graduate medical pro-
gram is necessary.

3. Other Residents and Trainees

The number of residents from other graduate medical educa-
tion programs in any specialty who are assigned to the obstetrics-
gynecology residency should not be so large as to compromise the
educational resources of the obstetrics-gynecology residency.

For those residency programs associated with postresidency
fellowships, the education of fellows must not compromise the ex-
erience of residents.

4. Patient Responsibility/Supervision

Supervision of residents in obstetrics and gynecology is
required to ensure proper (a) education, (b) quality of care,
(c) patient safety, and (d) fulfillment of responsibility of the at-
tending physicians to their patients. These considerations must
be integrated with the goal of independent competence in the
full range of obstetrics and gynecology at the completion of resi-
dency. This implies a graduated and increasing level of inde-
pendent resident action that is complete at the end of residency.
Each program director must balance quality assurance for pa-

tient care, resident education, and independent resident action.
The level of resident supervision should be commensurate with
the amount of independent function that is designated at each
resident level. Residents, as well as faculty, may provide
supervision.

On an obstetrics and gynecology service, adequate supervision
requires the 24-hour presence of faculty in the hospital. Faculty
must be immediately available to the resident if clinical activity
is taking place in the operating rooms and/or labor and delivery
areas. Faculty must be within easy walking distance of patient
care units. Clinical services provided in ambulatory (office)
locations require on-site supervision. Open and generously used
lines of two-way communication are important and should be
encouraged.

If the program director judges that the size and nature of pa-
tient population do not require the 24-hour presence of faculty,
this situation must be carefully defined and reviewed and should
include information about the nature of the hospital, the patient
population, the nature of attending staff, and the geographic and

climatic situations.

Supervision of residents is a responsibility of the program
director and teaching staff. It is the responsibility of the institu-
tion sponsoring a residency program to establish oversight to
ensure that programs meet the supervisory provisions of these
requirements.

5. Graded Responsibility

Complete management of a patient's care under adequate super-
vision should be considered the highest level of training. There
are, however, circumstances under which the resident may not
assume complete management:
a. When the program director or his designee does not believe the
resident's expertise or understanding is adequate to ensure the
best care of the patient.
b. When the attending physician is not willing to delegate the nec-


eessary degree of responsibility.
c. When the resident, for religious or moral reasons, does not wish
to participate in the proposed procedures.

An essential feature of resident education is that a significant
number of staff support the principle of delegation of complete
management under supervision.

Increasing responsibility must progress in an orderly fashion,
culminating in a senior resident year. The senior resident year
consists of 12 months of clinical experience in the last year of the
resident's program. Elective time in the senior resident year re-
quires the prior approval of the RRC. The senior resident must
have sufficient independent operating experience to become
technically competent and have enough total responsibility for
management of patients to ensure proficiency in the diagnostic
and treatment skills that are required of a specialist in obstetrics-
gynecology in office and hospital practice.

6. Duty Hours and Personal Responsibilities

On-call requirements are essential for an optimal educational en-
vironment and to ensure continuity of patient care. The number
of residents and faculty should be adequate to prevent excessive
frequency and length of on-call duty. The scheduling of on-call
duty should consider that clinical events in obstetrics and gynec-
ology do take place at any time; that both safe and effective
patient care and a good learning environment require adequate
periods of rest; and that the residency program appointment is
the resident's full-time compensated occupation. The frequency
of on-call for residents should be, on the average, no more often
than every third night. Residents should be allowed to spend, on
the average, at least 1 full day out of 7 away from program duties.
The program director must also ensure adequate backup if sud-

den and unexpected patient care needs create resident fatigue


sufficient to jeopardize patient care during or following on-call
periods.

B. Specific Training

Resident education must include but not necessarily be limited
to the following:

1. Obstetrics

a. The full range of obstetrics, including high-risk obstetrics and
medical and surgical complications of pregnancy
b. Genetics, including the performance of genetic amniocentesis
and patient counseling
c. Learning and performing operative vaginal deliveries, including
obstetric forceps or vacuum extractor
d. Performing vaginal breech deliveries
e. Performing vaginal births after previous cesarean delivery
f. Obstetrical anesthesia: residents must learn the principles of
general and conduction anesthesia, together with the manage-
ment and the complications of these techniques
g. Experience in the management of critically ill patients
h. Immediate care of the newborn: every resident must have ex-


perience in resuscitation of the human newborn, including tra-

cheal intubation; the principles of general neonatal
complications must be learned as well
i. The full range of commonly employed obstetrical diagnostic pro-
cedures, including imaging techniques

2. Gynecology

a. The full range of the content and patient age of medical and
surgical gynecology
b. Diagnosis and medical and surgical management of urinary in-
continence
c. Oncology, including radiation and chemotherapy
d. Diagnosis and nonsurgical management of breast disease, in-
cluding fine needle aspirations
e. Reproductive endocrinology and infertility
f. Clinical skills in family planning
g. Psychosomatic and psychosexual counseling
h. The full range of commonly employed gynecologic diagnostic
procedures, including imaging techniques
i. Experience in the management of critically ill patients

3. Other

a. Obstetric and gynecologic pathology
b. Emergency medicine
c. Basic medical epidemiology and statistics
d. Ethics and medical jurisprudence
C. Research
The quality of the educational experience within a department of obstetrics and gynecology is enhanced by an active research environment. It is highly desirable that every program encourage each resident to be involved in a research project.

IV. Evaluation

A. Resident Performance
The program director must establish methods of periodically and systematically evaluating and documenting the level of performance, experience, and technical skills of the residents. One example of an acceptable mechanism helpful in evaluating cognitive knowledge is the CREOG In-Training Examination. On at least a semianual basis, program directors or their designees must inform the residents of their individual progress, emphasizing strong points and offering guidance with regard to correcting deficiencies. These evaluations, as well as a list of skills that the resident has mastered, must be documented and available (without revealing the specific resident’s identity) at the time the program is reviewed for approval.

Physicians must have the welfare of their patients as their primary professional concern. The resident must therefore demonstrate those humanistic qualities that foster the formation of appropriate patient-physician relationships. These include integrity, respect, compassion, professional responsibility, sensitivity to the patient’s needs for comfort and encouragement, and an appropriate professional attitude and behavior toward colleagues. These attributes should be emphasized throughout the curriculum and must be evaluated.

B. Evaluation and Program Review
The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Written evaluations by residents should be utilized in this process.

For the purpose of program review, accurate and complete documentation of each individual resident’s experience for each year of training is mandatory. These records should indicate the level of participation of the resident and skills achieved. The program director must review at least semiannually the record of operative experience with the individual resident for breadth and depth of experience as well as for evidence of continuing growth in technical achievements. These cumulative data will be reviewed in detail at the time of survey for program approval or continued program approval. For the purposes of these records, there is no distinction between private and service patients.

Annually, the program director must collect, compile, and retain the numbers and types of operative procedures performed by residents in the program, together with information describing the total resident experience in each institution and facility utilized in the clinical education of residents. This information must be provided in the format and form specified by the RRC.

One significant measure of the quality of a program is the performance of its graduates on the examinations of the American Board of Obstetrics and Gynecology.

V. Board Certification
Residents who plan to seek certification by the American Board of Obstetrics and Gynecology should communicate with the executive director of the board to obtain the latest information regarding current requirements for certification.

ACGME: September 1990 Effective: July 1995

Program Requirements for Residency Education in Ophthalmology

I. Introduction
A. The Program Requirements for Residency Education in Ophthalmology set forth the educational prerequisites for residents and the minimum components that a residency training program in ophthalmology must possess, including the duration of training, institutional support and administration, faculty, educational program, patient resources, and facilities.
B. Residency training programs in ophthalmology should be organized to provide a stable, well-coordinated, progressive educational experience for the resident rather than simply to provide health care to patients.

II. Prerequisites
All applicants entering ophthalmology training programs must have taken a postgraduate clinical year (PGY-1) in a program accredited by the Accreditation Council for Graduate Medical Education (ACGME) or the Royal College of Physicians and Surgeons of Canada. The PGY-1 year must comprise training in which the resident has primary responsibility for patient care in fields such as internal medicine, neurology, pediatrics, surgery, family practice, or emergency medicine. As a minimum, 6 months of this year must be a broad experience in direct patient care.

III. Program Goals and Duration
A. Program Goals and Design
1. The director and teaching staff of a program must prepare and comply with written educational goals for the program. All educational components of a residency program should be related to program goals.
2. The program design and/or structure must be approved by the Residency Review Committee (RRC) as part of the regular review process.
B. Duration of Training
1. The length of training in ophthalmology must be at least 36 calendar months, including appropriate short periods for vacation, special assignments, or exceptional individual circumstances approved by the program director.
2. Any program that extends the length of training beyond 36 calendar months must present an educational rationale that is consonant with the program requirements and the objectives for residency training. Approval for the extended curriculum must be obtained prior to implementation and at each subsequent review. Prior to entry into the program, each resident must be notified in writing of the required curriculum length.
3. The length of time of residency training for a particular resident may be extended by the program director if a resident progresses at a slower pace than provided by the standard rotations. The extension is only 6 months or less, the program director must notify the RRC of the extension and must describe the proposed curriculum for that resident and the measures taken to minimize the impact on other residents. (See below, IV.C.4.b.)
IV. Institutional Support and Program Administration

A. General
1. There must be a single program director responsible for the program.
2. The institution must ensure that the program director is given sufficient authority, financial support, and facilities by the governing body of the sponsoring institution to permit him or her to organize and supervise the following activities of the training program: resident selection and evaluation, instructional program, patient management, research, and initiation of recommendations for staff recruitment.

B. Qualifications of the Program Director
1. The program director must be a qualified ophthalmologist, who either is certified by the American Board of Ophthalmology or is judged by the RRC to possess suitable equivalent qualifications. The term of appointment of the program director must be adequate to ensure stability and continuity of the program.
2. The program director must be licensed to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)
3. The program director must have an appointment in good standing to the medical staff of an institution participating in the program.
4. The program director who serves as administrator, educator, and research coordinator must devote sufficient time to the administration and conduct of the residency training program so that the educational experience for the residents is satisfactory. The RRC for Ophthalmology will evaluate the overall effectiveness of the program director as an administrator, educator, and research coordinator.

C. Responsibilities of the Program Director
1. The program director must prepare a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.
2. The program director, with the support of the institution, must develop and maintain current documentation of institutional or interinstitutional agreements, resident selection and agreements, patient care statistics, faculty evaluations, and assessment of resident performance. This documentation must be provided to the RRC as requested in the Program Information Forms supplied by the committee secretary.
3. The program director is responsible for notifying the executive secretary of the RRC of any changes in program director and/or departmental chair as well as of a formal affiliation with another institution.
4. The program director is required to have prior approval of the RRC for the following changes:
   a. A required rotation of 4 months or more to any institution other than the parent.
   b. The number of resident positions in the training program, both total number and the number at any level. If the change in resident complement results from the extension of training of a current resident, as described in III.B.3 above, and is not greater than 6 months, only prior notification of the RRC is required.
   c. The number of years of training.
   The appropriate educational justification and documentation must accompany all of these requests so that the RRC may evaluate whether the quality of the program and the resources available are adequate to support the requested change.
5. To ensure proper supervision, the program director must prepare explicit, written descriptions of lines of responsibility for the care of patients and make these clear to all members of teaching teams. Residents must be provided with rapid, reliable systems for communication with appropriate involvement of supervisory physicians in a manner appropriate for quality patient care and educational programs.
6. The program director must ensure the implementation of fair procedures as established by the sponsoring institution regarding academic discipline and resident complaints or grievances.
7. The program director must monitor resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress or residents must be evaluated and modified.

V. Minimum Resident Complement
The RRC recognizes the importance of interaction among residents themselves as well as between faculty and residents in the conduct of conferences and patient care. A critical mass or minimum number of residents is essential to provide an opportunity for meaningful interaction throughout the training period. Each program must be structured to have a minimum of two residents in each year of training.

VI. Teaching Faculty
A. The faculty must be highly qualified and possess appropriate clinical and teaching skills. The faculty must devote adequate time to the education of residents. The faculty must have a broad range of subspecialty expertise. Such expertise will usually be acquired by subspecialty fellowship training.
B. Faculty members should be certified by the American Board of Ophthalmology or possess suitable equivalent qualifications.
C. There must be sufficient faculty in the program to provide a minimum of one full-time equivalent faculty person for every three residents in the program.
D. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.
E. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.
F. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

VII. Other Program Personnel
Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

VIII. Program Research and Scholarly Activity
Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the develop-
Program Requirements for Residency Education in Ophthalmology

opment of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility.

Scholarly Activity
The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:
1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of the basic mechanisms of normal and abnormal states and the application of current knowledge to practice.
2. Participation in journal clubs and research conferences.
3. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.
4. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.
5. Offering of guidance and technical support (e.g., research design, statistical analysis) for residents involved in research.
6. Provision of support for resident participation in scholarly activities.

IX. Participating Institutions
A residency program in ophthalmology must have a designated parent institution where the majority of the required clinical and didactic educational experiences occur and are coordinated by the program director. Affiliations with other institutions may sometimes be desirable to provide complementary educational experiences for the residents. Programs that depend on rotations to hospitals other than the parent institution must submit documentation that the following criteria are being fulfilled:

A. Purpose
There must be a clear statement in the narrative section of the Program Information Form regarding the purpose of each participating institution, indicating how they enhance the total program and how they are coordinated with the other components of the overall educational experience.

B. Local Director
There must be a designated local director of the program at each participating institution. The program director must appoint or be consulted in the appointment of the local program director, and this arrangement must be documented in writing by the appropriate individuals at each institution. There must be evidence of ongoing coordination of the various components of the overall program, which would include planning of the rotations, evaluation of residents, and evaluation of each institution by the residents.

C. Physical Facilities
The program director should ensure that the physical facilities of each participating institution, including outpatient clinic, inpatient facilities, operating rooms, and their respective equipment, meet the program requirements.

D. Educational Experiences
1. The program director is ultimately responsible for the schedule and composition of the residents' rotations at each participating institution, as well as for the extent of faculty supervision on the clinical services and in the operating room.
2. The program director is ultimately responsible for the content and quality of didactic lectures and conferences and must ensure that these are coordinated with the overall educational activities of the program. Sample schedules must be submitted along with those from the parent institution.
3. If a participating institution is sufficiently remote from the parent institution to prevent regular attendance by residents at the didactic and clinical conferences at the parent institution or if the rotation otherwise prevents such attendance, the program director must demonstrate that each resident is exposed to a formal educational experience that fulfills the program requirements.
4. Formal teaching case presentations should be included at each participating institution to ensure optimal utilization of patients for teaching purposes; alternatively, cases should be brought from participating institutions to the parent institution for presentation if formal teaching case presentations are held only there.
5. The program director must ensure that all residents have equivalent educational experiences.
6. Rotations to foreign countries shall not be used to meet minimum educational standards.

X. Educational Program
The program director is responsible for the structure and content of the educational program and must provide the RRC with a statement of objectives, methods of implementation, and procedures for assessment of the program by the faculty and the residents. The educational experience must be designed and supervised by the program director. The educational program should include:

A. Didactic Instruction in the Basic and Clinical Sciences
Residents should be educated in basic and clinical sciences through lectures and/or regularly scheduled discussions relevant to the practice of ophthalmology. Regularly scheduled required lectures or seminars should be held at the parent institution. The didactic curriculum must encompass a minimum of 360 hours of instruction for residents during the 36-month training program, at least 240 of which must be intramural. The program director is responsible for documenting resident attendance at conferences.

B. Case Presentations and Clinical Conferences
A minimum of 8 hours per month should be devoted to regularly scheduled formal teaching case presentations and clinical conferences attended by several faculty and a majority of residents.

C. Pathology
The training experience in ocular pathology should comprise continuing intramural lectures, clinicopathological conferences, and a minimum of 50 hours of laboratory experience in gross and microscopic examination of pathological specimens. This latter experience with a qualified pathologist may take place intramurally or extramurally at a laboratory considered by the RRC to be capable of providing such training. If utilized, this extramural effort should occur during the 36 months of residency training, preferably early in the program, and would not be construed to be a substitute for the continuing intramural program. A short exposure to ophthalmic pathology at a remote course may supplement this training but will not be considered as a substitute for the pathology requirement.

D. Clinical Experiences
The volume and variety of clinical ophthalmological problems in children and adults must be sufficient to afford each resident a graduated supervised experience with the entire spectrum of ophthalmic diseases so that the resident may develop diagnostic, therapeutic, and manual skills and judgment as to their appropriate use.
1. Outpatient Experience
During the course of training residents should be responsible for the care of an adequate number of outpatients who represent a broad range of ophthalmic diseases. There must be appropriate
faculty supervision of the residents in all outpatient visits. Appropriate faculty supervision occurs when the faculty is readily available to residents for consultation or assistance when requested.

a. Each resident should participate in a minimum of 3,000 outpatient visits in which the resident performs a substantial portion of the examination and has responsibility for the care of the patient.

b. There should be direct faculty supervision of the residents in at least 1,000 outpatient visits. Direct faculty supervision occurs when teaching staff also examine the patient with the resident and discuss the management of the patient with the resident before the patient leaves the clinic.

c. A minimum of 1,500 outpatients should be refracted by each resident.

2. Surgical Experience

a. Residents must perform and assist at sufficient surgery to become skilled as general ophthalmic surgeons. That is, each resident must have major technical and patient care responsibilities in the surgery (including laser surgery) of cataract, strabismus, cornea, glaucoma, retina/vitreous, ocularplastic, and trauma to provide an adequate base for a general ophthalmic practice.

b. The program director is responsible for documenting the surgical experiences of each resident, to include the number of cases in each category where the resident has served as the primary surgeon or the assistant surgeon. This documentation must be provided to the RRC on its Program Information Forms, and individual resident logs must be available at the time of the site visit.

3. Systemic Disease Consultation Experience

Each resident should care for a minimum of 150 patients seen in consultation during the course of 3 years of training. The types of cases seen should cover a wide spectrum of ophthalmic diseases and ophthalmic manifestations of systemic diseases.

E. Duty Hours and Personal Responsibility

Duty hours and night and weekend call for residents must reflect the concept of responsibility for patients and provide for adequate patient care. Residents must not be required regularly to perform excessively difficult or prolonged duties. When averaged over 4 weeks, residents should spend no more than 80 hours per week in patient care activities. Residents at all levels should, on average, have the opportunity to spend at least 1 day out of 7 free of patient care activities and should, on average, have patient care activities no more often than every third night.

F. Fellowship Program

If the residency training program is conducted in conjunction with fellowship training programs for teaching advanced competence in specialized areas of ophthalmology, such fellowship programs must not adversely affect the experience of residents in the core training program.

XII. Evaluation

A. Program and Faculty Evaluation

The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed.

Teaching faculty must be evaluated on a regular basis. Documentation of faculty evaluation should include teaching ability and commitment as well as clinical knowledge.

Written evaluations by residents, through a mechanism that ensures anonymity, should be utilized in the evaluation of both the program and the faculty.

B. Resident Evaluation

There must be regular evaluation of residents’ knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician.

The program director, with participation of members of the teaching staff, shall:

1. At least semiannually evaluate the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures.

2. Communicate each evaluation to the resident in a timely manner.

3. Advise residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.

4. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.

XIII. Other

A. Use of Board Examinations

In its review and evaluation of training programs the RRC for Ophthalmology may use the pass rate on the examinations of American
Board of Ophthalmology for residents completing a particular program as one measure of the quality of that training program.

B. Institutional Requirements
Training programs in ophthalmology should comply with all of the provisions of the Institutional Requirements.

C. Certification
Residents who plan to seek certification by the American Board of Ophthalmology should communicate with the executive director of the board regarding specific requirements for certification.

ACGME February 1993 Effective: July 1995

Program Requirements for Residency Education in Orthopaedic Surgery

I. Duration and Scope of Education
A. Orthopaedic surgery is the medical specialty that includes the study and prevention of musculoskeletal diseases, disorders, and injuries and their treatment by medical, surgical, and physical methods.

B. An orthopaedic residency may be accredited to offer either 4 or 5 years of graduate medical education.
1. A 4-year program is preceded by a year of education in an Accreditation Council for Graduate Medical Education (ACGME)-accredited residency in a general medical specialty such as general surgery, internal medicine, or pediatrics. No more than 3 months of orthopaedic surgery education should be offered during that year.
2. A 5-year program must include 9 to 12 months of nonorthopaedic education and 4 years of orthopaedic education.

C. The organizational structure of the residency must be such that:
1. The program director determines the educational content of the program and is responsible for that training.
2. Orthopaedic education may include rotations on related services such as plastic surgery, rehabilitation, rheumatology, or neurosurgery; however, an orthopaedic residency must include 3 years or more of rotations on orthopaedic services.
3. A resident does not have assignments totaling more than 6 months in other ACGME-accredited orthopaedic residencies or in institutions that are not accredited to offer orthopaedic education by the ACGME.
4. An accredited program may include a maximum of 12 months of education in either clinical or laboratory research.

D. The director and teaching staff of a program must prepare and comply with written educational goals for the program. All educational components of a residency program should be related to program goals.
1. The program design and/or structure must be approved by the Residency Review Committee (RRC) as part of the regular review process.
2. Participation by any institution providing more than 6 months of training in a program requires prior approval by the RRC.

E. The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Written evaluations by residents should be utilized in this process.

II. Institutional Organization
A. The governing body of the sponsoring institution must provide support for the program director in teaching, recruiting staff, selecting residents, assigning residents to an appropriate workload, and dismissing residents whose performance is unsatisfactory and must encourage continuity in the program directorship.

B. Assurance of due process for residents and teaching staff must be demonstrated.

C. In communities where the didactic programs of several residencies are combined, the staff of each accredited program must actively and consistently participate in the combined effort.

D. When the resources of two or more institutions are utilized for the clinical or basic science education of orthopaedic residents, an affiliation agreement specifying the contribution of each institution to the orthopaedic surgery residency must be approved by institutional governing boards.

E. A program involving more than two institutions must clearly demonstrate the educational need for each institution's participation in the program. Clinical responsibility alone does not constitute a suitable educational experience.

F. Affiliations should be avoided with institutions that are at such a distance from the sponsoring institution as to make resident participation in program conferences and rounds difficult, unless the participating institution provides comparable activities.

G. The program director must have the responsibility and authority to coordinate program activities at all participating institutions and maintain a file of written descriptions of the educational activities provided at each institution involved in the program.

H. In order to provide an adequate interdisciplinary educational experience, the institution must have ACGME-accredited training programs in general surgery and internal medicine. There should be an ACGME-accredited program in pediatrics.

III. Program Personnel
The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director
There must be a single program director responsible for the program. The program director should be the chief administrator of the department, division, or section of orthopaedic surgery. Qualifications of the program director include:
1. Requisite and documented clinical, educational, and administrative abilities and experience.
2. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)
3. Certification by the American Board of Orthopaedic Surgery or suitable equivalent qualifications.
4. Appointment in good standing to the medical staff of an institution participating in the program.

B. Responsibilities of the Program Director
1. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.
2. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.
3. Selection, supervision, and evaluation of the teaching staff and other program personnel at each institution participating in the program.

4. The supervision of residents in accordance with explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.

5. Regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician. The program director, with participation of members of the teaching staff, shall:
   a. At least semiannually evaluate the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures.
   b. Communicate each evaluation to the resident in a timely manner.
   c. Advise residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.
   d. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.

6. The provision of a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.

7. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances. The program director must monitor each resident's performance and progress in the development of the cognitive and interpersonal skills, ethics, manual abilities, and affective qualities needed by an orthopaedic surgeon. It is the program director's responsibility to counsel, censure, or, after due process, to dismiss residents who fail to demonstrate appropriate industry, competence, reliability, or ethics.

8. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.

9. Preparation of an accurate statistical and narrative description of the program as requested by the RRC.

10. The program director must ensure the provision of adequate facilities, teaching staff, resident staff, teaching beds, educational resource materials, outpatient facilities, and research facilities.

11. The director must ensure that resident performance is not impaired by excessive fatigue, whether caused by program duties or other activities. It is desirable that residents' work schedules be designed so that, on average, excluding exceptional patient care needs, residents have at least 1 day out of 7 free of routine responsibilities and be on call in the hospital no more often than every third night. The ratio of hours worked to on-call time will vary, particularly at the senior levels, and therefore necessitates flexibility.

12. In institutions that offer postgraduate fellowships and/or other educational experiences, the program director must ensure that these activities do not compromise resident education.

13. The program director must maintain a file of current, written institutional and interinstitutional agreements, resident agreements, patient care statistics, the operative experience of individual residents, policies on duty hours and supervision, and regular assessments of resident performance. These documents must be provided on request to the RRC or to the site visitor.

14. The program director must notify the secretary of the RRC of any change that may significantly alter the educational experience. Examples of such changes are:
   a. Change of program director.
   b. Major changes in institutional affiliation. Any change in formal affiliation with an institution where a resident spends 6 months or longer requires prior approval by the RRC.
   c. Extension of a resident's educational period. A program director may retain a resident longer than the duration for which the program is accredited in orthopaedic surgery so that the resident may achieve sufficient competence in the specialty. The RRC must be notified of such retention.
   d. A change in number of residents. Any change in the number of residents at any level of training or a change in the total number of residents must receive prior approval of the RRC.

C. Teaching Staff

1. There must be a sufficient number of teaching staff with documented qualifications to instruct and supervise adequately all the residents in the program. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities.
   a. All programs must have at least three faculty who devote at least 20 hours each week to the program.
   b. There must be at least one full-time faculty equivalent (one FTE equals 45 hours per week devoted to the residency) for every four residents in the program (excluding residents in nonorthopaedic education).

2. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.

3. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

4. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

5. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

6. It is the responsibility of the teaching staff to:
   a. Ensure that the structure and content of the residency program reflect an education-to-service ratio that identifies the resident as a student and provide adequate experience in preoperative and postoperative, as well as intraoperative, patient management. This responsibility must include direct supervision appropriate to a resident's competence and level of training in all patient care settings, including operative, inpatient, outpatient, and emergency, and participation in patient care conferences and other educational activities.
b. Participate in appropriate scientific societies, pursue their own continuing education, and demonstrate an active interest in related research.
c. Evidence ethical medical practice.

D. Residents
When reviewing a program for accreditation, the RRC will approve a maximum total number of residents to be educated in the program and the maximum that may be educated at each level of the program. Those numbers will be based primarily on the number, qualifications, and commitment of the faculty; the volume and variety of the patient population available for educational purposes; the quality of the educational offering; and the totality of institutional resources. It is important that the resident complement be sufficient in number to sustain an educational environment.

E. Other Program Personnel
Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

IV. Educational Program
A. Clinical Resources
Clinical problems must be of sufficient variety and volume to afford the residents adequate experience in the diagnosis and management of adult and pediatric orthopaedic disorders. The residents' clinical experience must include adult orthopaedics, including joint reconstruction; pediatric orthopaedics, including pediatric trauma; trauma, including multisystem trauma; surgery of the spine, including disk surgery; spinal trauma, and spinal deformities; hand surgery; foot surgery in adults and children; athletic injuries, including arthroscopy; metastatic disease; and orthopaedic rehabilitation, including amputations and postamputation care.

B. Related Areas of Instruction
Resident education must include orthopaedic oncology, rehabilitation of neurologic injury and disease, spinal cord injury rehabilitation, orthotics and prosthetics, and the ethics of medical practice.

C. Continuity of Care
Continuity of care must be emphasized. Residents must participate in the preadmission care, hospital care, operative care, and follow-up care (including rehabilitation) of patients.

D. Nonoperative Outpatient Experience
Residents must have adequate experience in nonoperative outpatient diagnosis and care, including all orthopaedic anatomic areas and patients of all age groups.

E. Progressive Responsibility
Residents must have the opportunity to assume increasing responsibility for patient care, under direct faculty supervision (as appropriate for a resident's ability and experience), as they progress through a program. Inpatient and outpatient experience with all age groups is necessary.

F. Teaching Rounds and Conferences
Faculty and residents must attend and participate in regularly scheduled and held teaching rounds, lectures, and conferences. Subjects of mutual interest should be discussed at interdisciplinary conferences. On average, there must be at least 4 hours of formal teaching activities each week.

G. Basic Medical Sciences
Basic science education must include substantial instruction in anatomy, biomechanics, pathology, and physiology. The basic science program must also include resident education in embryology, immunology, pharmacology, biochemistry, and microbiology.

1. Instruction in anatomy must include study and dissection of anatomical specimens by the residents and lectures or other formal sessions.
2. Instruction in pathology must include organized instruction in correlative pathology in which gross and microscopic pathology are related to clinical and roentgenographic findings.
3. Instruction in biomechanics should be provided in seminars or conferences emphasizing principles, terminology, and application to orthopaedics.
4. Organized instruction in the basic medical sciences must be integrated into the daily clinical activities by clearly linking the pathophysiologic process and findings to the diagnosis, treatment, and management of clinical disorders.

H. Basic Motor Skills
Instruction in basic motor skills must include experience in the proper use of surgical instruments and operative techniques. Evaluation of new or experimental techniques and/or materials should be emphasized. The application of basic motor skills must be integrated into daily clinical activities, especially in the operating room.

V. Research and Scholarly Activity
A. Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility.

B. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:
   1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.
   2. Participation in journal clubs and research conferences.
   3. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.
   4. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.
   5. Offering of guidance and technical support (eg, research design, statistical analysis) for residents involved in research.
   6. Provision of support for resident participation in scholarly activities.

C. To develop the ability to critically evaluate medical literature, research, and other scholarly activity, resident education must include instruction in experimental design, hypothesis testing, and other current research methods, as well as participation in clinical or basic research.

D. Space, equipment, faculty expertise and supervision, conferences, support personnel, time, and funding must be provided for research in the program.

E. Program directors must maintain a current record of research activity by residents and faculty.

F. Library Resources:
   1. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.
   2. Library resources must include current and past orthopaedic periodicals and reference books that are readily accessible to all orthopaedic residents in the program.
Program Requirements for Residency Education in Orthopaedic Surgery

3. Library services should include the electronic retrieval of information from medical databases.
4. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

VI. Other

A. Examinations
One measure of the quality of a program is the performance of its graduates on examinations for certification by the American Board of Orthopaedic Surgery. Program graduates should take the examination, and at least 75% of those who take the exam for the first time should pass.

B. Change of Program Director
Programs that have acting directors for more than 1 year will be subject to review, which may include a site visit.

C. Board Certification
Residents should contact the American Board of Orthopaedic Surgery for information regarding certification.

ACGME: June 1992 Effective: July 1995

Program Requirements for Residency Education in Adult Reconstructive Orthopaedics

I. Introduction
A. Adult reconstructive orthopaedics is a subspecialty of orthopaedic surgery that includes the in-depth study, prevention, and reconstructive treatment of musculoskeletal diseases, disorders, and sequelae of injuries by medical, physical, and surgical methods. An educational program in adult reconstructive orthopaedics may include the care of arthritis and related disorders in many anatomic regions or be limited to areas such as the hip, knee, shoulder, elbow, or ankle and foot. The program must be organized to provide sufficient experience for fellows to acquire the competency of a specialist in the field.

B. Postgraduate fellowship education in orthopaedic surgery is a component in the continuum of the educational process, and such education will take place after completion of an accredited residency. Graduate medical education programs in the subspecialties of orthopaedic surgery will be accredited to offer 12 months of education.

C. Postgraduate fellowship programs in the subspecialties of orthopaedic surgery may be accredited in institutions that sponsor accredited residency programs in orthopaedic surgery or that are affiliated with an Accreditation Council for Graduate Medical Education (ACGME)-accredited orthopaedic surgery residency. Requests for exceptions to this policy will be reviewed on a case-by-case basis.

D. When orthopaedic residents and fellows are being educated in the same institution, the residency director and the director of the fellowship must jointly prepare and approve a written agreement specifying the educational relationship between the residency and fellowship programs, the roles of the residency and fellowship directors in determining the educational program of residents and fellows, and the roles of the residents and fellows in patient care.

E. The director and teaching staff of a program must prepare and comply with written educational goals for the program. All educational components of a program should be related to program goals:
1. The program design and/or structure must be approved by the Residency Review Committee (RRC) as part of the regular review process.
2. Participation by any institution providing more than 2 months of training must be approved by the RRC.

II. Institutional Resources and Organization
A. Programs must provide an intellectual environment for acquiring the knowledge, skills, clinical judgment, and attitudes essential to the practice of adult reconstructive orthopaedics. This objective can be achieved only when the program director, the supporting faculty and staff, and the administration are fully committed to the educational program and when appropriate resources and facilities are present. Effective graduate education is not achieved when the educational program functions primarily to meet service commitments.

B. A sufficient number of new and follow-up patients must be available to ensure adequate inpatient and outpatient experience for each fellow without adversely diluting the educational experience of the orthopaedic surgery residents or the educational experience of residents in other specialties.

C. There must be close monitoring of the interface between residency and fellowship education. It is imperative that orthopaedic fellowship education not interfere with the education of residents. Lines of responsibility for the orthopaedic resident and the fellow must be clearly defined. In addition, the fellow should maintain a close working relationship with orthopaedic residents and other fellows in orthopaedic surgery and in other disciplines.

D. Facilities to support the overall educational program must be available and functioning. These include outpatient, inpatient, imaging, laboratory, rehabilitation, and research resources. Operating rooms must be state of the art and contain modern equipment for reconstructive surgery.

E. There should be broad support from other clinical specialties including radiology, laboratory medicine, rheumatology, endocrinology, infectious disease, pathology, and rehabilitation.

III. Program Personnel

The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director

The director of the subspecialty program and the director of the affiliated orthopaedic surgery program, in conjunction with the administration of the institution, will be responsible for ensuring that adequate facilities and other necessary resources are available to provide an education of high quality.

There must be a single program director responsible for the program.

1. Qualifications of the program director include:
   a. Requisite and documented clinical, educational, and administrative abilities and experience.
   b. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)
   c. Certification by the American Board of Orthopaedic Surgery or suitable equivalent qualifications.
d. Appointment in good standing to the medical staff of an institution participating in the program.

2. Responsibilities of the program director include:
   a. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.
   b. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.
   c. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program.
   d. The supervision of residents in accordance with explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.
   e. Regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician. The program director, with participation of members of the teaching staff, shall:
      1. At least semiannually evaluate the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures.
      2. Communicate each evaluation to the resident in a timely manner.
      3. Advise residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.
      4. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.
   f. The provision of a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.
   g. Fellowship directors must ensure that trainees are given reasonable duty and call assignments. It is desirable that fellows' work schedules be designed so that on average, excluding exceptional patient care needs, fellows have at least 1 day out of 7 free of routine responsibilities and be on call in the hospital no more often than every third night. Scheduling will facilitate flexibility, as fellows are at the postgraduate level, so the ratio of hours worked and on-call time may vary.
   h. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.
   i. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.
   j. Preparation of an accurate statistical and narrative description of the program as requested by the RCP.

B. Teaching Staff
1. There must be a sufficient number of teaching staff with documented qualifications to instruct and supervise adequately all the residents in the program.
2. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities.
3. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.
4. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.
5. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.
6. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

C. Other Program Personnel
Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

IV. Educational Program
A. The fellowship must provide sufficiently advanced education to allow the fellow to acquire the expertise of a specialist in adult reconstructive orthopaedics. This education must consist of academic and technical components.
   1. The academic component must emphasize a scholarly approach to clinical problem-solving, self-directed study, teaching, development of analytic skills and surgical judgment, and research.
   2. The technical component should ensure the ability of the fellow to perform skillfully the procedures required for practice of the subspecialty.
B. The program must offer supervised training in the operative and other technical skills integral to adult reconstructive orthopaedics. Instruction and experience must be sufficient for the fellow to understand the indications, risks, and limitations of the commonly performed procedures in the subspecialty.
C. Fellows must have the opportunity to provide consultation with faculty supervision and should have clearly defined educational responsibilities for residents, medical students, and allied health personnel. These teaching experiences should correlate basic biomedical knowledge with the clinical aspects of the subspecialty.
D. Clinical experience must include opportunities to observe and to manage patients with a variety of problems involving orthopaedic reconstruction on both an inpatient and outpatient basis, and the breadth of patient experience should include the evaluation and care of individuals through a wide range of ages, both sexes, and involve acute, subacute, and chronic conditions.
E. The educational curriculum must include opportunities for fellows to study anatomy, physiology, biomechanics, pathology, microbiology, pharmacology, and immunology as they relate to adult reconstructive orthopaedics.
F. The program must have regularly scheduled and held subspecialty conferences with active faculty and fellow participation.

G. The program must emphasize the diagnosis of clinical disorders of the bones, joints, and soft tissues; the pathogenesis of these disorders; the treatment modalities available for managing these disorders; and the results and complications of such treatment. Fellows must assume a major role in the continuing care of patients and have progressive responsibility in patient assessment, preoperative evaluation, operative experience, and postoperative management and rehabilitation.

H. The fellow must keep a record of the diagnosis and procedure for each operation in which he or she is an operating surgeon or first assistant. This must be kept on file and available for review.

I. The fellowship program must provide sufficient training to permit fellows to develop clinical competence in the field of adult reconstructive orthopaedics. Reconstructive principles may be broadly based or taught in a context of specific anatomic regions. Examples of knowledge and skills that are desirable include but are not limited to the following:

1. The basic sciences related to adult reconstructive orthopaedics.
2. The natural history of joint diseases.
3. Prudent use of diagnostic laboratory tests.
4. Interpretation of the radiographic and various imaging modality examination of the musculoskeletal system with an appreciation of the risk and information expected of the procedures.
5. Development of a treatment plan to manage patients with traumatic, congenital and developmental, infectious, metabolic, degenerative, and rheumatologic disorders.
6. Development of operative skills in reconstructive orthopaedics, including soft-tissue procedures, osteotomy, bone grafting, excisional arthroplasty, arthrodesis, and prosthetic arthroplasty.
8. Assessment of the effectiveness of treatment methods.
9. Sufficient familiarity with current research methods to enable the fellow to critically analyze research reports and to design and implement clinical or basic research in the field of adult reconstructive orthopaedics.
10. Acquisition of teaching skills in adult reconstructive orthopaedics.

V. Program Research and Scholarly Activity
Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility.

A. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:

1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.
2. Participation in journal clubs and research conferences.
3. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.

4. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.

5. Offering of guidance and technical support (e.g., research design, statistical analysis) for residents involved in research.

6. Provision of support for resident participation in scholarly activities.

B. Fellows must participate in basic and/or clinical research.

1. Fellows must learn to design, implement, and interpret research studies under supervision by qualified faculty.
2. The program must provide time and facilities for research activities by fellows.

VI. Library

1. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.
2. Library services should include the electronic retrieval of information from medical databases.
3. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

VII. Evaluation
A. Program directors must have a clearly defined method for regular periodic assessment of the performance of the fellow. The assessment must include cognitive, motor, and interpersonal skills; attitudinal traits; and surgical judgment. There must be at least semianual communication of this information to the fellow and to the director of the residency program in orthopaedic surgery.

B. The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Written evaluations by residents should be utilized in this process.

ACGME: September 1989 Effective: July 1995

Program Requirements for Residency Education in Foot and Ankle Orthopaedics

I. Introduction
A. Foot and ankle orthopaedics is a subspecialty of orthopaedic surgery that includes the in-depth study, prevention, and treatment of musculoskeletal diseases, disorders, and sequelae of injuries in this anatomic region by medical, physical, and surgical methods.

B. Programs in foot and ankle orthopaedics will be accredited to offer 1 year of postresidency education to individuals who have completed an Accreditation Council for Graduate Medical Education (ACGME)-accredited orthopaedic surgery residency.

C. Postgraduate fellowship education in orthopaedic surgery is a component in the continuum of the educational process, and such education will take place after completion of an accredited residency.

D. Postgraduate fellowship programs in the subspecialties of orthopaedic surgery may be accredited in institutions that sponsor accredited residency programs in orthopaedic surgery or that are affiliated with an ACGME-accredited orthopaedic surgery resi-
Program Requirements for Residency Education in Foot and Ankle Orthopaedics

Institutional Resources and Organization

A. Adequate facilities to support the overall educational program must be available and functioning. These include outpatient, inpatient, imaging laboratory, rehabilitation, and research resources. Operating rooms must be adequately equipped for reconstructive surgery.

B. A sufficient number of new and follow-up patients must be available to ensure adequate inpatient and outpatient experience for each fellow without adversely diluting the educational experience of the orthopaedic surgery residents or the educational experience of residents in other specialties.

C. There should be broad support from other clinical subspecialties, including radiology, pathology, rheumatology, endocrinology, laboratory medicine, infectious disease, rehabilitation, and prosthodontics and orthotics.

D. Programs must provide an intellectual environment for acquiring the knowledge, skills, clinical judgment, and attitudes essential to the practice of foot and ankle orthopaedics. This objective can be achieved only when the program director, the supporting faculty and staff, and the administration are fully committed to the educational program and when appropriate resources and facilities are present. Effective graduate education is not achieved when the educational program functions primarily to meet service commitments.

E. There must be close monitoring of the interface between residency and fellowship education. It is imperative that orthopaedic fellowship education not interfere with the education of residents. Lines of responsibility for the orthopaedic resident and the fellow must be clearly defined. In addition, the fellow should maintain a close working relationship with orthopaedic residents and other fellows in orthopaedic surgery and in other disciplines.

III. Program Personnel

The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director

The director of the subspecialty program and the director of the affiliated orthopaedic surgery program, in conjunction with the administration of the institution, will be responsible for ensuring that adequate facilities and other necessary resources are available to provide an education of high quality.
i. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.

j. Preparation of an accurate statistical and narrative description of the program as requested by the RRC.

B. Teaching Staff

1. There must be a sufficient number of teaching staff with documented qualifications to instruct and supervise adequately all the residents in the program. In addition to the program director, there must be at least one other orthopaedist who actively participates in the academic and clinical components of the program and regularly provides supervision and instruction of residents.

2. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities.

3. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.

4. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

5. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

6. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

C. Other Program Personnel

Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

IV. Educational Program

A. The educational program in foot and ankle orthopaedics may include the orthopaedic management and appropriate referral for the care of related disorders (e.g., rheumatoid arthritis, neuromuscular disorders, and diabetes), as well as those disorders of the leg that may directly or indirectly affect the foot and ankle (e.g., compartment syndrome, neuromuscular disease, malalignment of the leg, bone instability).

B. The educational program must be organized to provide advanced experience for residents to acquire the competency of a specialist in the field. Clinical experience must include opportunities to observe and to manage patients with a variety of problems involving orthopaedic repair of the foot and ankle on both an inpatient and an outpatient basis. The breadth of patient experience should include the evaluation and care of individuals through a wide range of ages and both sexes, and should involve acute, subacute, and chronic conditions.

C. A postgraduate fellowship program must provide sufficiently advanced education to allow the fellow to acquire special expertise in foot and ankle orthopaedics. This education must consist of academic and technical components. The academic component must emphasize a scholarly approach to clinical problem solving, self-directed study, teaching, development of analytic skills and surgical judgment, and research. The technical component should ensure the ability of the fellow to perform skillfully the procedures required for practice of foot and ankle orthopaedics.

D. Programs must provide supervised training in the operative and other technical skills integral to foot and ankle orthopaedics. Instruction and experience must be sufficient for the fellow to understand the indications, risks, and limitations of the commonly performed procedures in foot and ankle orthopaedics.

E. The educational curriculum must include the study of anatomy, physiology, biomechanics and gait, pathology, microbiology, pharmacology, and immunology as they relate to foot and ankle orthopaedics.

F. The program must have regularly held and attended subspecialty conferences, including at least one weekly teaching conference and a monthly morbidity-mortality conference, with active faculty and resident participation. A monthly journal club covering appropriate topics in foot and ankle surgery should be held.

G. The program must emphasize the diagnosis of clinical disorders of the bones, joints, and soft tissues of the foot and ankle. The pathogenesis of these disorders, the treatment modalities available, and the results and complications of such treatment should be emphasized.

H. Residents assume a major role in the continuing care of patients and have progressive responsibility for patient assessment, decisions regarding treatment, postoperative evaluation, operative experience, nonoperative management, postoperative management, rehabilitation, long-term follow-up, and other outpatient care.

I. A fellow must have the opportunity to provide consultation with faculty supervision and should have clearly defined educational responsibilities for residents, medical students, and allied health personnel. These teaching experiences should correlate basic biomedical knowledge with the clinical aspects of foot and ankle orthopaedics.

J. Residents must keep a record of the diagnosis and procedure for each operation for which he or she is an operating room surgeon or first assistant. This must be kept on file and available for review.

K. The program must provide sufficient education to permit residents to develop clinical competence in the field of foot and ankle orthopaedics. Examples of knowledge and skills that are essential include but are not limited to:

1. The basic sciences related to foot and ankle orthopaedics.

2. The natural history of disease and disorders of the foot and ankle, including an understanding of the deformed, injured, or diseased pediatric foot.

3. Proven use of diagnostic laboratory tests.

4. Interpretation of the radiographic examination of the musculoskeletal system, particularly the foot and ankle, with an understanding of the risk and information expected of these procedures.

5. Development of a treatment plan to manage patients with traumatic, congenital and developmental, infectious, metabolic, degenerative, neurologic, and rheumatologic disorders.

6. An understanding of the importance of the timing of orthopaedic procedures in the overall context of foot and ankle injuries.

7. Prevention and treatment methods for the management of bony and soft-tissue injuries of the foot and ankle, including
the indications for various types of internal and external fixation devices and their applications to foot and ankle trauma.
8. Development of operative skills in reconstructive orthopaedics such as soft-tissue procedures, osteotomies, bone grafting, excisional arthroplasty, arthrodesis, and prosthetic arthroplasty.
9. Understanding of the dysvascular and neurologically impaired foot, including the neuropathic foot, and the indications for various amputation procedures of the foot and ankle.
11. Assessment of the efficacy of treatment methods.
12. Sufficient familiarity with current research methods to enable the resident to critically analyze research reports and to design and implement clinical or basic research in the field of foot and ankle orthopaedics.
13. Recuperative and rehabilitation techniques including the use of physical and occupational therapy designed to return the patient to normal activities and work.
14. Understanding of prosthetics and orthotics pertaining to disorders of the foot, gait, and amputation.
15. Development of teaching skills, lecture techniques, and instructional materials in foot and ankle orthopaedics.

V. Program Research and Scholarly Activity
A. Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility.
B. The faculty for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of the teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:
   1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.
   2. Participation in journal clubs and research conferences.
   3. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.
   4. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.
   5. Offering of guidance and technical support (eg, research design, statistical analysis) for residents involved in research.
   6. Provision of support for resident participation in scholarly activities.
C. All residents must participate in clinical or basic research, and this should culminate in the development and publication and/or presentation of an appropriate paper.
D. Fellows must learn to design, implement, and interpret research studies under supervision by qualified faculty, and the program must provide time and facilities for research activities by faculty and fellows.

VI. Library
1. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.
2. Library services should include the electronic retrieval of information from medical databases.

3. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

VII. Evaluation
A. The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed.
B. The program, the educational process, and its faculty, in respect to academic performance, should be evaluated at least every 2 or 3 years to see if goals and objectives are being met.
C. This review process must include direct observation and discussion of case management with the resident.
D. In order to ensure that residents meet the academic and clinical goals of the program, evaluation procedures must include:
   1. Formal testing of residents' cognitive capabilities.
   2. Systematic evaluation and documentation of residents' clinical abilities.
   3. Evaluation of residents' interpersonal skills and attitudinal traits.
E. Formal review of residents by the program director and members of the teaching staff must include:
   1. Written evaluation of the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures, at least once every 6 months.
   2. Timely communication and review of the written evaluation to the resident.
F. Programs must maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.

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Program Requirements for Residency Education in Hand Surgery

I. Introduction
A. Surgery of the hand includes the investigation, preservation, and restoration of all structures of the upper extremity that directly affect the form and function of the limb, wrist, and hand by medical, surgical, or physical methods.
B. Fellowship education in hand surgery is a component of the continuum of the educational process in orthopaedic surgery, and such education will take place after completion of an accredited residency in orthopaedic surgery, plastic surgery, or general surgery. Graduate medical education programs in the subspecialties of orthopaedic surgery will be accredited to offer 12 months of education.
C. Postgraduate fellowship programs in the subspecialties of orthopaedic surgery may be accredited in institutions that sponsor accredited residency programs in orthopaedic surgery or that are affiliated with an Accreditation Council for Graduate Medical Education (ACGME)-accredited orthopaedic surgery residency. Requests for exceptions to this policy will be reviewed on a case-by-case basis.
D. When orthopaedic residents and fellows are being educated in the same institution, the residency director and the director of the fellowship must jointly prepare and approve a written agreement specifying the educational relationship between the residency and fellowship programs, the roles of the residency and
fellowship directors in determining the educational program of residents and fellows, and the roles of the residents and fellows in patient care.

E. The director and teaching staff of a program must prepare and comply with written educational goals for the program. All educational components of a program should be related to program goals.

1. The program design and/or structure must be approved by the Residency Review Committee (RRC) as part of the regular review process.

2. Participation by any institution providing more than 2 months of training must be approved by the RRC.

II. Institutional Resources and Organization

A. Programs must provide an intellectual environment for acquiring the knowledge, skills, clinical judgment, and attitudes essential to the practice of hand surgery. This objective can be achieved only when the program director, the supporting faculty, and staff, and the administration are fully committed to the educational program and when appropriate resources and facilities are present. Effective graduate education is not achieved when the educational program functions primarily to meet service commitments.

B. A sufficient number of new and follow-up patients must be available to ensure adequate inpatient and outpatient experience for each fellow without adversely diluting the educational experience of the orthopaedic surgery residents or the educational experience of residents in other specialties.

C. Facilities to accomplish the overall educational program must be available and functioning. These include inpatient, ambulatory care, and laboratory resources for adult and pediatric patients and, specifically, support services in the diagnostic field of pathology, radiology, physical and occupational therapy, orthotics, and prosthetics. There must be opportunity for prolonged personal posthospital follow-up of patients cared for by the fellows.

D. It is desirable that the educational program be affiliated with a facility in which there is additional accredited training in surgery, plastic surgery, and orthopaedic surgery, as well as in other medical and surgical specialties and subspecialties.

E. There must be close monitoring of the interface between residency and fellowship education. It is imperative that orthopaedic fellowship education not interfere with the education of residents. Lines of responsibility for the orthopaedic resident and the fellow must be clearly defined. In addition, the fellow should maintain a close working relationship with orthopaedic residents and other fellows in orthopaedic surgery and in other disciplines.

III. Program Personnel

The program director and the teaching staff are responsible for the general administration of the program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director

The director of the hand surgery program and the director of the affiliated orthopaedic surgery program, in conjunction with the administration of the institution, will be responsible for ensuring that adequate facilities and other necessary resources are available to provide an education of high quality. There must be a single program director responsible for the program.

1. Qualifications of the program director include:
   a. Requisite and documented clinical, educational, and administrative abilities and experience.
   b. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)
   c. Certification by the American Board of Orthopaedic Surgery or equivalent qualifications.
   d. Appointment in good standing to the medical staff of an institution participating in the program.

2. Responsibilities of the program director include:
   a. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.
   b. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.
   c. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program.
   d. The supervision of residents in accordance with explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.
   e. Regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician. The program director, with participation of members of the teaching staff, shall:
      1. At least semiannually evaluate the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures.
      2. Communicate each evaluation to the resident in a timely manner.
      3. Advise residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.
      4. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.
   f. The provision of a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.
   g. Fellowship directors must ensure that residents are given reasonable duty and call assignments. It is desirable that fellows' work schedules be designed so that on average, excluding exceptional patient care needs, fellows have at least 1 day out of 7 free of routine responsibilities and be on call in the hospital no more often than every third night. Scheduling will necessitate flexibility, as fellows are at the postgraduate level, so the ratio of hours worked and on-call time may vary.
   h. Implementation of fair procedures as established by the sponsoring institution regarding academic discipline and resident complaints or grievances.
   i. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents.
Training situations that consistently produce undesirable stress on residents must be evaluated and modified.

j. Preparation of an accurate statistical and narrative description of the program as requested by the RRC.

B. Teaching Staff

1. There must be a sufficient number of teaching staff with documented qualifications to instruct and supervise adequately all the residents in the program.
2. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities.
3. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.
4. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.
5. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.
6. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

C. Other Program Personnel

Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

IV. Educational Program

A. The program must provide sufficiently advanced education to allow the fellow to acquire special expertise in hand surgery. This education must consist of academic and technical components.
   1. The academic component must emphasize a scholarly approach to clinical problem solving, self-directed study, teaching, development of analytic skills and surgical judgment, and research.
   2. The technical component should ensure the ability of the fellow to perform skillfully the procedures required for practice of the subspecialty.
B. A fellow must have the opportunity to provide consultation with faculty supervision and should have clearly defined educational responsibilities for residents, medical students, and allied health personnel. These teaching experiences should correlate basis biomedical knowledge with the clinical aspects of the subspecialty.
C. The program must offer supervised training in the operative and other technical skills integral to hand surgery. Instruction and experience must be sufficient for the fellow to understand the indications, risks, and limitations of the commonly performed procedures in the subspecialty.
D. Clinical experience must include opportunities to observe and manage patients of all ages with a wide variety of disorders of the upper extremity, as well as to learn the effectiveness of therapeutic programs.
E. The program must be structured to permit the fellow to develop diagnostic, procedural, and technical skills essential to the performance of hand surgery. It must provide for basic and advanced training and education as well as personal operative experience at the highest level to ensure the production of highly qualified hand surgeons.
F. The program must provide opportunities for fellows to develop clinical competence in the field of hand surgery. Examples of opportunities that are desirable for the development of knowledge and skills specific to hand surgery include but are not limited to trauma and its sequelae, congenital and developmental disorders, infectious and metabolic disorders, neoplasia, vascular disorders, and degenerative and rheumatologic diseases.
G. There must be experience in the development and execution of a treatment plan (including the appropriate technical skills) to manage patients with the above disorders. This opportunity must include experience in the clinical diagnosis and interpretation of laboratory data relative to the above disorders.
H. Experience in microsurgery and other special technology relative to the management of hand problems must be provided, as well as experience in the special diagnostic skills such as electrodagnosis and radiology relative to treating problems of the hand.
I. The spectrum of education shall extend from the initial management of the patient through aftercare, rehabilitation, and the final evaluation.

V. Program Research and Scholarly Activity

A. Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility.
B. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:
   1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.
   2. Participation in journal clubs and research conferences.
   3. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.
   4. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.
   5. Offering of guidance and technical support (e.g. research design, statistical analysis) for residents involved in research.
   6. Provision of support for resident participation in scholarly activities.
C. Fellows must participate in basic and/or clinical research.
   1. Fellows must learn to design, implement, and interpret research studies under supervision by qualified faculty.
   2. The program must provide time and facilities for research activities by fellows.

VI. Library

A. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.
B. Library services should include the electronic retrieval of information from medical databases.
Program Requirements for Residency Education in Hand Surgery

3. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

VII. Evaluation

A. Program directors must have a clearly defined method for regular periodic assessment of the performance of the fellow. The assessment must include cognitive, motor, and interpersonal skills, attitudinal traits, and surgical judgment. There must be at least semiannual communication of this information to the fellow and to the director of the residency program in orthopaedic surgery.

B. The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Written evaluations by residents should be utilized in this process.

ACGME: June 1985 Effective: July 1985

Program Requirements for Residency Education in Musculoskeletal Oncology

I. Introduction

A. Postgraduate fellowship education in orthopaedic surgery is a component in the continuum of the educational process, and such education will take place after completion of an accredited residency. Graduate medical education programs in the subspecialties of orthopaedic surgery will be accredited to offer 12 months of education.

B. Postgraduate fellowship programs in the subspecialties of orthopaedic surgery may be accredited in institutions that sponsor accredited residency programs in orthopaedic surgery or that are affiliated with an Accreditation Council for Graduate Medical Education (ACGME)-accredited orthopaedic surgery residency. Requests for exceptions to this policy will be reviewed on a case-by-case basis.

C. When orthopaedic residents and fellows are being educated in the same institution, the residency director and the director of the fellowship must jointly prepare and approve a written agreement specifying the educational relationship between the residency and fellowship programs, the roles of the residency and fellowship directors in determining the educational program of residents and fellows, and the roles of the residents and fellows in patient care.

D. The director and teaching staff of a program must prepare and comply with written educational goals for the program. All educational components of a program should be related to program goals.

1. The program design and/or structure must be approved by the Residency Review Committee (RRC) as part of the regular review process.

2. Participation by any institution providing more than 2 months of training must be approved by the RRC.

II. Institutional Resources and Organization

A. Programs must provide an intellectual environment for acquiring the knowledge, skills, clinical judgment, and attitudes essential to the practice of musculoskeletal oncology. This objective can be achieved only when the program director, the supporting faculty and staff, and the administration are fully committed to the educational program and when appropriate resources and facilities are present. Effective graduate education is not achieved when the educational program functions primarily to meet service commitments.

B. A sufficient number of new and follow-up patients must be available to ensure adequate inpatient and outpatient experience for each fellow without adversely diluting the educational experience of the orthopaedic surgery residents or the educational experience of residents in other specialties.

C. There must be close monitoring of the interface between residency and fellowship education. It is imperative that orthopaedic fellowship education not interfere with the education of residents. Lines of responsibility for the orthopaedic resident and fellow must be clearly defined. In addition, the fellow should maintain a close working relationship with orthopaedic residents and other fellows in orthopaedic surgery and in other disciplines.

D. There should be broad support from other clinical specialties, including diagnostic and therapeutic radiology, pediatrics, nuclear medicine, pathology, surgery, and its subspecialties, medical oncology. Support of oncologic nursing, rehabilitation, nutrition, dietetic, and social services, as well as physical and occupational rehabilitation, is desirable.

E. Modern facilities to accomplish the overall educational program must be available and functioning. These include inpatient ambulatory care and laboratory resources. Specifically, there should be advanced pathology services, including electron microscopy and immunohistochemistry; resources for nuclear magnetic imaging; musculoskeletal radiography, and computed tomographic scanning; and sufficient facilities for qualitative and quantitative studies.

F. The fellow must have day-to-day access to pathologists and radiologists with recognized expertise in musculoskeletal pathology and radiology.

G. On-site radiation and medical oncology facilities and a modern diagnostic radiologic service are necessary.

H. It is desirable that there be other clinical subspecialties of orthopaedic surgery and general surgery to which the orthopaedic oncology fellow may relate formally, as well as special facilities for musculoskeletal pathology.

1. There must be a minimum of 200 new cases of benign and malignant tumors with an appropriate mix of primary and metastatic lesions to afford the fellow adequate educational experience in musculoskeletal oncology. This experience must include the care of both inpatients and outpatients.

J. The program should include access to computer facilities and a teaching collection of slides, x-rays, and specimens that are appropriately indexed for easy retrieval.

III. Program Personnel

The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director

The director of the subspecialty program and the director of the affiliated orthopaedic surgery program, in conjunction with the administration of the institution, will be responsible for ensuring that adequate facilities and other necessary resources are available to provide an education of high quality.

There must be a single program director responsible for the program.

1. Qualifications of the program director include:

a. Requisite and documented clinical, educational, and administrative abilities and experience.
Program Requirements for Residency Education in Musculoskeletal Oncology

b. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)

c. Certification by the American Board of Orthopaedic Surgery or suitable equivalent qualifications.

d. Appointment in good standing to the medical staff of an institution participating in the program.

2. Responsibilities of the program director include:

a. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.

b. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.

c. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program.

d. The supervision of residents in accordance with explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.

e. Regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician. The program director, with participation of members of the teaching staff, shall:
   1. At least semiannually evaluate the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures.
   2. Communicate each evaluation to the resident in a timely manner.
   3. Advance residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.
   4. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.

f. The provision of a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.

g. Fellowship directors must ensure that trainees are given reasonable duty and call assignments. It is desirable that fellows' work schedules be designed so that on average, excluding exceptional patient care needs, fellows have at least 1 day out of 7 free of routine responsibilities and be on call in the hospital no more often than every third night. Scheduling will necessitate flexibility, as fellows are at the postgraduate level, so the ratio of hours worked and on-call time may vary.

h. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.

i. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents.

Training situations that consistently produce undesirable stress on residents must be evaluated and modified.

j. Preparation of an accurate statistical and narrative description of the program as requested by the ACGME.

B. Teaching Staff

1. There must be a sufficient number of teaching staff with documented qualifications to instruct and supervise adequately all the residents in the program.

2. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities.

3. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.

4. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

5. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

6. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

C. Other Program Personnel

Programs must provide the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

IV. Educational Program

A. The fellowship must provide sufficiently advanced education to allow the fellow to acquire the expertise of a specialist in musculoskeletal oncology. This education must consist of academic and technical components.

1. The academic component must emphasize a scholarly approach to clinical problem solving, self-directed study, teaching, development of analytic skills and surgical judgment, and research.

2. The technical component should ensure the ability of the fellow to perform skilfully the procedures required for practice of the subspecialty.

B. The program must offer supervised training in the operative and other technical skills integral to musculoskeletal oncology. Instruction and experience must be sufficient for the fellow to understand the indications, risks, and limitations of the commonly performed procedures in the subspecialty.

C. Fellows must have the opportunity to provide consultation with faculty supervision and should have clearly defined educational responsibilities for residents, medical students, and allied health personnel. These teaching experiences should correlate basic biomedical knowledge with the clinical aspects of the subspecialty.

D. The educational program in musculoskeletal oncology must be organized to provide experience at a sufficient level for the fellow to acquire the competency of a specialist in the field. Clinical experience must include opportunities to observe and to manage
patients with a wide variety of clinical orthopaedic oncologic problems on both an inpatient and an outpatient basis.

E. The fellow must be given an opportunity to assume continuing responsibility for both acutely and chronically ill patients to learn the natural history of musculoskeletal neoplasia as well as the effectiveness of therapeutic programs.

F. There should be a weekly multidisciplinary tumor conference involving radiation and medical oncologists, a weekly pathology conference, and ongoing prospective protocol studies.

G. The educational curriculum must include sufficient material to ensure that the fellow acquires basic knowledge in surgical oncology, radiation therapy, and chemotherapy.

H. The program must provide training to develop clinical competence in the overall field of musculoskeletal oncology. Examples of knowledge and skill that are desirable include but are not limited to the following:

1. The natural history of musculoskeletal neoplasia
2. Knowledge of musculoskeletal surgical pathology
3. Management of treatment protocols
4. Knowledge of the indications for and limitations of surgery, radiation therapy, and chemotherapy in the treatment of musculoskeletal neoplasms
5. Knowledge of the methodology and techniques to perform credible clinical and/or basic research in musculoskeletal oncology
6. Acquaintance with musculoskeletal pathology and oncology

V. Program Research and Scholarly Activity

A. Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility.

B. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:

1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.
2. Participation in journal clubs and research conferences.
3. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.
4. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.
5. Offering of guidance and technical support (e.g., research design, statistical analysis) for residents involved in research.
6. Provision of support for resident participation in scholarly activities.

C. Fellows must participate in basic and/or clinical research.

1. Fellows must learn to design, implement, and interpret research studies under supervision by qualified faculty.
2. The program must provide time and facilities for research activities by fellows.

VI. Library

1. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.
2. Library services should include the electronic retrieval of information from medical databases.
3. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

VI. Evaluation

A. Program directors must have a clearly defined method for regular periodic assessment of the performance of the fellow. The assessment must include cognitive, motor, and interpersonal skills; attitudinal traits; and surgical judgment. There must be at least semiannual communication of this information to the fellow and to the director of the residency program in orthopaedic surgery.

B. The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Written evaluations by residents should be utilized in this process.

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Program Requirements for Residency Education in Orthopaedic Sports Medicine

I. Introduction

A. Postgraduate fellowship education in orthopaedic surgery is a component in the continuum of the educational process, and such education will take place after completion of an accredited residency. Graduate medical education programs in the subspecialties of orthopaedic surgery will be accredited to one 12 months of education.

B. Postgraduate fellowship programs in the subspecialties of orthopaedic surgery may be accredited in institutions that sponsor accredited residency programs in orthopaedic surgery or that are affiliated with an Accreditation Council for Graduate Medical Education (ACGME)-accredited orthopaedic surgery residency. Requests for exceptions to this policy will be reviewed on a case-by-case basis.

C. When orthopaedic residents and fellows are being educated in the same institution, the residency director and the director of the fellowship must jointly prepare and approve a written agreement specifying the educational relationship between the residency and fellowship programs, the roles of the residency and fellowship directors in determining the educational program of residents and fellows, and the roles of the residents and fellows in patient care.

D. The director and teaching staff of a program must prepare and comply with written educational goals for the program. All educational components of a program should be related to program goals.

1. The program design and/or structure must be approved by the Residency Review Committee (RRC) as part of the regular review process.
2. Participation by any institution providing more than 2 months of training must be approved by the RRC.
II. Institutional Resources and Organization

A. Programs must provide an intellectual environment for acquiring the knowledge, skills, clinical judgment, and attitudes essential to the practice of orthopaedic sports medicine. This objective can be achieved only when the program director, the supporting faculty and staff, and the administration are fully committed to the educational program and when appropriate resources and facilities are present. Effective graduate education is not achieved when the educational program functions primarily to meet service commitments.

B. A sufficient number of new and follow-up patients must be available to ensure adequate inpatient and outpatient experience for each fellow without adversely diluting the educational experience of the orthopaedic surgery residents or the educational experience of residents in other specialties.

C. There must be close monitoring of the interface between residency and fellowship education. It is imperative that orthopaedic fellowship education not interfere with the education of residents. Lines of responsibility for the orthopaedic resident and the fellow must be clearly defined. In addition, the fellow should maintain a close working relationship with orthopaedic residents and other fellows in orthopaedic surgery and in other disciplines.

D. Facilities to accomplish the clinical and educational objectives of the specialty must be available and functioning for both inpatients and outpatients.

1. The physical therapy and the athletic training departments must be completely equipped with the modern therapeutic modalities used in the treatment of the injured athlete.

2. The operating room facilities must contain modern equipment, including arthroscopes, adjunctive equipment for arthroscopy, and necessary radiologic equipment.

E. The educational program must be conducted in a setting that will allow interaction with the disciplines of radiology, physical therapy, internal medicine, and such other specialties ordinarily encountered in sports medicine.

III. Program Personnel

The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director

The director of the subspecialty program and the director of the affiliated orthopaedic surgery program, in conjunction with the administration of the institution, will be responsible for ensuring that adequate facilities and other necessary resources are available to provide an education of high quality.

There must be a single program director responsible for the program.

1. Qualifications of the program director include:

a. Requisite and documented clinical, educational, and administrative abilities and experience.

b. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)

c. Certification by the American Board of Orthopaedic Surgery or suitable equivalent qualifications.

d. Appointment in good standing to the medical staff of an institution participating in the program.

2. Responsibilities of the program director include:

a. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.

b. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.

c. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program.

d. The supervision of residents in accordance with explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.

e. Regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician. The program director, with participation of members of the teaching staff, shall:

1. At least semiannually evaluate the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures.

2. Communicate each evaluation to the resident in a timely manner.

3. Advise residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.

4. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.

f. The provision of a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.

g. Fellowship directors must ensure that trainees are given reasonable duty and call assignments. It is desirable that fellows' work schedules be designed so that on average, excluding exceptional patient care needs, fellows have at least 1 day out of 7 free of routine responsibilities and be on call in the hospital no more often than every third night. Scheduling will necessitate flexibility, as fellows are at the postgraduate level, so the ratio of hours worked and on-call time may vary.

h. Implementation of fair procedures as established by the sponsoring institution regarding academic discipline and resident complaints or grievances.

i. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.

j. Preparation of an accurate statistical and narrative description of the program as requested by the RRC.

B. Teaching Staff

1. There must be a sufficient number of teaching staff with documented qualifications to instruct and supervise adequately all the residents in the program.

2. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities.
Program Requirements for Residency Education in Orthopaedic Sports Medicine

3. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.

4. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

5. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

6. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

C. Other Program Personnel

Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

IV. Educational Program

A. The fellowship must provide sufficiently advanced education to allow the fellow to acquire the expertise of a specialist in orthopaedic sports medicine. This education must consist of academic and technical components.

1. The academic component must emphasize a scholarly approach to clinical problem solving, self-directed study, teaching, development of analytic skills and surgical judgment, and research.

2. The technical component should ensure the ability of the fellow to perform skillfully the procedures required for practice of the subspecialty.

B. The program must offer supervised training in the operative and other technical skills integral to orthopaedic sports medicine. Instruction and experience must be sufficient for the fellow to understand the indications, risks, and limitations of the commonly performed procedures in the subspecialty.

C. Fellows must have the opportunity to provide consultation with faculty supervising and should have clearly defined educational responsibilities for residents, medical students, and allied health personnel. These teaching experiences should correlate basic biomedical knowledge with the clinical aspects of the subspecialty.

D. Clinical experience must include inpatient and outpatient opportunities to observe, manage, operate, and follow patients with a wide variety of sports medicine problems.

E. The program must be structured to provide the fellow with an opportunity to assume and maintain responsibility with appropriate supervision for patients with acute and chronic injuries and to observe the normal course of athletic injuries and the effects of various therapeutic modalities on their outcome.

F. The program should provide the fellow with the opportunity to work with athletic teams and/or athletic organizations.

G. The program must emphasize the pathology and biomechanics of athletic injuries and the effects of injury on the athlete, including both physical and psychological manifestations. Appropriate utilization of laboratory tests, physical modalities, and operative procedures for the diagnosis and treatment of athletic injuries must be stressed.

H. The program must provide the fellow with specific experience with athletic trainers and physical therapists and with related experience in writing appropriate prescriptions and in monitoring patient progress.

I. The program must provide sufficient opportunity for the fellow to gain knowledge and skill in a number of areas that include but are not limited to:

1. Taking a history and performing an appropriate physical examination for orthopaedic sports injuries.

2. Exposure to patients with typical histories and physical findings of chronic orthopaedic sports injuries and the management of those injuries.

3. Differentiating between those sports injuries that require immediate surgical treatment and those that can be treated nonoperatively.

4. Recognizing those sports injuries for which a minor delay in treatment would not be deleterious to the patient.

5. Acute care of orthopaedic and other acute sports medicine injuries that may occur during athletic competition and how to deal with those injuries on the athletic field.

6. How to order and interpret radiologic examinations that are used for diagnosis of sports injuries, including specific views, tomograms, bone scans, arthrograms, computerized axial tomography scans, and magnetic resonance imaging.

7. Therapeutic modalities offered in the department of physical therapy, how to use them, and how to judge the appropriateness and efficacy of a treatment plan.

8. Diagnostic and operative arthroscopy.

9. Nonorthopaedic problems that occur in sports medicine and how to deal with those problems or how to refer them appropriately.

10. The psychological effect of injuries on athletes and how to deal with them or how to select consultants to assist in their management.

11. Sports equipment, particularly protective devices intended to allow the athlete to continue to compete, including helmets, protective pads, knee braces, foot orthotics, and others not specifically named.

V. Program Research and Scholarly Activity

A. Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility.

B. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:

1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.

2. Participation in journal clubs and research conferences.

3. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.

4. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.

5. Offering of guidance and technical support (eg, research design, statistical analysis) for residents involved in research.
6. Provision of support for resident participation in scholarly activities.
C. Fellows must participate in basic and/or clinical research.
1. Fellows must learn to design, implement, and interpret research studies under supervision by qualified faculty.
2. The program must provide time and facilities for research activities by fellows.

VI. Library
1. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.
2. Library services should include the electronic retrieval of information from medical databases.
3. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

VII. Evaluation
A. Program directors must have a clearly defined method for regular periodic assessment of the performance of the fellow. The assessment must include cognitive, motor, and interpersonal skills; attitudinal traits; and surgical judgment. There must be at least semiannual communication of this information to the fellow and to the director of the residency program in orthopaedic surgery.
B. The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Written evaluations by residents should be utilized in this process.

ACGME: June 1996 Effective: July 1995

Program Requirements for Residency Education in Orthopaedic Surgery of the Spine

I. Introduction
A. Subspecialty training in orthopaedic spine surgery includes the in-depth study, prevention, and treatment of spinal column diseases, disorders, and injuries by medical, physical, and surgical methods. The educational program of a fellowship in orthopaedic surgery of the spine must be organized to provide sufficient experience for a fellow to acquire the competency of a specialist in the field.
B. Postgraduate fellowship education in orthopaedic surgery is a component in the continuum of the educational process, and such education will take place after completion of an accredited residency. Graduate medical education programs in the subspecialties of orthopaedic surgery will be accredited to offer 12 months of education.
C. Postgraduate fellowship programs in the subspecialties of orthopaedic surgery may be accredited in institutions that sponsor accredited residency programs in orthopaedic surgery or that are affiliated with an Accreditation Council for Graduate Medical Education (ACGME)-accredited orthopaedic surgery residency. Requests for exceptions to this policy will be reviewed on a case-by-case basis.
D. When orthopaedic residents and fellows are being educated in the same institution, the residency director and the director of the fellowship must jointly prepare and approve a written agreement specifying the educational relationship between the residency and fellowship programs, the roles of the residency and fellowship directors in determining the educational program of residents and fellows, and the roles of the residents and fellows in patient care.
E. The director and teaching staff of a program must prepare and comply with written educational goals for the program. All educational components of a program should be related to program goals.
1. The program design and/or structure must be approved by the Residency Review Committee (RRC) as part of the regular review process.
2. Participation by any institution providing more than 2 months of training must be approved by the RRC.

II. Institutional Resources and Organization
A. Programs must provide an intellectual environment for acquiring the knowledge, skills, clinical judgment, and attitudes essential to the practice of spine surgery. This objective can be achieved only when the program director, the supporting faculty and staff, and the administration are fully committed to the educational program and when appropriate resources and facilities are present. Effective graduate education is not achieved when the educational program functions primarily to meet service commitments.
B. A sufficient number of new and follow-up patients must be available to ensure adequate inpatient and outpatient experience for each fellow without adversely diluting the educational experience of the orthopaedic surgery residents or the educational experience of residents in other specialties.
C. There must be adequate monitoring of the interface between residency and fellowship education. It is imperative that orthopaedic fellowship education not interfere with the education of residents. Lines of responsibility for the orthopaedic resident and the fellow must be clearly defined. In addition, the fellow should maintain a close working relationship with orthopaedic residents and other fellows in orthopaedic surgery and in other disciplines.
D. Facilities and equipment to support the overall educational program must be readily available and functioning. These include outpatient, inpatient, imaging, laboratory, rehabilitation, and research resources. Operating rooms must be state of the art and contain modern equipment for surgery of the spine.
E. Institutions sponsoring programs in orthopaedic surgery of the spine should also have an ACGME-accredited residency in neurological surgery. The educational program must involve close cooperation with neurological surgery and should maintain close collegial relationships with related clinical specialties including but not limited to physical medicine and rehabilitation, neurology, radiology, pathology, laboratory medicine, anesthesiology, and infectious disease. Exceptions to this standard will be considered on a case-by-case basis and will require justification based on sound educational principles, as well as demonstration of substantial compliance with the intent of this requirement.

III. Program Personnel
The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director
The director of the subspecialty program and the director of the affiliated orthopaedic surgery program, in conjunction with the
administration of the institution, will be responsible for ensuring that adequate facilities and other necessary resources are available to provide an education of high quality.

There must be a single program director responsible for the program.

1. Qualifications of the program director include:
   a. Requisite and documented clinical, educational, and administra- tive abilities and experience.
   b. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal pro- grams are exempted.)
   c. Certification by the American Board of Orthopaedic Surgery or suitable equivalent qualifications.
   d. Appointment in good standing to the medical staff of an institution participating in the program.

2. Responsibilities of the program director include:
   a. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.
   b. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.
   c. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program.
   d. The supervision of residents in accordance with explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.
   e. Regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician. The program director, with participation of members of the teaching staff, shall:
      i. At least semi-annually evaluate the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures.
   2. Communicate each evaluation to the resident in a timely manner.
   3. Advance residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.
   4. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.
   f. The provision of a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.
   g. Fellowship directors must ensure that trainees are given reason- able duty and call assignments. It is desirable that fellows' work schedules be designed so that on average, excluding exception-nal patient care needs, fellows have at least 1 day out of 7 free of routine responsibilities and be on call in the hospital no more often than every third night. Scheduling will necessitate flexibility, as fellows are at the postgraduate level, so the ratio of hours worked and on-call time may vary.
   h. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.
   i. Monitoring resident stress, including mental or emotional condi- tions inhibiting performance or learning and drug- or alcohol- related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.
   j. Preparation of an accurate statistical and narrative description of the program as requested by the RRC.

B. Teaching Staff

1. There must be a sufficient number of teaching staff with docu- mented qualifications to instruct and supervise adequately all the residents in the program.
2. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities.
3. All members of the teaching staff must demonstrate a strong inter- est in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.
4. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordina- tion by the program director.
5. The teaching staff must be organized and have regular docu- mented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.
6. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and adminis- trative support of the program, the volume and variety of pa- tients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

C. Other Program Personnel

Programs must be provided with the additional professional, techni- cal, and clerical personnel needed to support the administration and educational conduct of the program.

IV. Educational Program

A. The fellowship must provide sufficiently advanced education to allow the fellow to acquire the expertise of a specialist in orthopaedic surgery of the spine. This education must consist of academic and technical components.

1. The academic component must emphasize a scholarly approach to clinical problem solving, self-directed study, teaching, development of analytic skills and surgical judgment, and research.
2. The technical component should ensure the ability of the fel- low to perform skillfully the procedures required for practice of the subspecialty.

B. The program must offer supervised training in the operative and other technical skills integral to orthopaedic surgery of the spine. Instruction and experience must be sufficient for the fel- low to understand the indications, risks, and limitations of the commonly performed procedures in the subspecialty.

C. Fellows must have the opportunity to provide consultation with faculty supervision and should have clearly defined educational responsibilities for residents, medical students, and allied health
personnel. These teaching experiences should correlate basic biomedical knowledge with the clinical aspects of the subspecialty.

D. The fellows' clinical experience must include opportunities to observe and manage patients on both an inpatient and an outpatient basis as well as for the evaluation and care of individuals through a wide range of ages and of both sexes, and with a wide variety of problems in various spinal regions.

E. The educational curriculum must include anatomy, physiology, biomechanics, microbiology, pathology, and other sciences as they relate to orthopaedic surgery of the spine.

F. The program must have regularly scheduled and held subspecialty conferences with active faculty and fellow participation.

G. The program must emphasize the diagnosis of clinical disorders of the spine, the pathogenesis of these disorders, the operative and nonoperative treatment modalities available for managing these disorders, and the results and complications of each treatment.

H. The educational program will not include experiences in the treatment of intradural pathology. When spinal disease is injury and neurological deficit coexist, the educational program will ensure appropriate interdisciplinary cooperation with neurological surgery and rehabilitation medicine. The program structure must ensure that the fellow plays a major role and has progressive responsibility in the assessment, preoperative evaluation, surgical care, and postoperative management and rehabilitation of patients. There must be an opportunity for continuing evaluation of treated patients.

I. Fellows must maintain a record of the diagnosis and procedure for each operation in which they are operating surgeon or first assistant that is available for review by the RAC and its site visitors.

J. Fellows must have the opportunity to develop clinical competence in the field of orthopaedic surgery of the spine. Principles may be broadly based or taught in a context of specific anatomic regions. Examples of knowledge and skills that are essential include but are not limited to:

1. The basic sciences related to the musculoskeletal system.
2. The natural history of spinal degeneration.
3. The ability to assess clinically the neurologic function of the spinal cord and nerve roots.
4. Prudent use of diagnostic laboratory tests (including electrodiagnostic monitoring).
5. Indications for and interpretation of imaging studies of the spine, including an appreciation of the risk and information expected of the procedures.
6. Development of a treatment plan to manage patients with traumatic, congenital, developmental, infectious, metabolic, degenerative, and rheumatologic disorders of the spine.
7. Development of operative skills for the management of patients with orthopaedic disorders of the spine.
8. Recognition and management of complications of treatment (including appropriate consultations with subspecialists).
10. Familiarity with currently used research methods.
11. Acquisition of teaching skills in evaluation and care of spinal problems.

V. Program Research and Scholarly Activity

A. Graduate medical education must take place in an environment of inquiry and scholarship, in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility.

B. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:

1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.
2. Participation in journal clubs and research conferences.
3. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.
4. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.
5. Offering of guidance and technical support (eg, research design, statistical analysis) for residents involved in research.
6. Provision of support for resident participation in scholarly activities.

C. Fellows must participate in basic and/or clinical research.

1. Fellows must learn to design, implement, and interpret research studies under supervision by qualified faculty.
2. The program must provide time and facilities for research activities by fellows.

VI. Library

1. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.
2. Library services should include the electronic retrieval of information from medical databases.
3. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

VII. Evaluation

A. Program directors must have a clearly defined method for regular periodic assessment of the performance of the fellow. The assessment must include cognitive, motor, and interpersonal skills; attitudinal traits; and surgical judgment. There must be at least semiannual communication of this information to the fellow and to the director of the residency program in orthopaedic surgery.

B. The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Written evaluations by residents should be utilized in this process.

ACGME: February 1991 Effective: July 1995

Program Requirements for Residency Education in Orthopaedic Trauma

I. Introduction

A. Orthopaedic trauma is a subspecialty of orthopaedic surgery that includes the in-depth study and treatment of injuries to the locomotor system and their sequelae. An educational program in or-
orthopaedic trauma must be organized to provide sufficient experience for fellows to acquire the competency of a specialist in the field.

B. Postgraduate fellowship education in orthopaedic surgery is a component in the continuum of the educational process, and such education will take place after completion of an accredited residency. Graduate medical education programs in the subspecialties of orthopaedic surgery will be accredited to offer 12 months of education.

C. Postgraduate fellowship programs in the subspecialties of orthopaedic surgery may be accredited in institutions that sponsor accredited residency programs in orthopaedic surgery or that are affiliated with an Accreditation Council for Graduate Medical Education (ACGME)-accredited orthopaedic surgery residency. Requests for exceptions to this policy will be reviewed on a case-by-case basis.

D. When orthopaedic residents and fellows are being educated in the same institution, the residency director and the director of the fellowship must jointly prepare and approve a written agreement specifying the educational relationship between the residency and fellowship programs, the roles of the residency and fellowship directors in determining the educational program of residents and fellows, and the roles of the residents and fellows in patient care.

E. The director and teaching staff of a program must prepare and comply with written educational goals for the program. All educational components of a program should be related to program goals.

1. The program design and/or structure must be approved by the Residency Review Committee (RRC) as part of the regular review process.

2. Participation by any institution providing more than 2 months of training must be approved by the RRC.

II. Institutional Resources and Organization

A. Programs must provide an intellectual environment for acquiring the knowledge, skills, clinical judgment, and attitudes essential to the practice of orthopaedic trauma. This objective can be achieved only when the program director, the supporting faculty and staff, and the administration are fully committed to the educational program and when appropriate resources and facilities are present. Effective graduate education is not achieved when the educational program functions primarily to meet service commitments.

B. A sufficient number of new and follow-up patients must be available to ensure adequate inpatient and outpatient experience for each fellow without adversely diluting the educational experience of the orthopaedic surgery residents or the educational experience of residents in other specialties.

C. There must be close monitoring of the interface between residency and fellowship education. It is imperative that orthopaedic fellowship education not interfere with the education of residents. Lines of responsibility for the orthopaedic resident and the fellow must be clearly defined. In addition, the fellow should maintain a close working relationship with orthopaedic residents and other fellows in orthopaedic surgery and in other disciplines.

D. Modern facilities to support the overall educational program must be available and functioning. The primary hospital in which the fellow works must be a Level I or II trauma center or equivalent with 24-hour full services, acute and emergency surgery, and at least 50 cases of major trauma each year. It must have a modern operating room facility, image intensification, compatible fracture table, orthopaedic implants in stock, and ideally, a special room dedicated to acute and emergency surgery.

E. There must be access to records and x-rays of orthopaedic trauma cases for at least 5 years following patient discharge with computerized or some other efficient coding system. There should be photographic records and photography support readily available.

F. There must be broad support and cooperation from other clinical services, particularly emergency medicine, general surgery, neurosurgery, anesthesia, intensive care, and radiology (including computed tomography and angiography available on an emergency basis). Plastic surgery, urology, otorhinyngology, ophthalmology, and pulmonary medical specialists also should be available to provide emergency consultation.

III. Program Personnel

The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director

The director of the subspecialty program and the director of the affiliated orthopaedic surgery program, in conjunction with the administration of the institution, will be responsible for ensuring that adequate facilities and other necessary resources are available to provide an education of high quality. There must be a single program director responsible for the program.

1. Qualifications of the program director include:
   a. Requisite and documented clinical, educational, and administrative abilities and experience.
   b. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)
   c. Certification by the American Board of Orthopaedic Surgery or suitable equivalent qualifications.
   d. Appointment in good standing to the medical staff of an institution participating in the program.

2. Responsibilities of the program director include:
   a. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.
   b. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.
   c. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program.
   d. The supervision of residents in accordance with explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.
   e. Regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician. The program director, with participation of members of the teaching staff, shall:
      1. At least semiannually evaluate the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures.
      2. Communicate each evaluation to the resident in a timely manner.
3. Advance residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.
4. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.
f. The provision of a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.
g. Fellowship directors must ensure that trainees are given reasonable duty and call assignments. It is desirable that fellows' work schedules be designed so that on average, excluding exceptional patient care needs, fellows have at least 1 day out of 7 free of routine responsibilities and be on call in the hospital no more often than every third night. Scheduling will necessitate flexibility, as fellows are at the postgraduate level, so the ratio of hours worked and on-call time may vary.
h. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.
i. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.
j. Preparation of an accurate statistical and narrative description of the program as requested by the RRC.

B. Teaching Staff
1. There must be a sufficient number of teaching staff with documented qualifications to instruct and supervise adequately all the residents in the program.
2. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities.
3. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.
4. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.
5. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.
6. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

E. Other Program Personnel
Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

IV. Educational Program
A. The fellowship must provide sufficiently advanced education to allow the fellow to acquire the expertise of a specialist in orthopaedic trauma. This education must consist of academic and technical components.
1. The academic component must emphasize a scholarly approach to clinical problem solving, self-directed study, teaching, development of analytic skills and surgical judgment, and research.
2. The technical component should ensure the ability of the fellow to perform skillfully the procedures required for practice of the subspecialty.
B. The program must offer supervised training in the operative and other technical skills integral to the treatment of orthopaedic trauma. Instruction and experience must be sufficient for the fellow to understand the indications, risks, and limitations of the commonly performed procedures in the subspecialty.
C. Fellows must have the opportunity to provide consultation with faculty supervision and should have clearly defined educational responsibilities for residents, medical students, and allied health personnel. These teaching experiences should correlate basic biomedical knowledge with the clinical aspects of the subspecialty.
D. Clinical experience must include opportunities to observe and to manage patients with a wide variety of problems in orthopaedic trauma, and the breadth of patient experience should include the evaluation and care of individuals of a wide range of ages and both sexes. Generally, care of these patients involves several specialties and a cooperative effort in trauma centers.
E. The educational curriculum must include opportunities for fellows to study anatomy, physiology, biomechanics, pathophysiology, microbiology, pharmacology, and immunology as they relate to orthopaedic trauma.
F. The program must hold regularly scheduled subspecialty conferences, including at least one weekly teaching conference, a monthly morbidity/mortality conference, and a monthly conference with other trauma services, with active faculty and fellow participation.
G. The program must emphasize the diagnosis of clinical orthopaedic trauma problems, the mechanism of injury, the treatment modalities available, and the results and complications of such treatment. Fellows must have the opportunity to assume a major role in the continuity of care of patients and have progressive responsibility for patient assessment, preoperative planning, operative experience, postoperative intensive care, other postoperative management, rehabilitation, and other outpatient care of patients.
H. The fellow must keep a record of the diagnosis and procedure for each operation in which he/she is an operating surgeon or first assistant. This must be kept on file and available for review.
I. The fellowship program must provide sufficient training to permit fellows to develop clinical competence in the field of orthopaedic trauma, and in resuscitation as applied to the patient with polytrauma. Examples of knowledge and skills that are desirable include but are not limited to the following:
1. The basic sciences related to orthopaedic trauma.
2. An understanding of the integration of the orthopaedic traumatologist in a trauma team and an appreciation of the importance of the timing of orthopaedic procedures in the overall care of the severely injured patient.
3. Indications for various types of internal and external fixation devices and their applications in multiple trauma situations, both in the axial and appendicular skeletons.
Program Requirements for Residency Education in Orthopedic Trauma

4. Prophylactic and treatment protocols for severe soft-tissue injuries and secondary organ failures in polytrauma.
5. Indications for early or immediate amputation rather than salvage attempts in severely injured limbs.
6. Pathophysiology of severe musculoskeletal trauma and secondary organ failure.
7. Psychiatric and psychologic implications of severe musculoskeletal trauma for the patient and family members.
8. Recuperative and rehabilitation techniques and use of physical and occupational therapy designed to return the patient to normal activities and work.
9. Sufficient familiarity with current research methods to enable the fellow to critically analyze research reports and to design and implement clinical or basic research in the field of musculoskeletal trauma.
10. Teaching skills and lecture techniques and materials in orthopaedic traumatology.
11. Overall, the fellow must develop medical, surgical and psychosocial skills in the management of the severely injured patient.

V. Program Research and Scholarly Activity
A. Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility.
B. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:
   1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.
   2. Participation in journal clubs and research conferences.
   3. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.
   4. Participation in research, particularly in projects that are funded following peer review or as a result in publications or presentations at regional and national scientific meetings.
   5. Offering of guidance and technical support (e.g., research design, statistical analysis) for residents involved in research.
   6. Provision of support for resident participation in scholarly activities.
C. Fellows must participate in basic and/or clinical research.
   1. Fellows must learn to design, implement, and interpret research studies under supervision by qualified faculty.
   2. The program must provide time and facilities for research activities by fellows.

VI. Library
1. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.
2. Library services should include the electronic retrieval of information from medical databases.
3. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

VII. Evaluation
A. Program directors must have a clearly defined method for regular periodic assessment of the performance of the fellow. The assessment must include cognitive, motor, and interpersonal skills; attitudinal traits; and surgical judgment. There must be at least semiannual communication of this information to the fellow and to the director of the residency program in orthopaedic surgery.
B. The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Written evaluations by residents should be utilized in this process.

ACGME: September 1989  Effective: July 1995

Program Requirements for Residency Education in Pediatric Orthopaedics

I. Introduction
A. Postgraduate fellowship education in orthopaedic surgery is a component in the continuum of the educational process, and such education will take place after completion of an accredited residency. Graduate medical education programs in the subspecialties of orthopaedic surgery will be accredited to offer 12 months of education.
B. Postgraduate fellowship programs in the subspecialties of orthopaedic surgery may be accredited in institutions that sponsor accredited residency programs in orthopaedic surgery or that are affiliated with an Accreditation Council for Graduate Medical Education (ACGME)-accredited orthopaedic surgery residency. Requests for exceptions to this policy will be reviewed on a case-by-case basis.
C. When orthopaedic residents and fellows are being educated in the same institution, the residency director and the director of the fellowship must jointly prepare and approve a written agreement specifying the educational relationship between the residency and fellowship programs, the roles of the residency and fellowship directors in determining the educational program of residents and fellows, and the roles of the residents and fellows in patient care.
D. The director and teaching staff of a program must prepare and comply with written educational goals for the program. All educational components of a program should be related to program goals.
   1. The program design and/or structure must be approved by the Residency Review Committee (RRC) as part of the regular review process.
   2. Participation by any institution providing more than 2 months of training must be approved by the RRC.

II. Institutional Resources and Organization
A. Programs must provide an intellectual environment for acquiring the knowledge, skills, clinical judgment, and attitudes essential to the practice of pediatric orthopaedics. This objective can be achieved only when the program director, the supporting faculty and staff, and the administration are fully committed to the educational program and when appropriate resources and facilities are present. Effective graduate education is not achieved when
the educational program functions primarily to meet service commitments.

B. A sufficient number of new and follow-up patients must be available to ensure adequate inpatient and outpatient experience for each fellow without adversely diluting the educational experience of the orthopaedic surgery residents or the educational experience of residents in other specialties.

C. There must be close monitoring of the interface between residency and fellowship education. It is imperative that orthopaedic fellowship education not interfere with the education of residents. Lines of responsibility for the orthopaedic resident and the fellow must be clearly defined. In addition, the fellow should maintain a close working relationship with orthopaedic residents and other fellows in orthopaedic surgery and in other disciplines.

D. Inpatient, ambulatory care, and laboratory facilities must be available and functioning.

E. The program must be conducted in a setting in which comprehensive surgical, medical, and pediatric consultation services are available.

III. Program Personnel

The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director

The director of the subspecialty program and the director of the affiliated orthopaedic surgery program, in conjunction with the administration of the institution, will be responsible for ensuring that adequate facilities and other necessary resources are available to provide an education of high quality.

There must be a single program director responsible for the program.

1. Qualifications of the program director include:
   a. Requisite and documented clinical, educational, and administrative abilities and experience.
   b. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted).
   c. Certification by the American Board of Orthopaedic Surgery or suitable equivalent qualifications.
   d. Appointment in good standing to the medical staff of an institution participating in the program.

2. Responsibilities of the program director include:
   a. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.
   b. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.
   c. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program.
   d. The supervision of residents in accordance with explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervising physicians.
   e. Regular evaluation of residents’ knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician. The program director, with participation of members of the teaching staff, shall:
      1. At least semiannually evaluate the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures.
      2. Communicate each evaluation to the resident in a timely manner.
      3. Advise residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.
      4. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.
   f. The provision of a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident’s performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be a part of the resident’s permanent record maintained by the institution.
   g. Fellowship directors must ensure that trainees are given reasonable duty and call assignments. It is desirable that fellows’ work schedules be designed so that on average, excluding exceptional patient care needs, fellows have at least 1 day out of 7 free of routine responsibilities and be on call in the hospital no more often than every third night. Scheduling will necessitate flexibility, as fellows are at the postgraduate level, so the ratio of hours worked and on-call time may vary.
   h. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.
   i. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.
   j. Preparation of an accurate statistical and narrative description of the program as requested by the RRC.

B. Teaching Staff

1. There must be a sufficient number of teaching staff with documented qualifications to instruct and supervise adequately all the residents in the program.

2. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities.

3. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.

4. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

5. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

6. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and admin-
administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

C. Other Program Personnel
Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

IV. Educational Program
A. The fellowship must provide sufficiently advanced education to allow the fellow to acquire the expertise of a specialist in pediatric orthopaedics. This education must consist of academic and technical components.
   1. The academic component must emphasize a scholarly approach to clinical problem solving, self-directed study, teaching, development of analytic skills and surgical judgment, and research.
   2. The technical component should ensure the ability of the fellow to perform skillfully the procedures required for practice of the subspecialty.
B. The program must offer supervised training in the operative and other technical skills integral to pediatric orthopaedics. Instruction and experience must be sufficient for the fellow to understand the indications, risks, and limitations of the commonly performed procedures in the subspecialty.
C. Fellows must have the opportunity to provide consultation with faculty supervision and should have clearly defined educational responsibilities for residents, medical students, and allied health personnel. These teaching experiences should correlate basic biomedical knowledge with the clinical aspects of the subspecialty.
D. The fellows' clinical experience should include observation and treatment of both inpatients and outpatients with a wide variety of orthopaedic disorders.
E. Fellows must have the opportunity to assume continuous responsibility for both acutely and chronically ill patients so as to learn the natural history of pediatric orthopaedic disorders as well as the effectiveness of treatment programs and the impact of growth on these disorders.
F. The program should emphasize normal physiologic mechanisms and the pathogenesis and complications of pediatric orthopaedic disorders.
G. Utilization of appropriate laboratory procedures and allied medical personnel should be stressed.
H. The knowledge and skills the program must cover include but are not limited to:
   1. Prudent and judicious use of diagnostic tests.
   2. Use of data resources and the need for and interpretation of data.
   3. Interpretation of radiologic examination of the musculoskeletal system, including vascular studies and the modalities of nuclear medicine (and other advanced techniques) with an appreciation of the risk and expected yield of the procedures.
   4. Understanding of the roles of physical and occupational therapists, orthotists, and prosthetists in the rehabilitation and ongoing management of pediatric orthopaedic disorders.
   5. Performance of pediatric orthopaedic surgical procedures.

V. Program Research and Scholarly Activity
A. Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility.
B. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:
   1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.
   2. Participation in journal clubs and research conferences.
   3. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.
   4. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.
   5. Offering of guidance and technical support (e.g., research design, statistical analysis) for residents involved in research.
C. Fellows must participate in basic and/or clinical research.
   1. Fellows must learn to design, implement, and interpret research studies under supervision by qualified faculty.
   2. The program must provide time and facilities for research activities by fellows.

VI. Library
1. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.
2. Library services should include the electronic retrieval of information from medical databases.
3. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

VII. Evaluation
A. Program directors must have a clearly defined method for regular periodic assessment of the performance of the fellow. The assessment must include cognitive, motor, and interpersonal skills; attitudinal traits; and surgical judgment. There must be at least semianual communication of this information to the fellow and to the director of the residency program in orthopaedic surgery.
B. The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Written evaluations by residents should be utilized in this process.

ACGME: June 1985 Effective: July 1985
Program Requirements for Residency Education in Otolaryngology

I. Introduction

A. Definition of the Specialty
This specialty is devoted to the provision of comprehensive medical and surgical care of patients with diseases and disorders of the head and neck that affect the ears, the facial skeleton, the respiratory and upper alimentary systems, and related structures. Specialists in this discipline must have core knowledge, skills, and understanding of the basic medical sciences relevant to the head and neck; the respiratory and upper alimentary systems; the communication sciences, including knowledge of audiologic and speech-language pathology; and the chemical senses of smell and taste, as well as allergy, endocrinology, and neurology as they relate to the head and neck. Included are the clinical aspects of diagnosis and the medical and surgical therapy, reconstruction, or prevention for diseases, neoplasms, deformities, disorders, and injuries of the head and neck.

B. Purpose
The fundamental purpose of residency education in otolaryngology is to educate and train physicians to function independently as specialists in the field of otolaryngology—head and neck surgery.

C. Institutional Commitment
The sponsoring institution must provide sufficient faculty, financial resources, support space, clinical and research facilities, and library materials to meet the educational needs of the residents and to enable the program to comply with the requirements for accreditation. The governing body of the sponsoring institution must grant the program director sufficient authority, financial support, and access to facilities to organize and supervise the following activities: resident selection and evaluation; the didactic and clinical components of the program, including patient management and scholarly activity; and staff recruitment and evaluation. There must be sufficient operative time available to ensure an adequate resident surgical experience.

D. Duration of Training
1. Residency programs in otolaryngology—head and neck surgery must be 5 years in duration, which must include 1 year of general surgery, 3 years of progressive training in the specialty, and 1 additional year in an Accreditation Council for Graduate Medical Education (ACGME)–accredited residency training program. The experience in the basic surgical sciences should precede the training in otolaryngology—head and neck surgery. The final year of the 5 years of training must be a senior resident experience and must be spent within the institutions that are approved as part of the program, unless prior approval of an outside rotation has been obtained from the Residency Review Committee (RRC).
2. Any program that extends training beyond these minimum requirements must present a clear educational rationale consonant with the program requirements and objectives for residency training. The program director must obtain the approval of the sponsoring institution and the RRC prior to implementation and at each subsequent review of the program.
3. Prior to entry into the program, each resident must be notified in writing of the required length of training. The required length of training for a particular resident may not be changed without mutual agreement during his or her program unless there is a significant break in his or her training or the resident requires remedial training.

E. Scope of Training
While it is not essential that all programs have exactly the same curriculum or that they offer a uniform sequence of experience, all accredited programs should adequately cover the entire scope of the discipline, with interdisciplinary interaction as appropriate.
1. A comprehensive educational experience should be provided in the areas of bronchoscopic surgery, facial plastic and reconstructive surgery, head and neck surgery, laryngology, rhinology, otology, otolaryngic allergy, immunology, endocrinology, and neurology. Sufficient clinical and operative experience must be provided to enable the residents, on completion of their training, to practice this specialty in a scientific, knowledgeable, and independent manner.
2. The program must have a comprehensive, well-organized, and effective curriculum, including the cyclical presentation of core specialty knowledge supplemented by the addition of current information. There must be evidence that the teaching is conducted in a variety of educational settings, such as clinics, classrooms, operating rooms, bed-sides, and laboratories, employing accepted educational principles.

II. Participating Institutions
A program need not be confined to a single hospital. In programs involving two or more hospitals, it is essential that the program be organized by the sponsoring institution with responsibility for the progressive education of the residents. Training at each participating institution must comply with the program requirements.
A. Each participating institution must offer significant educational opportunities to the overall program.
B. Residents may not rotate to unaffiliated institutions for more than a total of 3 months without prior approval of the RRC.
C. There shall be a qualified otolaryngologist—head and neck surgeon appointed by and responsible to the program director in each geographically separate institution. This individual must be responsible for the education of the residents and will also supervise the educational activities of the other faculty relating to resident education at that institution. The training director at each participating institution must have major clinical responsibilities at that institution.

III. Personnel
Approval cannot be granted for a residency program if the service is a division of the department of surgery, unless that division is headed and staffed by qualified otolaryngologist—head and neck surgeons. The program director and the faculty are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluations, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director Qualifications and Responsibilities
There must be a single program director responsible for the program.
1. Qualifications of the program director include:
   a. Requisite and documented clinical, educational, and administrative abilities and experience.
   b. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)
   c. Certification by the American Board of Otolaryngology or suitable equivalent qualifications in otolaryngology—head and neck surgery.
Program Requirements for Residency Education in Otolaryngology

d. Appointment in good standing to the medical staff of an institution participating in the program.
2. Responsibilities of the program director include:
a. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff and should be readily available for review.
b. Devotion of sufficient time to the program to provide continuity of leadership and to fulfill all of the responsibilities inherent in meeting the educational goals of the program. Continuity of leadership over a period of years is important to the stability of a residency program. Frequent changes in leadership or long periods of temporary leadership usually have an adverse effect on an educational program and will be cause for serious concern.
c. Development of a sound administrative organizational framework and an effective faculty as essential elements of an approved residency program.
d. Active involvement in (a) clinical practice, (b) continuing medical education, (c) regional or national scientific societies, (d) presentations and publications, and (e) research.
e. Overseeing and organizing the activities of the educational program. The responsibilities of this position should include but not be limited to the following:
   1. Resistant appointments and assignments
   2. Supervision, direction, and administration of the educational activities
   3. Evaluation of the house staff, faculty, and residency program
   4. Appointment of local training directors in participating institutions.
   f. Supervising residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.
g. Regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician.
h. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.
i. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.
j. Preparation of an accurate statistical and narrative description of the program as requested by the RRC.
k. Promptly notifying the executive secretary of the RRC in writing of any major change in the program that may significantly alter the educational experience for the residents, including:
   1. Changes in leadership of the department, such as his or her appointment as a permanent or acting program director and/or departmental chairman.
   2. Changes in administrative structure, such as an alteration in the hierarchical status of the program/department within the institution.

1. Obtaining prior approval of the RRC for the following changes in the program to determine if an adequate educational environment exists to support these changes:
   1. The addition of any institution to which residents rotate for more than 5 months.
   2. Any change in the approved resident complement of the program.
   3. Any change in the length or format of the training program.

Upon review of a proposal for a major change in a program the RRC may determine that a site visit is necessary.

B. Faculty Qualifications and Responsibilities

1. There must be a sufficient number of faculty with documented qualifications to instruct and supervise adequately all residents in the program. Members of the faculty must be able to devote sufficient time to meet their supervisory and teaching responsibilities.

2. The faculty is responsible to ensure that the structure and content of the residency program reflects an appropriate education-to-service ratio that identifies the resident as a student and provides adequate experience in preoperative, intraoperative, and postoperative patient care. This responsibility must include on-site supervision of the resident in operative, inpatient, outpatient, and emergency cases and participation in patient care conferences and other educational exercises.

3. It is desirable that there be at least two other members of the faculty who possess qualifications similar to those of the program director.

4. Faculty should demonstrate committed participation to the goals and objectives of the educational program, be willing to devote the necessary time and effort to the educational program, and engaged in scholarly activities, including:
   a. Participation in and presentation of their work at regional or national scientific societies
   b. Participation in their own continuing medical education
   c. Participation in clinical and/or basic research
   d. Publication in refereed journals, monographs, or books.

A faculty that does not exhibit such characteristics will be the cause of grave concern to the RRC as to its adequacy and suitability for conducting a program of graduate education in otolaryngology-head and neck surgery.

5. There must be clear documentation of adequate faculty commitment to the residency program. One measure of this commitment is the extent to which faculty members permit residents to participate in the management of their private patients.

6. A faculty member from each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

7. The faculty must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

8. The faculty should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the faculty, and the quality of supervision of residents.

C. Other Program Personnel

Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.
D. Appointment of Residents
1. The RRC will approve a total number of residents to be trained in the program by training year. That number will be based primarily on the number, qualifications, and commitment of the faculty; the volume and variety of the patient population available for educational purposes; and the totality of institutional resources committed to resident education.
2. Programs may not graduate more residents in any given year than the number of residents approved by the RRC, except in cases where a resident’s training is extended because the program director has determined the need for additional training to meet minimum requirements for competency. In this circumstance, the RRC must be notified in writing of the decision to extend a resident’s training. Otherwise, any increase in the number of residents at any level of training or in the total number of residents must receive prior approval of the RRC. Requests for changes in the approved resident complement of a program must include a strong educational rationale. Requests based primarily on service considerations will not be approved.
3. A vacancy in a resident complement, if filled, must be at the same level in which the vacancy occurs, unless otherwise approved by the RRC.
Violations of these requirements may result in an adverse accreditation decision.

E. Appointment of Fellows
1. The appointment of other individuals for special training or education, such as fellows, must not dilute or detract from the educational opportunities of regularly appointed residents.
2. The admission of fellows requires a clear statement of the areas of training, clinical responsibilities, and duration of the fellowship. This statement is to be supplied to the RRC at the time the program is site visited.
3. If fellows are appointed, in the judgment of the RRC, detract from the education of the regularly appointed otolaryngology residents, the accreditation status of the program may be adversely affected.

IV. Facilities and Resources
There must be adequate space and equipment for the educational program, including meeting rooms; classrooms with audiovisual and other educational aids; office space for staff; pertinent library materials; and diagnostic, therapeutic, and research facilities.
A. Within each institution, beds sufficient for the needs of the service must be provided, preferably within a single area designated for the use of the service.
B. Residents must have access to outpatient facilities, clinics, and office space for training in the regular preoperative evaluation and postoperative follow-up for cases for which the resident has responsibility.
C. Technologically current equipment considered necessary for diagnostic and treatment must be available.
D. A hospital medical records department that facilitates both quality patient care and education must be available.
1. It should be supervised by a qualified medical records librarian.
2. Clinical records should be maintained to ensure easy and prompt access at all times.
3. The records system should be organized to permit the collection and evaluation of selected material from clinical records for investigative and review purposes.
E. Residents should be provided with adequate office, sleeping, lounge, and food facilities during assigned duty hours. Adequate clerical support services also must be provided.

F. Institutions should provide adequate resources for research such as statistical consultation and computer services. Active research laboratories should be available.

V. Educational Program
A. Program Goals and Objectives
The program director and faculty must prepare and comply with written educational goals for the program.
1. Program Design
   a. All educational components of a residency program should be related to program goals.
   b. The program design and/or structure must be approved by the RRC as part of the regular review process.
   c. Participation by any institution providing more than 3 months of education must be approved by the RRC.

2. Program Evaluation
   a. The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Written evaluations by residents should be utilized in this process.

B. Specialty Content
The broad scope of practice of otolaryngology-head and neck surgery requires that the program provide surgical and medical training in the following areas:
1. Morphology, physiology, pharmacology, pathology, microbiology, biochemistry, genetics, and immunology relevant to the head and neck; the respiratory and upper alimentary systems; the communication sciences, including knowledge of audiometry and speech-language pathology; the chemical senses and allergy, endocrinology, and neurology as they relate to the head and neck.
2. Diagnosis and diagnostic methods, including audiological and vestibular assessments, electrophysiologic techniques, and other related laboratory procedures for diseases and disorders of the ears, the respiratory and upper alimentary systems, and the head and neck.
3. Therapeutic and diagnostic radiology, including the interpretation of medical imaging techniques relevant to the head and neck and the thorax, including the temporal bone, skull, nose, paranasal sinuses, salivary and thyroid glands, larynx, neck, lungs, and esophagus.
4. Diagnostic evaluation and management of congenital anomalies, allergy, trauma, and diseases in the regions and systems mentioned above.
5. The cognitive management, including operative intervention with its preoperative and postoperative care, of congenital, inflammatory, endocrine, neoplastic, degenerative, and traumatic states, including the following major categories:
   a. General otolaryngology
   b. Head and neck
   c. Plastic and reconstructive surgery
   d. Otology
   e. Endoscopy
6. The habilitation and rehabilitation techniques and procedures pertaining to respiration, deglutition, chemoreception, balance, speech, and hearing
7. Residents must receive training in the following diagnostic and therapeutic techniques:
   a. Application and utilization of lasers
   b. Flexible and rigid peripheral endoscopy

C. Surgical Experience
1. Institutional operative experience: The institutions in the program must have an adequate number and variety of adult and
pediatric medical and surgical patients who are available for resident education.

2. Resident operative experience: While not all residents are expected to have operative experience in all of the components of the specialty, the surgical procedures performed by the residents must be sufficient in number and variety to provide adequate training in the entire scope of the specialty. There must be adequate distribution and sufficient complexity within the principal categories of the specialty.

3. Generally equivalent and adequate distribution of categories and cases among the residents must be demonstrated. Significantly unequal experience in volume and/or complexity of cases managed by the residents will be considered serious noncompliance with these requirements. In some instances, the quality of care may require that case management be conducted with other specialties (e.g., hypopharynx, cerebellar pontine tumor).

4. Documentation of operative experience: It is essential that there be documentation of the operative experience of the individual residents and that the cumulative operative experience of each resident be reviewed with regular frequency by the program director as a part of his or her responsibility for evaluation of the balanced progress of individual residents and of the total program. The program director is responsible for compiling accurate information regarding the institutional operative records and those of the individual residents annually at the end of each academic year and for submitting these records for review as requested by the RRC.

D. Graded Responsibility

The program must provide the residents with experience in direct and progressively responsible patient management as they advance through training. This training must culminate in sufficiently independent responsibility for clinical decision making such that the program is assured that the graduating resident has achieved the ability to execute sound clinical judgment.

E. Outpatient Experience

1. There must be a well-organized and well-supervised outpatient clinic. This clinic must operate in relation to an inpatient service used in the program. Residents must have the opportunity to see patients, establish provisional diagnoses, and initiate preliminary treatment plans prior to the patients' admission to the hospital. An opportunity for follow-up care must be provided so that the results of surgical care may be evaluated by the responsible residents. These activities must be carried out under appropriate faculty supervision. If residents participate in pre-and post-operative care in a private office, the program director must ensure that the resident functions with an appropriate degree of responsibility with adequate supervision. Adequate experience should be provided in office practice procedures and management.

2. Residents must have experience in the emergency care of critically ill and injured patients with otolaryngeal-head and neck conditions.

F. Conferences

Departmental conferences must be conducted by individuals with specific expertise in the areas under discussion.

1. Basic Science

There must be a structured educational experience in basic science. Ordinarily, this should be provided within the participating institutions of the residency program. Any program that provides the requisite basic science experience outside the approved participating institutions must demonstrate that the educational experience provided meets these designated criteria. It is essential that the faculty participate in the basic science education, that resident attendance be monitored, that the experience be evaluated, and that the content be integrated into the overall educational program. The basic science training should meet the following requirements:

a. Basic science education should include instruction in anatomy, biochemistry, cell biology, embryology, immunology, molecular genetics, pathology, pharmacology, physiology, and other basic sciences related to the head and neck.

b. Sufficient resources, including space, equipment, personnel, and funding for instruction and study of the basic sciences, should be available to permit satisfactory correlation between basic science knowledge and clinical application.

c. Instruction in anatomy should include study and dissection of cadaver anatomical specimens, including the temporal bone, by the resident, with appropriate lectures and other formal sessions.

d. Instruction in pathology should include formal instruction in the core of pathology in which gross and microscopic pathology relating to the head and neck area are included. The residents should study and discuss with the pathology service tissues removed at operations and autopsy material from patients on the resident's service. It is desirable to have residents assigned for a period of service in the Department of Pathology.

2. Clinical Components

Clinical conferences must be held regularly and should be attended by all residents and faculty. Grand rounds and mortality and morbidity and tumor conferences, as well as conferences on other pertinent topics, must be included in the educational program. Interdisciplinary conferences are encouraged.

G. Resident Supervision and Duty Hours

1. Supervision

All cases must be adequately supervised by appropriately qualified faculty. The program director must ensure, direct, and document proper supervision of residents at all times. Residents must be provided with rapid, reliable systems for communicating with supervising residents and attendings. Attending physicians or supervising residents with appropriate experience for the severity and complexity of a patient's condition must be available at all times on site. The responsibility or independence given to residents in patient care should depend on their knowledge, manual skill, and experience and on the complexity of a patient's illness and the risk of the operation(s).

2. Duty Hours

The physician's responsibilities for continuing patient care transcend normal working hours. To fulfill this obligation, provisions for night and weekend call should be established. However, residents should not be required regularly to perform excessively difficult or prolonged duties. The program director must ensure assignment of reasonable in-hospital duty hours. Residents at all levels should have the opportunity to spend, on average, at least 1 full day out of 7 free of hospital duties and should be on call in the hospital no more often than every third night, except in the maintenance of continuity of care. There should be adequate opportunity to rest and to sleep when on duty for 24 hours or more. On-call rooms arranged to permit adequate rest and privacy should be available for each resident on night duty in the hospital. There should be adequate backup support if needed to maintain appropriate patient care.

H. Research

Research offers an important opportunity for the application of the basic sciences to clinical problems and is an essential part of the preparation of the resident for a lifetime of self-education after the completion of formal residency training. It is essential that the
training program provide a structured research experience for the residents, sufficient to result in an understanding of the basic principles of study design, performance, analysis, and reporting. The research experience may be clinical or basic in nature and should reflect careful advice by and planning with the faculty. Facilities and protected time for research by the residents should be provided, together with guidance and supervision by qualified faculty.

1. Scholarly Activity
The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:
1. Active participation of the faculty in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.
2. Participation in journal clubs and research conferences.
3. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations’ meetings and publication in their journals.
4. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.
5. Offering of guidance and technical support (e.g., research design, statistical analysis) for residents involved in research.
6. Provision of support for resident participation in scholarly activities.

J. Library
1. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.
2. Library services should include the electronic retrieval of information from medical databases.
3. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

VI. Evaluation
A. Resident Evaluation
1. The program should develop mechanisms by which the residents can provide clear demonstration of the acquisition of fundamental knowledge and clinical skills prior to progression to the level of supervised, semi-independent patient management and operative care.
2. Each resident’s performance and progress in cognitive, judgmental, and interpersonal and manual skills should be continuously monitored. Residents who fail to demonstrate appropriate industry, competence, learning abilities, and ethics should be successively counseled, censured, and after due process, dismissed if remediation has not occurred.
3. It is essential that the residents participate in existing national examinations. The annual otolaryngology examination of the American Academy of Otolaryngology-Head and Neck Surgery is one example of an objective test that can be utilized by the program. An analysis of the results of these testing programs should guide the faculty in assessing the strengths and weaknesses of individual residents and the program. The program director should also monitor the performance of the program’s graduates on the examinations of the American Board of Otolaryngology.

4. The program director, with participation of faculty, shall:
a. At least semiannually evaluate the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures.
b. Communicate each evaluation to the resident in a timely manner.
c. Advance residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.
d. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.
e. Provide a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident’s performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident’s permanent record maintained by the institution.

B. Faculty Evaluation
Teaching faculty also must be evaluated on a regular basis. Documentation of faculty evaluation should include teaching ability and commitment, clinical knowledge, and scholarly contributions. Residents should participate in this evaluation.

C. Program Evaluation
1. There should be documented evidence of periodic self-evaluation of the program in relation to the educational goals, the needs of the residents, and the teaching responsibilities of the faculty. This evaluation should include an assessment of the balance between the educational and service components of the residency.
2. One measure of the quality of a residency program is the performance of its graduates on the certifying examinations of the American Board of Otolaryngology. In its evaluation of residency programs the RRC will take into consideration the information provided by the American Board of Otolaryngology regarding resident performance on the certifying examinations over a period of several years.

VII. Board Certification
Residents who plan to seek certification by the American Board of Otolaryngology should communicate with the executive vice president of the board to ascertain the current requirements for acceptance as a candidate for certification.

ACGME: February 1990 Effective: July 1995

Residency Education in Pathology

Graduate medical education programs in pathology are accredited in the following categories:

APCP-4 Four-year programs in anatomic and clinical pathology
AP-3 Three-year programs in anatomic pathology
CP-3 Three-year programs in clinical pathology
CPBP-1 One-year programs in cytopathology
BB-1 One-year programs in blood banking/transfusion medicine
DP-1 One-year programs in dermatopathology
FP-1 One-year programs in forensic pathology
HMP-1 One-year programs in hematology
IMP-1 One-year programs in immunopathology
MM-1 One-year programs in medical microbiology
NP-2  Two year programs in neuropathology
PP-1  One year programs in pediatric pathology
PCH-1 One year programs in chemical pathology
SP   Training in selective pathology

Programs in the SP category are ordinarily approved in highly specialized hospitals of acknowledged excellence that, because of the limitations of their clinical material, cannot provide general training in all aspects of anatomic and/or clinical pathology.

Accredited programs in all categories must meet institutional requirements as well as the applicable program requirements.

Program Requirements for Residency Education in Pathology—Anatomic and Clinical

I. Duration and Scope of Training
A. Graduate medical education programs in anatomic and/or clinical pathology must provide an organized educational experience for qualified physicians seeking to acquire the basic competence of a pathologist.
B. Programs must offer residents the opportunity to acquire a broad understanding of anatomic and/or clinical pathology, the techniques and methods of those disciplines, and the consultative role of the pathologist in patient-care decision making.
C. APCP-4 programs are accredited to offer 4 years of education/training in anatomic and clinical pathology, 3 years of training in anatomic pathology (AP-3), and 3 years of training in clinical pathology (CP-3).
D. APCP-4 programs must include 18 months of formal education in anatomic pathology and 18 months of formal education in clinical pathology. The remaining 12 months of training may be a continuation of structured anatomic pathology or clinical pathology education or may be devoted to a specialized facet of pathology. AP-3 and CP-3 programs must include 24 months of anatomic pathology or clinical pathology education. The remaining 12 months of training may be a continuation of structured anatomic pathology or clinical pathology education or may be devoted to a specialized facet of pathology. The education must occur in the Department of Pathology under the direction of the program director or designated member of the teaching staff. The program director must clearly define, as part of the program description, the available opportunities whereby residents may accomplish the additional 12 months of pathology education. The program director must approve all such opportunities and monitor their progress.

II. Institutional Support of Graduate Medical Education
A. Institutions involved in residency programs must be in compliance with the Institutional Requirements of the Essentials of Accredited Residencies in Graduate Medical Education. Institutional commitment to graduate medical education is a critical influence on a residency and will be carefully evaluated when pathology programs are reviewed.
B. When the resources of two or more institutions are utilized in a program, valid letters of agreement from the appropriate institutional representatives detailing the educational role of each institution must be kept on file by the director of the residency program.
C. As other residency programs facilitate peer interchange and augment the breadth of the educational experience, institutions providing graduate medical education in anatomic and/or clinical pathology should also sponsor at least three additional accredited residency programs. Programs in internal medicine, family medicine, obstetrics and gynecology, general surgery, pediatrics, and radiology are considered to be most complementary to pathology education. Requests for exceptions to this requirement will be considered on a case-by-case basis.
D. Resident assignments away from the primary institution in a program should not prevent regular resident participation in rounds and conferences, either at the parent institution or in equivalent conferences at participating institutions.

III. Program Goals and Objectives
A. The director and teaching staff of a program must prepare and comply with written educational goals for the program.
B. All educational components of a residency program should be related to program goals.
   1. The program design and/or structure must be approved by the Residency Review Committee (RRC) as part of the regular review process.
   2. Participation by an institution providing more than 6 months of training in a program must be approved by the RRC.
C. There must be a program statement, available for review by applicants, residents, and the RRC, describing the program and each rotation, assignment, or other experience.
   1. The program statement must include:
      a. A description of the program's educational goals and philosophy.
      b. A listing and description of all required rotations, including their duration.
      c. A listing and description of elective rotations, the year(s) of the program in which they are available, and their duration.
      d. A description of resident opportunities for teaching and research.
      e. A description of the manner in which residents and the program are evaluated and how such evaluations are used.
      f. A description of the manner in which residents are supervised.
   2. The description of rotations, assignments, or other experiences must include:
      a. The goals and objectives of the experience.
      b. The duration of the experience.
      c. The duties and responsibilities of residents at each year of training.
      d. The teaching staff responsible for the supervision and instruction of the residents during the experience.
      e. The manner in which residents are supervised and evaluated during the experience.

IV. Curriculum
A. Education in anatomic pathology must include autopsy and surgical pathology, cytopathology, pediatric pathology, dermatopathology, forensic pathology, immunopathology, histochemistry, neuropathology, ultrastructural pathology, cytogenetics, molecular biology, and other advanced diagnostic techniques as they become available.
B. Education in clinical pathology must include microbiology (including bacteriology, mycology, parasitology, and virology), immunopathology, blood banking/transfusion medicine, chemical pathology, cytogenetics, hematology, coagulation, toxicology,
medical microscopy (including urinalysis), molecular biologic techniques, and other advanced diagnostic techniques as they become available.

C. Programs must provide instruction and experience in the major aspects of the administration of a hospital laboratory, including resident participation in interpretation of laboratory data as part of patient-care decision making, conferences, rounds, patient-care consultation, management and direction of the laboratory, quality assurance, data processing, teaching, and scholarly activity.

D. The educational experiences detailed above may be provided through separate, exclusive rotations, by rotations that combine more than one area, or by other means; but in any case, all rotations and other assignments must conform to the educational goals and objectives of the program.

V. Program Personnel

The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director

1. The program director is responsible for, and must have the authority to conduct, the entire program and must devote sufficient time to fulfill the responsibilities inherent in meeting the educational goals of the program, including the implementation of sound administrative practices and the provision of adequate facilities, teaching staff, resident staff, and educational resource materials.

2. A program involving two or more institutions must have a single director with the responsibility and authority for the supervision and coordination of the portions of the program carried out at each institution.

3. Continuity of leadership over a period of years is important to the stability of a residency program. Frequent changes in the directorship or long periods of temporary leadership are cause for serious concern by the RFC.

4. The program director must demonstrate a continuing involvement in scholarly activity.

5. Qualifications of the program director include:
   a. Requisite and documented clinical, educational, and administrative abilities and experience.
   b. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)
   c. Certification by the American Board of Pathology (in anatomic and clinical pathology, anatomic pathology, or clinical pathology) or suitable equivalent qualifications.
   d. Appointment in good standing to the medical staff of an institution participating in the program.

6. Responsibilities of the program director include:
   a. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.
   b. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.
   c. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program.
   d. The supervision of residents in accordance with explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.
   e. Regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician.
   f. The program director, with participation of members of the teaching staff, shall:
      1. At least semiannually evaluate the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures.
      2. Communicate each evaluation to the resident in a timely manner.
      3. Advise residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.
      4. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.
   g. The provision of a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.
   h. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.
   i. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.
   j. Preparation of an accurate statistical and narrative description of the program as requested by a review committee.

B. Teaching Staff

1. There must be a sufficient number of teaching staff with documented qualifications to instruct and supervise adequately all the residents in the program. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities.

2. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.

3. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

4. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

5. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of pa-
tients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

C. Number of Residents
1. The number of resident positions requested must not exceed the educational resources available in a program.
2. When reviewing a program for accreditation, the RRC will approve a maximum number of residents to be trained in the program at any one time. Any increase in that number requires prior written approval of the RRC.
3. Programs must maintain a number of residents sufficient to promote an intellectually stimulating educational environment. There should be at least two residents enrolled in each year of a program. A lesser number is cause for concern by the RRC.

D. Appointment of Fellows
1. The appointment of other individuals for special training or education, such as fellows, must not dilute or detract from the educational opportunities of the regularly appointed residents.
2. The appointment of fellows by a program director requires a clear statement of the areas of training, responsibilities, and duration of the fellowship. This statement must be provided to the RRC at the time the program is reviewed.

E. Other Personnel
1. The laboratories providing patient care services must be accredited by the appropriate organizations and must be directed by a qualified physician who is licensed to practice medicine and is a member of the medical staff.
2. The number and qualifications of medical technologists and other support personnel must be adequate for the volume of work in the laboratory and the educational activities of the institution.
3. Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administrative and educational conduct of the program.

VI. Program Facilities
A. Adequate space and equipment must be available for the conduct of the program, including equipment for the performance of all the functions described above, meeting rooms, classrooms, and office and research space for staff.
B. Office and laboratory space must be provided for the residents for both patient-care work and participation in scholarly activities.
C. The patient material of the department must be indexed in such a way as to permit appropriate retrieval.
D. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions. The services provided by the library should include the electronic retrieval of information from medical databases.
E. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.
F. The audiovisual resources available for educational purposes should be adequate to meet the goals and objectives of the program.

VII. Educational Program
A. Resources for Anatomic Pathology
1. The volume and variety of material available in the program for anatomic pathology education must be sufficient to ensure that residents have a broad exposure to both common conditions and unusual entities, develop proficiency in diagnosis and problem solving, and develop the necessary technical skills to perform the functions of an anatomic pathologist.
2. While the quality of an educational program is not based on volume of teaching material alone, programs should have sufficient volume and variety of material available for educational purposes to ensure the opportunity for:
   a. The performance of at least 75 autopsies per resident during the program. It is highly desirable that this experience include forensic and stillborn autopsies.
   b. The examination and signing out of at least 2,000 surgical pathology specimens per resident during the program. This material must be from an adequate mix of cases to ensure exposure to both common and uncommon conditions.
   c. The examination of at least 1,500 cytologic specimens per resident during the program. This material must include a variety of both exfoliative and aspiration specimens.
   d. The performance of at least 200 operating room consultations (frozen sections) per resident during the program.
B. Resources for Clinical Pathology
1. The volume and variety of material available in the program for training in clinical pathology should be sufficient to ensure that residents have a broad exposure to both common conditions and unusual entities, develop proficiency in diagnosis and problem solving, and develop the necessary technical skills to perform the functions of a clinical pathologist.
2. The number and variety of tests performed in the laboratories utilized in the program should be sufficient to give residents experience in the range of tests typically available in a general hospital. Further, resident experience should be augmented through the use of seminar and course materials and laboratory indices of unusual cases.
3. While the quality of an educational program is not based on the volume of teaching material alone, programs should have a laboratory workload of at least 500,000 weighted workload units (according to the standards of the workload recording program of the College of American Pathologists or equivalent) per resident during the program. Further, this material must include an adequate variety of clinical pathology procedures.
4. A sufficient number of supervisory personnel and medical technologists, as well as modern equipment, must be available in each of the laboratories utilized in the program.

C. Seminars, Conferences, and Rounds
1. There must be regularly scheduled seminars and conferences devoted to the basic and applied medical sciences and clinical correlation conferences.
2. Clinical correlation conferences (e.g., a pediatric mortality conference) should be held with clinical services such as internal medicine, surgery, gynecology, radiology, pediatrics, and their subspecialties.
3. There must be departmental conferences for detailed discussion of difficult and unusual cases in which both faculty and residents participate.
4. Residents must participate in the regular, formal clinical, and teaching rounds corresponding to the laboratory services to which they are assigned. For example, infectious disease service rounds should be attended during an assignment in microbiology.

D. Consultation
1. Both faculty and residents must be regularly involved in consultative activity.
2. Patient-care consultations should be both intra- and interdepartmental.
E. Teaching
1. Residents should participate in the education of medical students and other residents.
2. The effectiveness of residents as teachers should be monitored and evaluated by the program director and teaching staff.

VIII. Evaluation
A. There must be regular, formal, written evaluation of residents by the teaching staff. Evaluations should be completed at least once every 6 months and after rotations outside the primary institutions or to specialty experiences. Evaluations should be discussed with the residents by the program director or appropriate designee at least once each year.
B. The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. As part of this process, residents should provide periodic written evaluations of the program and teaching staff.

IX. Research and Scholarly Activity
A. Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility.
B. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:
   1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.
   2. Participation in journal clubs and research conferences.
   3. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations’ meetings and publication in their journals.
   4. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.
   5. Offering of guidance and technical support (eg, research design, statistical analysis) for residents involved in research.
   6. Provision of support for resident participation in scholarly activities.

X. Resident Research
A. Throughout their time in the program, residents should be exposed to and encouraged to participate in clinical or laboratory research, research seminars, work-in-progress sessions, and organized reviews of intradepartmental research.
B. Resident involvement in research may be related to methods development, clinical or basic research, or literature surveys, but in all cases the program should provide an environment that promotes research or scholarly activity by residents.

XI. Resident Responsibility
A. Residents must be considered integral members of the staff of the Department of Pathology and must have the opportunity to participate in discussion of matters related to management of the department.
B. There must be periods of time when decision making in the laboratory is the direct responsibility of residents, under appropriate supervision.
C. Duty hours and night and weekend call for residents must reflect the fact that responsibilities for continuing patient care are not automatically discharged at any given hour of the day or any particular day of the week. However, the program director must ensure that residents are given reasonable duty and call assignments. All residents should, on the average, have the opportunity to spend at least 1 full day out of 7 free from hospital duties and should be on call no more often than every third night. Backup support should be provided for residents when their patient care responsibilities are especially difficult or prolonged.

XII. Residency Review Committee
A. When a program is scheduled for review by the RRC, the accuracy of the program information forms required by the committee is the responsibility of the program director. Action by the RRC will be deferred or an adverse action considered if the forms are not completed as requested.
B. The RRC must be provided written notification of major changes in a program, including changes in leadership, within 90 days. Prior approval of the committee is required for the addition or deletion of a major participating institution, a major change in the design of the program, or an increase or decrease in the approved number of residents in the program.

XIII. Certification and Accreditation
A. The RRC for Pathology is responsible for accreditation of graduate medical education programs in pathology. The American Board of Pathology is responsible for certification of individual physicians in pathology.
B. Questions about accreditation of residency programs should be directed to the executive secretary of the RRC.
C. Individuals who plan to seek certification by the American Board of Pathology should communicate with the executive vice president of the board to obtain the latest information regarding certification.

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Program Requirements for Residency Education in Blood Banking/Transfusion Medicine

I. Definition, Duration, and Scope of Education
A. Blood banking/transfusion medicine is the practice of laboratory and clinical medicine concerned with all aspects of blood transfusion, including the scientific basis of transfusion, selection and recruitment of blood donors, utilization and quality control, preparation of blood components, pretransfusion testing, transfusion of blood components, adverse effects of blood transfusion, autoimmunity, transplantation, histocompatibility, therapeutic apheresis and plenotherapy, blood substitutes, medicolegal considerations of transfusion,aternity analysis, management aspects of blood services, and the history of blood transfusion. Blood banking/transfusion medicine requires a strong foundation in clinical pathology as well as clinical medicine.
B. Graduate medical education programs in blood banking/transfusion medicine must provide an organized educational experience for qualified physicians seeking to acquire additional competence in blood banking/transfusion medicine.
C. Programs will be accredited to offer 1 year of organized education in all aspects of blood banking/transfusion medicine.

II. Program Goals and Objectives
A. The director and teaching staff of a program must prepare and comply with written educational goals for the program.
B. All educational components of a residency program should be related to program goals.
   1. The program design and/or structure must be approved by the Residency Review Committee (RCR) as part of the regular review process.
   2. Participation by any institution providing more than 2 months of training must be approved by the RCR.

III. Educational Program
A. Curriculum
1. The program must be structured to give residents clearly defined graduated responsibilities and delegated authority. Written goals and objectives for the educational program must be clearly defined.
2. There must be sufficient opportunity for the resident to develop comprehensive knowledge of the technical aspects of blood banking and immunohematology. There must be an opportunity to acquire knowledge and skills in new technologies as they become available.
3. Clinical aspects of transfusion medicine must be emphasized throughout the program. Residents must participate in ongoing clinical consultations regarding all aspects of blood transfusion and have opportunity to develop competence in providing services to patients and other physicians.

B. Educational Activities
1. Lectures, tutorials, seminars, and conferences must be regularly scheduled and held, with active participation of clinical services. The residents must have the opportunity to attend regional or national meetings.
2. Instruction should include studies illustrating usual and unusual cases.

IV. Personnel
The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director
1. A program involving two or more institutions must have a single director with authority for the supervision and coordination of the portions of the program carried out at each institution.
2. Qualifications of the program director include:
   a. Requisite and documented clinical, educational, and administrative abilities and experience.
   b. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)
   c. Certification by the American Board of Pathology in Blood Banking/Transfusion Medicine or suitable equivalent qualifications.
   d. Appointment in good standing to the medical staff of an institution participating in the program.
3. Responsibilities of the program director include:
   a. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.
   b. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.
   c. Selection, supervision, and evaluation of the teaching staff and other program personnel at each institution participating in the program.
   d. The supervision of residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.
   e. Regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician.
      The program director, with participation of members of the teaching staff, shall:
      1. At least semiannually evaluate the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures.
      2. Communicate each evaluation to the resident in a timely manner.
      3. Advance residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.
      4. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.
   f. The provision of a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.
   g. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.
   h. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.
   i. Preparation of an accurate statistical and narrative description of the program as requested by the RRC.
   j. The program director must be responsible for and have the authority to conduct the training program effectively. He or she must devote sufficient time to fulfill the responsibilities inherent in meeting the educational goals of the program, including implementation of sound administrative practices and evaluation procedures and the provision of adequate facilities, teaching staff, resident staff, and educational resource materials.
   k. The program director must demonstrate a continuing record of scholarly activity.
   l. The program director must ensure that residents are given reasonable duty and call assignments.
B. Teaching Staff
1. There must be a sufficient number of teaching staff with documented qualifications to instruct and supervise adequately all the residents in the program. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities.
2. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.
3. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.
4. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.
5. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

C. Residents
1. The resident should have completed training in anatomic and clinical pathology, or clinical pathology or be certified by a primary medical specialty board of the American Board of Medical Specialties.
2. The number of resident positions requested must be consistent with the educational resources available in the program.
3. Residents must have the opportunity to assume increasing responsibilities as they progress through the program.
4. Residents should have the opportunity to become involved in basic scientific or clinical research and teaching during the program.
5. It is desirable that residents' work schedules be designed so that on the average, excluding exceptional patient care needs, residents have at least 1 day out of 7 free of routine responsibilities and be on-call in the hospital no more often than every third night. The ratio of hours worked and on-call time will vary, particularly at the senior levels, and therefore necessitate flexibility.

D. Other Personnel
1. The laboratories and clinical services involved in the program must be directed by qualified physicians who are licensed to practice medicine and are members in good standing of the institution's medical staff.
2. Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

V. Program Research and Scholarly Activity
A. Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility.
B. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:
1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.
2. Participation in journal clubs and research conferences.
3. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.
4. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.
5. Offering of guidance and technical support (e.g., research design, statistical analysis) for residents involved in research.
6. Provision of support for resident participation in scholarly activities.

VI. Library
1. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.
2. Library services should include the electronic retrieval of information from medical databases.
3. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

VII. Institutional Resources
A. The program must have a sufficient number and variety of patients to offer training in the widest range of blood banking/transfusion medicine. There must be a mechanism for the retrieval and review of cases. There must be effective mechanisms to facilitate clinical correlation with laboratory findings.
B. There must be adequate equipment, laboratory facilities, offices, meeting rooms, classrooms, and space to support service, teaching, educational, and research activities.
C. The institutions, laboratories, and clinical services participating in the program must be appropriately accredited and/or licensed.

VIII. Evaluation
A. There must be regular, formal, and written evaluations of the residents by the teaching staff. Evaluations should be completed and discussed with the residents at least once every 6 months.
B. The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Residents should submit formal, written evaluations of the program and faculty at least once each year for review by the director and the teaching staff.

IX. Administrative Structure
Each blood banking/transfusion medicine program should be administratively attached to an Accreditation Council for Graduate Medical Education-accredited residency in anatomic and/or clinical pathology when feasible.

X. Certification and Accreditation
A. The RRC for Pathology is responsible for accreditation of graduate medical education programs in blood banking/transfusion medicine. The American Board of Pathology is responsible for
Program Requirements for Residency Education in Chemical Pathology

I. Introduction
A. The minimum training program in chemical pathology shall be 1 year in addition to the completion of acceptable residency training in an Accreditation Council for Graduate Medical Education (ACGME)-accredited program of anatomic and/or clinical pathology, as outlined in the Graduate Medical Education Directory, or equivalent postgraduate training and experience.
B. The director and teaching staff of a program must prepare and comply with written educational goals for the program.
C. All educational components of a residency program should be related to program goals:
   1. The program design and/or structure must be approved by the Residency Review Committee (RRC) as part of the regular review process.
   2. Participation by any institution providing more than 2 months of training in a program must be approved by the RRC.
D. The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Written evaluations by residents should be utilized in this process.

II. Program Personnel
The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director
1. There must be a single program director responsible for the program.
2. Qualifications of the program director include:
   a. Requisite and documented clinical, educational, and administrative abilities and experience.
   b. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)
   c. Certification by the American Board of Pathology in Chemical Pathology or suitable equivalent qualifications.
   d. Appointment in good standing to the medical staff of an institution participating in the program.
3. Responsibilities of the program director include:
   a. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.

b. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.
c. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program.
d. The supervision of residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.
e. Regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician.
   The program director, with participation of members of the teaching staff, shall:
   1. At least semiannually evaluate the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures.
   2. Communicate each evaluation to the resident in a timely manner.
   3. Advance residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.
   4. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.
   5. The provision of a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.
   f. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.
g. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.
h. Preparation of an accurate statistical and narrative description of the program as requested by the RRC.

B. Teaching Staff
1. There must be a sufficient number of teaching staff with documented qualifications to instruct and supervise adequately all the residents in the program. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities.
2. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.
3. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.
4. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

5. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

C. Other Program Personnel

Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

III. Educational Program

A. The program must provide opportunities for residents to become expert in the development, operation, and quality control of a chemical pathology laboratory; expert in the clinical interpretation of laboratory results; and to become a consultant in these areas to physicians and patients.

B. The analytical repertoire of the laboratory must be distributed satisfactorily within the various categories and subdivisions of chemical pathology to provide experience at a sufficient level for the resident to acquire the competency of a specialist in chemical pathology.

C. Clinical training in relation to chemical pathology, including the use and interpretation of chemical analyses in clinical diagnosis and management, must be an integral part of the training program.

D. The training program must provide opportunities for residents to develop knowledge and skills relating to (1) analytical chemical pathology, both basic and applied; (2) instrumentation; (3) administration and management of a chemical pathology laboratory; and (4) data processing. It is further expected that the resident will engage in research activities during the period of training.

IV. Institutional Organization and Resources

A. The training institution should be of sufficient size to provide the program with the necessary volume and variety of clinical material in chemical pathology.

B. The laboratory must have office and bench space sufficient to provide for both laboratory personnel and residents. The facilities should be well equipped with modern instrumentation in all major areas of analytical work.

C. The training program should be administratively attached to an ACGME-accredited program whenever feasible.

V. Program Research and Scholarly Activity

A. Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility.

B. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:

1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.

2. Participation in journal clubs and research conferences.

3. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.

4. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.

5. Offering of guidance and technical support (eg, research design, statistical analysis) for residents involved in research.

6. Provision of support for resident participation in scholarly activities.

C. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.

1. Library services should include the electronic retrieval of information from medical databases.

2. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

ACGME: November 1983 Effective July 1995

Program Requirements for Residency Education in Cytopathology

I. Definition, Duration, and Scope of Education

A. Cytopathology is the practice of pathology concerned with the study and diagnosis of human disease manifested in cells. Cytology requires a strong foundation in anatomic pathology.

B. Graduate medical education programs in cytopathology must provide an organized educational experience for qualified physicians seeking to acquire the competence of a cytopathologist.

C. Programs will be accredited to offer 1 year of organized education in all current aspects of cytopathology, including laboratory procedures, laboratory management, quality assurance, self-assessment, diagnostic and patient care decision making, and the scientific basis of cytopathology.

II. Program Goals and Objectives

A. The director and teaching staff of a program must prepare and comply with written educational goals for the program.

B. All educational components of a residency program should be related to program goals.

1. The program design and/or structure must be approved by the Residency Review Committee (RRC) as part of the regular review process.

2. Participation by any institution providing more than 2 months of training in a program must be approved by the RRC.

III. Educational Program

A. Curriculum

1. The program must be structured to give residents clearly defined graduated responsibilities and delegated authority. Written goals and objectives for the educational program must be clearly defined.

2. There must be ample opportunity for residents to develop knowledge and skills in the techniques of screening, specimen collection, cytoreparation, fine needle aspiration, flow cytometric and...
image analysis, in situ hybridization, hormone receptor assessment, and other new immunological and molecular techniques as they become applicable to the study of cells.

3. Diagnosis, pathogenesis, clinical correlation, consultative skills, and prognostic significance must be emphasized throughout the program.

4. Residents must be instructed and involved in correlating cytologic and histopathologic specimens.

B. Educational Activities

1. Lectures, tutorials, seminars, and conferences with clinical services must be regularly scheduled and held.

2. Instruction should include the use of study sets of usual and unusual cases and other educational materials.

IV. Program Personnel

The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director

A program involving two or more institutions must have a single director with authority for the supervision and coordination of the portions of the program carried out at each institution.

1. Qualifications of the program director include:
   a. Requisite and documented clinical, educational, and administrative abilities and experience.
   b. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)
   c. Certification by the American Board of Pathology in Cytopathology or suitable equivalent qualifications.
   d. Appointment in good standing to the medical staff of an institution participating in the program.

2. Responsibilities of the program director include:
   a. Conducting the training program effectively. He or she must devote sufficient time to fulfill the responsibilities inherent in meeting the educational goals of the program, including the implementation of sound administrative practices and evaluation procedures and the provision of adequate facilities, teaching staff, resident staff, and educational resource materials.
   b. Ensuring that residents are given reasonable duty and call assignments.
   c. Preparation of a written statement outlining the educational objectives of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.
   d. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.
   e. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program.
   f. The supervision of residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.
   g. Regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician. The program director, with participation of members of the teaching staff, shall:
      1. At least semiannually evaluate the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures.
      2. Communicate each evaluation to the resident in a timely manner.
      3. Advise residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.
      4. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.
      5. The provision of a written evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.
   i. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.
   j. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.
   k. Preparation of an accurate statistical and narrative description of the program as requested by the RRC.

B. Teaching Staff

1. There must be a sufficient number of teaching staff with documented qualifications to instruct and supervise adequately all the residents in the program. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities.

2. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.

3. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

4. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

5. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.
C. Residents
1. Prior to enrollment in a cytopathology program, residents should have completed training in:
   a. Anatomic and clinical pathology or
   b. Anatomic pathology.
2. The number of resident positions requested must be consistent with the educational resources available in the program.
3. Residents must have the opportunity to assume increasing responsibility as they progress through the program.
4. Residents should have the opportunity to become involved in cytopathologic research and teaching during the program.
5. Residents’ performance must not be impaired by fatigue, whether caused by program duties or other activities. On average, residents should have the opportunity to spend at least 1 full day out of 7 free from hospital duties and should be on call no more often than every third night.

D. Other Personnel
1. The laboratories involved in the program must be directed by qualified physicians who are licensed to practice medicine and are members in good standing of their institution’s medical staff.
2. Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

V. Institutional Resources and Organization
A. The program must have access to a large volume and variety of cytopathology material. The material and files must be indexed to permit appropriate retrieval. There must be mechanisms to facilitate correlation with anatomic material.
B. There must be adequate equipment, laboratory facilities, office, meeting rooms, classrooms, and space to support service, teaching, educational, and research activities.
C. The institutions and laboratories participating in the program must be appropriately accredited and/or licensed.
D. A cytopathology program should be administratively attached to an Accreditation Council for Graduate Medical Education (ACGME)-accredited residency in anatomic and clinical pathology or anatomic pathology when feasible.

VI. Program Research and Scholarly Activity
A. Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility.
B. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:
   1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.
   2. Participation in journal clubs and research conferences.
   3. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations’ meetings and publication in their journals.
   4. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.
   5. Offering of guidance and technical support (e.g., research design, statistical analysis) for residents involved in research.

6. Provision of support for resident participation in scholarly activities.
C. Residents must have easy access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.
1. Library services should include the electronic retrieval of information from medical databases.
2. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

VII. Evaluation
A. There must be regular, formal, written evaluation of residents by teaching staff. Evaluations should be completed and discussed with the residents at least once every 6 months.
B. The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Residents should submit formal, written evaluations of the program at least once each year for review by the director and the teaching staff.

VIII. Certification and Accreditation
A. The RRC for Pathology is responsible for accreditation of graduate medical education programs in pathology. The American Board of Pathology is responsible for certification of individual physicians in pathology.
B. Questions about accreditation of residency programs should be directed to the Executive Secretary of the RRC.
C. Individuals who plan to seek certification by the American Board of Pathology should communicate with the executive vice president of the board.

ACGME: June 1991 Effective: July 1995

Program Requirements for Residency Education in Dermatopathology

I. Duration and Scope of Education
A. Dermatopathology is the subspecialty of dermatology and pathology that is concerned with the study and diagnosis of diseases of the skin and adjacent mucous membranes, cutaneous appendages, hair, nails, and subcutaneous tissues by histological, histochemical, immunological, ultrastructural, molecular, microbiological, and other related techniques.
B. Graduate medical education programs in dermatopathology must provide an organized educational experience for qualified physicians seeking to acquire the additional competence of a dermatopathologist.
C. Programs must provide organized education in all current aspects of dermatopathology, including basic science, laboratory procedures, laboratory management, quality assurance, and self-assessment.
D. The dermatopathology program must be an equal and joint function of the Department of Dermatology and of the Department of Pathology in a sponsoring institution that has an Accreditation Council for Graduate Medical Education (ACGME)-accredited residency in Dermatology and an ACGME-accredited residency in Anatomic Pathology (AP-3) or Anatomic and Clinical Pathology (APCP-4).
E. Dermatopathology programs must offer 12 months of education subsequent to the satisfactory completion of an ACGME-accredited residency in either dermatology or pathology.

F. For all dermatopathology residents, 50% of their education should be devoted to the study of dermatopathology, as outlined in IIA.1. For those who have completed a pathology residency, 50% of the 1-year program should be education in clinical dermatology provided by the dermatology teaching staff. For those who have completed a dermatology residency, 50% of the program should be education in anatomic pathology provided by the pathology teaching staff.

G. The director and teaching staff of the program must prepare and comply with written educational goals for the program and distribute them to applicants, residents, and members of the teaching staff. All educational components of the program should be related to these goals.

H. The program design and/or structure must be approved by the dermatopathology review committee as part of the regular review process.

I. Participation by any institution providing more than 2 months of training in the program must be approved by the subcommittee for dermatopathology.

J. The educational effectiveness of the program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Written evaluations by residents should be utilized in this process.

II. Educational Program

A. Curriculum

1. Programs should be structured so that residents are involved in dermatopathology throughout the year. The program must include didactic instruction and practical experience in the diagnosis of skin disorders by direct inspection and by histological, histochemical, immunological, ultrastructural, molecular, microbiological, and other related techniques. Relevant aspects of myology, bacteriology, and entomology should be included.

2. Dermatopathology residents must be given clearly defined assignments and increasing responsibility as they progress through the program.

3. The program must provide a sufficient volume and variety of dermatopathology specimens (at least 5,000 new accessioned per resident per year) and other educational material for the resident to acquire the qualifications of a consultant in dermatopathology.

4. The program must provide the resident with the experience required to set up and to operate a dermatopathology laboratory and to supervise and train laboratory personnel.

5. All dermatopathology residents should participate in patient examination and autopsies appropriate to dermatopathology. Residents who are pathologists must participate in the examination of at least 1,000 dermatopathology patients.

6. Dermatopathology residents who are dermatologists must have exposure to autopsy and surgical pathology. This experience should emphasize contemporary diagnostic techniques (including the use of a wide variety of monoclonal antibodies) and require attendance at autopsy and surgical pathology conferences, the review of slides of diseases relevant to dermatopathology, and participation in autopsies.

B. Educational Activities

1. Lectures, tutorials, seminars, and conferences with clinical services must be regularly scheduled and held.

2. Instruction should include the use of study sets and files of usual and unusual cases and other educational materials.

III. Program Personnel

The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director

1. The program director must be responsible for and have the authority to conduct the training program effectively. He or she must devote sufficient time to the program to ensure the implementation of sound administrative practices and the provision of adequate facilities, teaching staff, resident staff, and educational resource materials.

2. A program involving two or more participating institutions must have a single director with authority for the supervision and coordination of the portions of the program carried out at each institution.

3. Qualifications of the program director include:
   a. Requisite and documented clinical, educational, and administrative abilities and experience.
   b. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)
   c. Certification in dermatopathology by the American Board of Dermatology or American Board of Pathology or equivalent qualifications.
   d. Appointment in good standing to the medical staff of an institution participating in the program.

4. The program director must demonstrate continuing scholarly activity.

5. Responsibilities of the program director include:
   a. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.
   b. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.
   c. Selection, supervision, and evaluation of the teaching staff and other program personnel at each institution participating in the program.
   d. The supervision of residents in accordance with explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.
   e. Regular evaluation of residents’ knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician. The program director, with participation of members of the teaching staff, shall:
      1. At least semiannually evaluate the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures.
      2. Communicate each evaluation to the resident in a timely manner.
      3. Advise residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.
      4. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.
f. The provision of a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.

g. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.

h. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.

i. Preparation of an accurate statistical and narrative description of the program as requested by the dermatopathology review committee.

B. Teaching Staff

1. There must be a sufficient number of teaching staff with documented qualifications in dermatopathology to instruct and supervise adequately all the residents in the program. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities.

2. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.

3. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

4. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

5. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

C. Dermatopathology Residents

1. The number of positions requested must not exceed the educational resources available in a program.

2. Residents must have the opportunity to assume increasing responsibility under supervision appropriate to their experience as they progress through the program.

3. Residents should have the opportunity to become involved in dermatopathologic research and teaching during the program.

4. The program director must ensure that residents are adequately supervised by faculty at all times. Further, resident duty and on-call assignments must be made in a manner that ensures that neither education nor quality of patient care is jeopardized by resident stress or fatigue. Physicians must have a keen sense of personal responsibility for continuing patient care, and must recognize that their obligation to patients is not automatically discharged at any given hour of the day. In no case should a trainee go off duty until the proper care and welfare of the patients have been ensured. Resident duty hours and night and weekend call must reflect the concept of responsibility for patients and the provision of adequate patient care. Residents must not be required regularly to perform excessive, prolonged duties. When averaged over 4 weeks, residents should spend no more than 80 hours per week in hospital duties. Residents should, on average, have the opportunity to spend at least 1 day out of 7 free of program duties and should be on call no more often than every third night. When on call for 24 hours or more, there should be opportunity to rest and sleep.

D. Other Personnel

1. The laboratories involved in the program must be directed by qualified physicians who are licensed to practice medicine and are members in good standing of the institution's medical staff.

2. There must be a sufficient number of qualified professional, technical, and clerical personnel to support laboratory work and the educational program.

IV. Institutional Resources

A. There must be ample case material and supporting facilities to meet the training requirements in dermatopathology, dermatology, and pathology. Each dermatopathology resident should examine at least 5,000 dermatopathology specimens (i.e., in-house or referred specimens in the institution's accession file for which reports are generated).

B. There must be adequate equipment, laboratory space, office facilities, meeting rooms, classrooms, and research space to support service, teaching, and educational responsibilities.

C. The institutions and laboratories participating in the program must be appropriately accredited and/or licensed.

D. Residents must have ready access to a major medical library, either at the institution or through arrangement with convenient nearby institutions. Library services should include the electronic retrieval of information from medical databases. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

V. Research and Scholarly Activity

A. Graduate medical education must take place in an environment of inquiry and scholarship which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility.

B. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of the teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:

1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.

2. Participation in journal clubs and research conferences.

3. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.

4. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.
Program Requirements for Residency Education in Dermatopathology

5. Offering of guidance and technical support (eg, research design, statistical analysis) for residents involved in research.
6. Provision of support for resident participation in scholarly activities.

VI. Evaluation
A. There must be regular, written evaluation of residents by teaching staff. Evaluations should be completed and discussed with the residents at least once every 6 months.
B. Residents should submit written evaluations of the program at least once each year for review by the director and teaching staff.

VII. Certification and Accreditation
A. The Residency Review Committees for Dermatology and Pathology are responsible for accreditation of graduate medical education programs in dermatopathology.
B. The American Board of Dermatology and American Board of Pathology are responsible for certification of individual physicians in dermatopathology. Individuals who plan to seek certification should communicate with their respective boards to obtain the latest information regarding certification.

ACGME: February 1993 Effective: July 1995

Program Requirements for Residency Education in Forensic Pathology

I. Introduction
A. The program shall be for a period of 1 year and must be directed by a pathologist who is certified by the American Board of Pathology in Forensic Pathology or has equivalent qualifications.
B. The director and teaching staff of a program must prepare and comply with written educational goals for the program.
C. All educational components of a residency program should be related to program goals.
   1. The program design and/or structure must be approved by the Residency Review Committee (RRC) as part of the regular review process.
   2. Participation by any institution providing more than 2 months of training in a program must be approved by the RRC.
D. The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Written evaluations by residents should be utilized in this process.

II. Program Personnel
The program director and the teaching staff are responsible for the general administration of a program, including these activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director
1. There must be a single program director responsible for the program.
2. Qualifications of the program director include:
   a. Requisite and documented clinical, educational, and administrative abilities and experience.
   b. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)

B. Teaching Staff
1. There must be a sufficient number of teaching staff with documented qualifications to instruct and supervise adequately all the residents in the program. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities.

c. Certification by the American Board of Pathology in Forensic Pathology or suitable equivalent qualifications.
d. Appointment in good standing to the medical staff of an institution participating in the program.
3. Responsibilities of the program director include:
   a. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.
   b. Selection of residents for appointment to the program according to institutional and departmental policies and procedures.
   c. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program.
   d. The supervision of residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.
   e. Regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician.

   The program director, with participation of members of the teaching staff, shall:
   1. At least semiannually evaluate the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures.
   2. Communicate each evaluation to the resident in a timely manner.
   3. Advance residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.
   4. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.
   f. The provision of a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.
   g. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.
   h. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.
   i. Preparation of an accurate statistical and narrative description of the program as requested by the RRC.

Graduate Medical Education Directory
a. The teaching staff must include at least two forensic pathologists (including the program director).
b. Programs that offer training for two or more residents must have a senior staff of qualified forensic pathologists that numbers at least one more than the number of residency positions.

2. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.

3. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

4. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

5. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

C. Other Program Personnel

Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

III. Educational Program

A. A resident should perform 250 to 350 autopsies in a year of approved training and should have experience in scene investigations, including examination of the body before it has been disturbed.

B. The resident should have responsibility for the performance of autopsies in cases that are likely to result in criminal prosecution or civil litigation, and it is highly desirable for residents to have opportunities to participate in the legal follow-up of cases if such occurs during the course of their year of training.

C. It is highly desirable for residents to accompany staff pathologists when they testify in court and give depositions.

D. During the year of approved training, the resident must have a period of approximately 4 to 8 weeks devoted exclusively to laboratory experience in toxicology, physical anthropology, and components of the crime laboratory such as firearms, serology, and trace evidence.

IV. Institutional Resources

A. Approximately 500 medicolegal autopsies should be conducted in an approved program each year. Of these, 100 or more should be in cases in which death is due to the immediate (within 24 hours) and direct effects of physical or chemical injury.

B. The institution or office should conduct approximately 300 additional autopsies for each additional residency position requested.

C. Adequate facilities and competent personnel shall be available and properly utilized for the conduct of all bacteriologic, biochemical, toxicology, firearms, trace evidence, physical anthropology, odontology, and other scientific studies as may be needed to ensure complete postmortem investigation. When such support services are not housed at the medicolegal facility, they should be available and accessible to the resident at suitable laboratories.

D. If the resident is to spend parts of the training program at other laboratories or institutions, such training must be adequately supervised by qualified personnel.

V. Program Research and Scholarly Activity

A. Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility.

B. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:

1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.

2. Participation in journal clubs and research conferences.

3. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.

4. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.

5. Offering of guidance and technical support (eg, research design, statistical analysis) for residents involved in research.

6. Provision of support for resident participation in scholarly activities.

C. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.

1. Library services should include the electronic retrieval of information from medical databases.

2. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

ACGME February 1986 Effective July 1995

Program Requirements for Residency Education in Hematology

I. Definition, Duration, and Scope of Education

A. Hematology is the practice of pathology concerned with the study and diagnosis of human diseases involving the hematopoietic tissues and cells. Hematology requires a strong foundation in pathology.

B. Graduate medical education programs in hematology must provide an organized educational program for qualified physicians seeking to acquire additional competence in hematology and should be associated with an active program in clinical hematology of both adults and children.

C. Programs will be accredited to offer 1 year of organized training in all current aspects of hematology, including clinical laboratory procedures, laboratory management, database management, quality assurance, self-assessment, clinical consultation, and the scientific basis of hematology.
II. Program Goals and Objectives

A. The director and teaching staff of a program must prepare and comply with written educational goals for the program.

B. All educational components of a residency program should be related to program goals.

1. The program design and/or structure must be approved by the Residency Review Committee (RRC) as part of the regular review process.

2. Participation by any institution providing more than 2 months of training in a program must be approved by the RRC.

III. Educational Program

A. Curriculum

1. The program must be structured to give hematology residents clearly defined graduated responsibilities and delegated authority. Written goals and objectives for the educational program must be clearly defined.

2. There must be ample opportunity for the residents to develop knowledge and skills in the techniques of specimen collection and preparation for routine hematology testing, bone marrow aspiration, biopsy and interpretation, lymph node interpretation, coagulation testing, serum analysis systems, and the applications of advanced technology, including in situ hybridization, image analysis, immunocytochemistry, cytogenetics, and molecular probe diagnosis, to hematologic problems. Adult and pediatric diagnostic material must be available.

3. Diagnosis, pathogenesis, clinical correlation, and diagnostic significance of hematologic disease must be emphasized throughout the program.

4. Residents must be given increasing responsibilities for services to patients and other physicians as they progress through the program.

5. Residents must be instructed in methods of correlating data from cytological, histopathological, and clinical pathology assessments of hematologic disease.

B. Educational Activities

1. Lectures, tutorials, seminars, rounds, and conferences with clinical services must be regularly scheduled and held.

2. Instruction should include the use of study sets of usual and unusual cases, performance of tests under supervision, and interpretation of results with generation of narrative reports.

IV. Program Personnel

The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director

A program involving two or more institutions must have a single director with authority for the supervision and coordination of the portions of the program carried out at each institution.

1. Qualifications of the program director include:

a. Requisite and documented clinical, educational, and administrative abilities and experience.

b. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)

c. Certification by the American Board of Pathology in Hematology or suitable equivalent qualifications.

d. Appointment in good standing to the medical staff of an institution participating in the program.

2. Responsibilities of the program director include:

a. Conducting the training program effectively. He or she must devote sufficient time to fulfill the responsibilities inherent in meeting the educational goals of the program, including the implementation of sound administrative practices, evaluation procedures, and the provision of adequate facilities, teaching staff, resident staff, and educational resource materials.

b. Ensuring that residents are given reasonable duty and call assignments.

c. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.

d. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.

e. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program.

f. The supervision of residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.

g. Regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician. The program director, with participation of members of the teaching staff, shall:

1. At least biannually evaluate the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures.

2. Communicate each evaluation to the resident in a timely manner.

3. Advise residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.

4. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.

h. The provision of a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation shall be part of the resident's permanent record maintained by the institution.

i. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.

j. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.

k. Preparation of an accurate statistical and narrative description of the program as requested by the RRC.

B. Teaching Staff

1. There must be a sufficient number of teaching staff with documented qualifications to instruct and supervise adequately all
the residents in the program. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities.

2. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.

3. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

4. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

5. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

C. Residents

1. The resident should have completed training in anatomic and clinical pathology, anatomic pathology or clinical pathology, or primary certification in another primary medical specialty board of the American Board of Medical Specialties.

2. The number of resident positions requested must be consistent with the educational resources available in a program.

3. Residents must have the opportunity to assume increasing responsibility as they progress through the program.

4. Residents should have the opportunity to become involved in hematology research and teaching during the program.

5. It is desirable that residents' work schedules be designed so that on average, excluding exceptional patient care needs, residents have 1 day out of 7 free of routine responsibilities and be on call in the hospital no more often than every third night. The ratio of hours worked and on-call time will vary, particularly at the senior levels, and therefore necessitate flexibility.

D. Other Personnel

1. The laboratories involved in the program must be directed by qualified physicians who are licensed to practice medicine and are members in good standing of the Institution's medical staff.

2. Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program. There must be a sufficient number of qualified and credentialed technical, clerical, and other personnel to support laboratory work and the educational program.

V. Institutional Resources

A. The program must have access to the number and variety of patients needed to provide education in hematology. The material and files must be indexed to permit appropriate retrieval. There must be mechanisms to facilitate correlation with anatomical material.

B. There must be adequate equipment, laboratory facilities, offices, meeting rooms, classrooms, and space to support service, teaching, educational, and research activities.

C. The institutions and laboratories participating in the program must be appropriately accredited and/or licensed.

VI. Program Research and Scholarly Activity

A. Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility.

B. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:

1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.

2. Participation in journal clubs and research conferences.

3. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.

4. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.

5. Offering of guidance and technical support (e.g., research design, statistical analysis) for residents involved in research.

6. Provision of support for resident participation in scholarly activities.

C. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.

1. Library services should include the electronic retrieval of information from medical databases.

2. There must be access to an on-site library or to a collection of appropriate texts and journals is each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

VII. Evaluation

A. There must be regular, formal, written evaluations of residents by teaching staff. Evaluations should be completed and discussed with the residents at least once every 6 months.

B. The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Residents should submit formal, written evaluations of the program and faculty at least once each year for review by the director and the teaching staff.

VIII. Administrative Structure

A hematology program should be administratively attached to an Accreditation Council for Graduate Medical Education-accredited residency in anatomic and/or clinical pathology.

IX. Certification and Accreditation

A. The RRC for Pathology is responsible for accreditation of graduate medical education programs in hematology. The American Board of Pathology is responsible for certification of individual physicians in hematology.

B. Questions about accreditation of residency programs should be directed to the executive secretary of the RRC.

C. Individuals who plan to seek certification from the American Board of Pathology should communicate with the executive vice
Program Requirements for Residency Education in Immunopathology

I. Introduction
A. Educational programs in immunopathology must be 1 year in length and must provide a structured educational experience in all current aspects of the discipline, including basic science, diagnostic laboratory procedures, laboratory management, and patient care consultation. Programs must be designed to teach residents to integrate immunopathologic data into medical consultations with clinicians in the diagnosis and management of patients with immunologic disease.

B. The director and teaching staff of a program must prepare and comply with written educational goals for the program.

C. All educational components of a residency program should be related to program goals.
   1. The program design and/or structure must be approved by the Residency Review Committee (RRC) as part of the regular review process.
   2. Participation by any institution providing more than 2 months of training during the program must be approved by the RRC.

II. Program Personnel
The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director
A program involving two or more institutions must have a single director, whose primary professional activity must be in immunopathology, with authority for the supervision and coordination of the portions of the program carried out at each institution.

1. Qualifications of the program director include:
   a. Requisite and documented clinical, educational, and administrative abilities and experience.
   b. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)
   c. Certification by the American Board of Pathology in Immunopathology or suitable equivalent qualifications.
   d. Appointment in good standing to the medical staff of an institution participating in the program.

2. Responsibilities of the program director include:
   a. Conducting the training program effectively. He or she must devote sufficient time to fulfill the responsibilities inherent in meeting the educational goals of the program, including the implementation of sound administrative practices, evaluation procedures and the provision of adequate facilities, teaching staff, resident staff, and educational resource materials.
   b. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. The statement must be distributed to residents and members of the teaching staff. It should be readily available for review.
   c. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.
   d. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program.
   e. The supervision of residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.
   f. Regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician. The program director, with participation of members of the teaching staff, shall:
      1. At least semiannually evaluate the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures.
      2. Communicate each evaluation to the resident in a timely manner.
      3. Advise residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.
      4. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.
   g. The provision of a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the entire period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.
   h. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.
   i. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.
   j. Preparation of an accurate statistical and narrative description of the program as requested by the RRC.

B. Teaching Staff
1. There must be a sufficient number of teaching staff with documented qualifications to instruct and supervise adequately all the residents in the program. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities.

2. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.

3. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

4. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well...
Program Requirements for Residency Education in Immunopathology

B. Teaching Conferences
There must be regularly scheduled inter- and intra-departmental conferences and educational meetings that provide for progressive resident participation. Both staff and residents must attend and participate on a regular basis. The schedule must be comprehensive in scope and must treat both clinical and research subjects.

VI. Program Research and Scholarly Activity
A. Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility.

B. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:
1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.
2. Participation in journal clubs and research conferences.
3. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations’ meetings and publication in their journals.
4. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.
5. Offering of guidance and technical support (e.g., research design, statistical analysis) for residents involved in research.
6. Provision of support for resident participation in scholarly activities.

C. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.
1. Library services should include the electronic retrieval of information from medical databases.
2. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

VI. Administrative Structure
Immunopathology programs should be administratively attached to an Accreditation Council for Graduate Medical Education-accredited anatomic and clinical pathology program wherever possible.

VII. Evaluation
A. Residents should be provided with a summary of the assessment of their performance and professional growth on completion of each rotation or other major educational assignment.
B. The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Written evaluations by residents should be utilized in this process.
VIII. Certification
Residents who plan to seek certification by the American Board of Pathology should communicate with the executive vice president of the board regarding certification matters.

ACGME: February 1988  Effective: July 1995

Program Requirements for Residency Education in Medical Microbiology

I. Introduction
A. The minimum training period in medical microbiology shall be 1 year in addition to the completion of acceptable residency training in an Accreditation Council for Graduate Medical Education (ACGME)-accredited program of anatomic and/or clinical pathology, as outlined in the Graduate Medical Education Directory, or equivalent postgraduate training and experience.
B. The director and teaching staff of the program must prepare and comply with written educational goals for the program.
C. All educational components of the residency program should be related to program goals.
   1. The program design and/or structure must be approved by the Residency Review Committee (RRC) as part of the regular review process.
   2. Participation by any institution providing more than 2 months of training in a program must be approved by the RRC.
   D. The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Written evaluations by residents should be utilized in this process.

II. Program Personnel
The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director
1. There must be a single program director responsible for the program.
2. Qualifications of the program director include:
   a. Requisite and documented clinical, educational, and administrative abilities and experience.
   b. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)
   c. Certification by the American Board of Pathology in Medical Microbiology or suitable equivalent qualifications.
   d. Appointment in good standing to the medical staff of an institution participating in the program.
3. Responsibilities of the program director include:
   a. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.
   b. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.
   c. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program.
   d. The supervision of residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.
   e. Regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician.
   The program director, with participation of members of the teaching staff, shall:
   1. At least semiannually evaluate the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures.
   2. Communicate each evaluation to the resident in a timely manner.
   3. Advance residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.
   4. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.
   f. The provision of a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.
   g. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.
   h. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents.
   Training situations that consistently produce undesirable stress on residents must be evaluated and modified.
   i. Preparation of an accurate statistical and narrative description of the program as requested by the RRC.

B. Teaching Staff
1. There must be a sufficient number of teaching staff with documented qualifications to instruct and supervise adequately all the residents in the program. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities.
2. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.
3. A member of the teaching staff of each participating institution must be designated as the person responsible for the day-to-day activities of the program at that institution, with overall coordination by the program director.
4. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.
V. Program Research and Scholarly Activity

A. Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility.

B. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:
1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.
2. Participation in journal clubs and research conferences.
3. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.
4. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.
5. Offering of guidance and technical support (e.g., research design, statistical analysis) for residents involved in research.
6. Provision of support for resident participation in scholarly activities.

C. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.
1. Library services should include the electronic retrieval of information from medical databases.
2. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

ACGME: November 1983 Effective: July 1995

Program Requirements for Residency Education in Neuropathology

I. Introduction

A. The educational program must be 2 years in length and provide a structured educational experience in all current aspects of the discipline, including basic science, laboratory management, and patient care consultation.

B. The director and teaching staff of a program must prepare and comply with written educational goals for the program.

C. All educational components of a residency program should be related to program goals.
1. The program design and/or structure must be approved by the Residency Review Committee (RRC) as part of the regular review process.
2. Participation by any institution providing more than 2 months of training in a program must be approved by the RRC.

II. Program Personnel

The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, coun-
saling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director

There must be a single program director, whose primary professional responsibility must be neuropathology.

1. Qualifications of the program director include:
   a. Resumes and documented clinical, educational, and administrative abilities and experience.
   b. Certification to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)
   c. Certification by the American Board of Pathology in Neuropathology or suitable equivalent qualifications.
   d. Appointment in good standing to the medical staff of an institution participating in the program.

2. Responsibilities of the program director include:
   a. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.
   b. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.
   c. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program.
   d. The supervision of residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.
   e. Regular evaluation of residents’ knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician.
   
   The program director, with participation of members of the teaching staff, shall:
   1. At least semianually evaluate the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures.
   2. Communicate each evaluation to the resident in a timely manner.
   3. Advance residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.
   4. Maintain a permanent record of evaluation for each resident and have accessible to the resident and other authorized personnel.
   f. The provision of a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.
   g. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.
   h. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.

i. Preparation of an accurate statistical and narrative description of the program as requested by the ACGME.

3. The program director must have the authority to organize and oversee the program and ensure that an appropriate educational environment is maintained.

B. Teaching Staff

1. There must be a sufficient number of teaching staff with documented qualifications to instruct and supervise adequately all the residents in the program. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities. The program teaching staff must include at least two neuropathologists.

2. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.

3. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

4. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

5. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

C. Number of Residents

The number of residents must conform to the neuropathologic resources available for educational purposes. Programs that fail to recruit new residents in 2 consecutive years will be subject to review and possible adverse accreditation action.

D. Other Program Personnel

Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

III. Educational Program

A. Residents must examine at least 50 neuromuscular biopsy specimens and study neoplasms and related lesions of peripheral nerves and the sympathetic and parasym pathetic nervous systems.

B. Residents should regularly participate in basic neuroscience activities, teaching conferences in neuropathology, and joint conferences with the pathology department and clinical services involved in the diagnosis and management of neurological disorders.

C. Programs must be designed to teach residents to integrate neuropathologic information into medical consultations with clinicians in the diagnosis and management of patients.

IV. Institutional Resources and Organization

A. The neuropathology program should be associated with a pathology program where each year:
1. At least 200 necropsies that include examination of the nervous system are performed.
2. There are at least 100 neurosurgical specimens from the brain, spinal cord, pituitary gland, and eyes (including neoplastic, degenerative, infectious, and immune disorders) of significance in the treatment and management of pediatric and adult patients.

B. Appropriate laboratory space, facilities, and personnel should be available for the conduct of special neuropathologic procedures, including but not limited to ultrastructural, histochemical, immunopathologic, and molecular-biologic techniques.

C. Indexes of usual and unusual cases, course and seminar materials, microscopic slide collections augmented by photographs, and museum specimens sufficient for the study of conditions and diseases not frequently encountered in routine necropsy and surgical specimens should be readily available to the program for educational purposes.

D. Neuropathology programs should be administratively attached to an Accreditation Council for Graduate Medical Education-accredited anatomic and clinical pathology (ACCP) program wherever possible.

V. Program Research and Scholarly Activity

A. Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility.

B. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:

1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.

2. Participation in journal clubs and research conferences.

3. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.

4. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.

5. Offering of guidance and technical support (e.g., research design, statistical analysis) for residents involved in research.

6. Provision of support for resident participation in scholarly activities.

C. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.

1. Library services should include the electronic retrieval of information from medical databases.

2. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

VI. Evaluation

A. Residents should be provided with a summary of the assessment of their performance and professional growth following each rotation or other major educational assignment.

B. The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Residents should evaluate the program, the faculty, and facilities in writing at least once each academic year.

VII. Certification

Residents who plan to seek certification by the American Board of Pathology should communicate with the executive vice president of the board regarding certification matters.

ACGME: February 1989  Effective: July 1995

Program Requirements for Residency Education in Pediatric Pathology

I. Definition, Duration, and Scope of Education

A. Pediatric pathology is that practice of pathology concerned with the study and diagnosis of human disease manifested in the embryo, fetus, infant, child, and adolescent. Pediatric pathology requires a strong foundation in pathology and its clinical interpretation.

B. Graduate medical education programs in pediatric pathology must provide an organized educational experience for qualified physicians seeking to acquire advanced competence in the diagnosis of childhood diseases.

C. Programs will be accredited to offer 1 year of organized education in pediatric pathology, which must include formal education in diagnostic pediatric pathology and management and quality assessment issues germane to the pediatric laboratory environment.

D. The director and teaching staff of a program must prepare and comply with written educational goals for the program.

E. All educational components of a residency program should be related to program goals.

1. The program design and/or structure must be approved by the Residency Review Committee (RRC) as part of the regular review process.

2. Participation by any institution providing more than 2 months of training during the program must be approved by the RRC.

II. Educational Program

A. Curriculum

1. The program must be structured to give residents clearly defined graduated responsibilities and delegated authority. The descriptions of rotations, assignments, or other experiences must include:

   a. The goals and objectives of the experience.
   b. The duration of the experience.
   c. The duties and responsibilities of residents at each year of training.
   d. The teaching staff responsible for the supervision and instruction of the residents during the experience.
   e. The manner in which residents are supervised during the experience.

2. There must be a program statement available for review by applicants, residents, and staff. The program statement must include:

   a. A description of the program's educational goals and philosophy.
   b. A listing and description of all required rotations, including their duration.
c. A listing and description of elective rotations and their duration.
d. A description of resident opportunities for teaching and research, including the manner in which such research is funded.
e. A description of the manner in which residents and the program are evaluated and how such evaluations are used.

3. The education in pediatric pathology must include general and systemic aspects of autopsies and surgical pathology (including embryonal, perinatal, and placental pathology as well as pediatric aspects of dermatopathology, gynecologic and obstetrical pathology, forensic pathology, and neuropathology), immunopathologic and histochemical techniques, cytopathology, ultrastructural pathology, cytogenetics, molecular biologic techniques including diagnostic techniques for metabolic diseases, and other advanced diagnostic techniques as they relate to pediatric pathology.

4. Programs must provide instruction and experience in the major aspects of a hospital laboratory as it relates to diagnosis in pediatric pathology, including resident participation in interpretation of laboratory data as part of pediatric patient-care consultation, conferences, rounds, laboratory management, quality assurance, data processing, teaching, and scholarly activity.

B. Educational Activities

1. The educational experiences detailed above may be provided through separate, exclusive rotations or by rotations that combine more than one area or by other means.
2. Lectures, tutorials, seminars, and conferences with clinical services including pediatric surgery, pediatric hematology, pediatric oncology, medical microbiology, medical genetics, pediatric radiology, obstetrics, and pediatrics must be regularly scheduled and held.
3. Instruction should include the use of study sets of usual and unusual cases and other educational materials.

III. Program Personnel

The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director

A program involving two or more institutions must have a single director who has the authority for the supervision and coordination of the portions of the program carried out at each institution.
1. Qualifications of the program director include:
   a. Requisite and documented clinical, educational, and administrative abilities and experience.
   b. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)
   c. Certification by the American Board of Pathology in Pediatric Pathology or suitable equivalent qualifications.
   d. Appointment in good standing to the medical staff of an institution participating in the program.
2. Responsibilities of the program director include:
   a. Conducting the training program effectively. He or she must devote sufficient time to fulfilling the responsibilities inherent in meeting the educational goals of the program, including the implementation of sound administrative practices, evaluation procedures and the provision of adequate facilities, teaching staff, resident staff, and educational resource materials.
   b. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.
   c. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.
   d. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program.
   e. The supervision of residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physician.
   f. Regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician. The program director, with participation of members of the teaching staff, shall:
      1. At least semi-annually evaluate the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures.
      2. Communicate each evaluation to the resident in a timely manner.
      3. Advise residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.
      4. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.
   g. The provision of a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.
   h. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.
   i. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.
   j. Preparation of an accurate statistical and narrative description of the program as requested by the RRC.
   k. Ensuring that residents are given reasonable duty and call assignments.

B. Teaching Staff

1. There must be a sufficient number of teaching staff with documented qualifications to instruct and supervise adequately all the residents in the program. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities.
2. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a
commitment to their own continuing medical education, and participation in scholarly activities.

3. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

4. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

5. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

C. Residents

1. Residents should have completed at least 2 years of training in residencies in anatomic and clinical pathology prior to appointment to a pediatric pathology program.

2. The number of resident positions requested must be consistent with the educational resources available in a program.

3. Residents must have the opportunity to assume increasing responsibility as they progress through the program.

4. The number of residents should be sufficient to promote an intellectually stimulating educational environment. Typically, there should be at least one resident enrolled in each year of a program.

5. Resident performance must not be impaired by fatigue, whether caused by program duties or other activities. On average, residents should have the opportunity to spend at least 1 full day out of 7 free from hospital duties and should be on call no more than every third night.

6. The appointment of other individuals for special training or education must not dilute or detract from the educational opportunities of the regularly appointed residents in pediatric pathology.

D. Other Personnel

1. The laboratories involved in the program must be directed by qualified physicians who are licensed to practice medicine and are members in good standing of the institution's medical staff.

2. Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

IV. Institutional Resources

A. The program must have access to an adequate volume and variety of pediatric pathology material. The material and files must be indexed to permit appropriate retrieval. There must be mechanisms to facilitate correlation with anatomic material.

B. There must be adequate equipment, laboratory facilities, offices, meeting rooms, classrooms, and space to support service, teaching, educational, and research activities.

C. The institutions and laboratories participating in the program must be appropriately accredited and/or licensed.

D. Each pediatric pathology program should be administratively attached to an Accreditation Council for Graduate Medical Education-accredited residency in anatomic and clinical pathology or anatomic pathology when feasible.

E. To facilitate peer interchange and augment the breadth of the educational experiences, institutions providing programs in pediatric pathology must be affiliated with accredited specialty training programs in pediatrics, obstetrics, surgery, and radiology.

F. While the quality of an educational program is not based on the volume of teaching material alone, programs must have sufficient volume and variety of materials available for educational purposes to ensure the opportunity for:

1. The participation in at least 40 pediatric autopsies per resident during the program. This experience must include general pediatric, metabolic, forensic, perinatal, and stillborn autopsies. It is highly desirable that this experience also include embryo-fetal autopsies.

2. Examination of at least 2000 pediatric surgical pathology specimens per resident during the program. This material must be from an adequate mix of cases, including obstetrics-related materials (placentas and abortions) and cytology.

3. The performance of at least 50 intraoperative consultations (frozen sections, smears) per resident during the program.

4. The number and variety of laboratory tests utilized in the program should be sufficient to give each resident experience in the range of laboratory examinations typically available and useful in the diagnosis and following of both common and unusual pediatric diagnostic problems, including metabolic, perinatal, genetic, neoplastic, and other diseases of the pediatric population.

V. Program Research and Scholarly Activity

A. Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility.

B. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:

1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.

2. Participation in journal clubs and research conferences.

3. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.

4. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.

5. Offering of guidance and technical support (e.g., research design, statistical analysis) for residents involved in research.

6. Provision of support for resident participation in scholarly activities.

C. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.

1. Library services should include the electronic retrieval of information from medical databases.

2. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.
VI. Evaluation

A. There must be regular, formal, written evaluation of residents by teaching staff. Evaluations should be completed and discussed with the residents at least once every 6 months.
B. The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Residents should submit confidential, written evaluations of the program and teaching staff at least once each year.

VII. Certification and Accreditation

A. The RRC for Pathology is responsible for accreditation of graduate medical education programs in pathology. The American Board of Pathology is responsible for certification of individual physicians in pathology.
B. Questions about accreditation of residency programs should be directed to the executive secretary of the RRC.
C. Individuals who plan to seek certification from the American Board of Pathology should communicate with the executive vice president of the board to obtain the latest information regarding certification.

ACGME: June 1994 Effective: July 1995

Program Requirements for Residency Education in Pediatrics

I. Introduction

Residency programs in pediatrics must provide educational experiences in the diversified field of pediatrics in an intellectual environment conducive to learning the exemplary practice of pediatrics.

A. Duration and Levels of Training

These programs must provide a well-organized, progressive educational experience with increasing patient care responsibilities over a 3-year period.

The program must require at least 6 months of supervisory responsibility within the integrated hospitals, which must include both inpatient and outpatient experience.

The first year of training in an accredited core pediatric program must contain at least 8 months of pediatric experience. The remaining 4 months may be scheduled by the program director for other supervised elective educational experiences designed to enhance the residents' training.

The second year of training must provide the residents with increased clinical responsibility. This may include supervisory activity.

In the third year the residents must continue to have clinical care and supervisory responsibilities. They must be able to function independently under certain circumstances, such as in well-child continuity clinics, conducting school health examinations and/or preschool physicals, and managing minor illnesses and acute emergencies. These activities must be monitored by the faculty.

B. Scope of Training

1. Breadth of Experience

Programs must provide a broad educational experience in pediatrics that will prepare the resident to function as a primary care specialist capable of providing comprehensive patient care. The training should provide an adequate foundation on which future subspecialty training may be based. It must involve all aspects of human growth and development, from conception through fetal life, infancy, childhood, adolescence, and young adulthood, and must include both preventive and therapeutic pediatrics.

The program must provide experience in the management of pathologic conditions, ranging from minor illness to life-threatening conditions requiring intensive care. There must be experience in health supervision of the well child; in diseases encountered frequently in pediatric office practice; in behavioral and psychosocial problems; and in problems that lie in the medical and surgical subspecialty areas, involving chronic as well as acute or emergent conditions.

2. Patient Population

Programs must have a sufficient number and variety of patients, including infants through young adults, to ensure that each resident receives broad training and experience.

The clinical experience must be sufficiently complex to ensure that the residents will have adequate exposure to diverse problems, including life-threatening conditions. A deficient or excessive patient load may jeopardize the accreditation status of the program.

3. Development of Skills

The program must provide opportunity for the resident to become competent in the performance of a number of procedures. These may include but are not limited to the following: lumbar puncture, placement of intravenous lines, arterial puncture, umbilical artery catheter placement, cutdowns for intravenous infusions, suprapubic taps, endotracheal intubation, and pleural and peritoneal paracentesis.

It is expected that the faculty will teach, evaluate the residents' performance of, and document the residents' attainment of these skills.

II. Types of Programs

The program design and/or structure must be approved by the Residency Review Committee (RRC) as part of the regular review process.

A. Independent, Affiliated, or Integrated Programs

An accredited training program may be independent or may occur in two or more institutions. Participation by any institution providing more than 6 months of training must be approved by the RRC. Programs utilizing multiple hospitals must ensure the provision of a unified educational experience for the residents. When two or more institutions develop formal agreements and joint responsibilities to provide complementary facilities, teaching staff, and teaching sessions, this is designated as an affiliated program. However, when two or more institutions are utilized and a single program director assumes responsibility for the entire residency, including the appointment of all residents and teaching staff, the program is designated as integrated. No limit is placed on the duration of rotations to institutions that are integrated with the pediatric program at the parent hospital. In a single program some participating hospitals may qualify as integrated, while others are merely affiliated.

Rotations to affiliated institutions that are not integrated with the primary hospital may not exceed 8 months during the 3 years of training. No more than 3 months of these outside rotations may be in institutions that do not have their own accredited residencies in pediatrics.

1. These requirements also pertain to primary care tracks within accredited pediatrics programs.
The rotating residents must be fully absorbed into the prevailing pattern of instruction and patient care at the same level as pediatric residents of the affiliated institution. Clinical responsibility alone does not constitute a suitable educational experience.

Accredited pediatric residency programs that offer training to residents from other pediatric programs must provide instruction and experience equivalent to that which they give their own residents. They should not enter into agreement with other programs if they are not prepared to absorb those residents into the prevailing pattern of education and patient care.

B. Institutional Agreements
When a residency program relies upon other institutions to supply some components of the curriculum, the arrangement between the institutions must be designed to meet the educational needs of the residents and must be described in a written document that is signed by the appropriate individuals from the respective institutions. These agreements must relate specifically to the program in pediatrics. Copies of these formal written arrangements, specifying administrative, organizational, and educational relationships, must be submitted with the program information forms at the time of each evaluation by the RRC. They must address the following:
1. The nature and scope of the affiliation or integration as it pertains to the residency
2. The resources in the affiliated or integrated institutions that will be available to the pediatric residents and whether space is ensured in the desired rotations
3. The specific context of the rotations
4. The duties and responsibilities the pediatric residents will have at the affiliated or integrated institution, including the degree of responsibility for patient care and whether supervisory experience is involved
5. The relationship that will exist between the residents of this program and the staff and residents at the affiliated or integrated institution
6. The names and qualifications of the specialists with major teaching commitments for these proposed rotations, particularly in the subspecialty areas
7. The method of evaluation of residents by teaching staff at the affiliated or integrated institution and how this is communicated to the program director.

III. Size of Program

A. Appointment of Residents
The development of a satisfactory program requires careful selection of applicants for appointment to the residency. When appointing residents, the program director must adhere to the criteria for resident eligibility that are specified in the institutional requirements and to institutional and departmental policies and procedures. An excessively high rate of resident attrition from a program will be a cause of concern to the RRC.

B. Resident Complement/Peer Interchange
Peer interchange is an important component of the learning process. The number of pediatric residents must be sufficient to provide for frequent and meaningful discussion with peers. There must be a sufficient number of residents at each level to provide appropriate peer interchange during all phases of the training program, eg., neonatal, outpatient, ward, and emergency room. It is strongly recommended that a program offer a minimum total of 12 resident positions in the 3 years of training, exclusive of subspecialty residents. The RRC will consider the presence of residents from combined internal medicine/pediatric programs when it evaluates this.

C. Service Duties and Supervision
The supervision of residents must be accomplished through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians. On-call schedules for teaching staff must be structured to ensure that supervision is readily available to residents on duty. The level of responsibility accorded to each resident must be determined by the teaching staff.

Hospital duties must not be so pressing or consuming that they preclude ample time for other important phases of the training program or for personal needs. There should be adequate staff backup when there are unexpected patient care responsibilities that might lead to resident fatigue, thereby jeopardizing patient care.

It is equally important that the residents have a keen sense of personal responsibility for patient care. If the residents do not accept this responsibility, no educational program can produce sympathetic and effective physicians. A resident's obligation to patients is not automatically discharged at any given hour of the day or any particular day of the week. The residents should not be relieved of duty until the proper care and welfare of the patients have been ensured by the presence of a suitable professional replacement.

D. Call Schedule
Night and weekend duties must be sufficient to permit implementation of the concept of responsibility for patients and to provide adequate patient care. Resident on-call rotations should occur with an average frequency of every third or fourth night in any year of the program, and the schedule should be designed to provide a monthly average of at least 1 day out of 7 without assigned duties in the program.

E. Monitoring Resident Stress
The program must have mechanisms for monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support service to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.

F. Outside Professional Activities
The program should monitor the effects of other activities of the residents, including moonlighting, to ensure that the quality of patient care and the residents' education is not impaired.

IV. Program Personnel
The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to the program.

A. Program Director
There must be a single program director who has responsibility for the program. The program director is responsible for the selection and supervision of the teaching staff and other program personnel at each institution participating in the program.

The director of the residency program must have demonstrated ability as a teacher and administrator and be knowledgeable in the related basic sciences and research methodology. The director must be capable of administering the program in an effective manner and be competent in the care of pediatric patients.

The program director must be licensed to practice medicine in the state where the institution that sponsors the program is
Program Requirements for Residency Education in Pediatrics

located and must hold an appointment in good standing to the medical staff of an institution participating in the program.

This individual must devote sufficient time to the residency program to provide continuity of leadership and to fulfill the administrative and teaching responsibilities inherent in achieving the educational goals of the program.

The director should be currently certified by the American Board of Pediatrics (ABP) or must possess suitable equivalent qualifications. The adequacy of equivalent qualifications will be determined by the RRC.

Continuity of leadership over a period of years is important to the stability of a residency program. Frequent changes in leadership or long periods of temporary leadership usually have an adverse effect on an educational program and will be cause for serious concern. The RRC must be notified promptly of any change in the leadership of the program.

The chief of pediatrics/department chair must have responsibility for all educational programs that are carried on within the Department of Pediatrics, including those in the subspecialties. All program descriptions submitted from this department must bear this individual's signature, indicating that the chief/chair has reviewed and approved the documents submitted.

B. Teaching Staff

1. Number and Breadth

There must be a sufficient number of teaching staff with documented qualifications to instruct and supervise adequately all the residents in the program at all of the sites utilized. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities.

A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

A teaching staff with professional ability, enthusiasm, and a commitment to teaching is essential. They must possess diversified interests and expertise in clinical pediatrics and in the basic sciences. A measure of their commitment to the program is the degree to which patients under their care are available for resident education.

Within the parent hospital and/or integrated participating hospitals there must be teaching staff or attending staff in at least four of the required 1-month subspecialty rotations. These individuals must be readily available to provide on-site assistance to residents on an ongoing basis in the care of their patients on the outpatient and inpatient services. They should be board-certified and have subspecialty certification, where appropriate, or must possess suitable equivalent qualifications. The RRC will judge the adequacy of equivalent qualifications.

A surgeon having significant experience with pediatric patients must play a major role in the residents' education with respect to surgical diagnoses and pre- and postoperative care. A pathologist and a radiologist who have significant experience with pediatric problems and interact regularly with the pediatric residents are essential.

An important aspect of residency training is the opportunity for residents to develop their interpersonal skills and to participate in ethical decision making. Therefore, the teaching staff should serve as role models for the residents in these areas, displaying attitudes and behavior that demonstrate their commitment to patients and their families. The teaching staff should also display respect for coworkers and other members of the health-care team.

2. Scholarly Activity

The responsibility for establishing and maintaining an environment of inquiry and scholarship rests primarily with the teaching staff, but support for such activities should be provided by the sponsoring institution. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:

a. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.

b. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.

c. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.

C. Other Personnel

Qualified pediatric nurses are essential. The institutional staff should also include, as a minimum, qualified members of the following allied health professions: social service, child life, physical therapy, respiratory therapy, psychology, and nutrition.

Programs also must have the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the residency.

V. Curriculum

A. Introduction

Each component of the curriculum must be a structured educational experience that reflects an appropriate balance between clinical and didactic activities. Written goals and objectives and a method of evaluation must exist for these curricular components.

These goals must be distributed to residents and members of the teaching staff and should be available for review.

B. General Pediatric Training

1. Introduction

In keeping with the commitment of pediatrics to primary and comprehensive care, the program must involve experience in ambulatory general pediatrics, adolescent medicine, behavioral-developmental pediatrics, general pediatric inpatient care, and normal newborn care. It must include at least 6 months in general ambulatory settings (including general pediatric clinic, acute illness clinic, emergency room, private practice settings, adolescent clinics, and behavioral-developmental clinics), in addition to the required time spent in the continuity clinic. If residents spend more than 1/2-day session per week in the continuity clinic, the additional time can be included in the required 6 months in the ambulatory general pediatrics settings.

2. Ambulatory General Pediatrics

General ambulatory pediatric care of high quality is essential for adequate training and requires the physical presence of qualified supervisors in settings where the patient load is maintained at a level appropriate for adequate learning. An array of pediatric problems of wide variety and complexity must be included in the patient group cared for in the general outpatient setting. The program director is responsible for documenting the adequacy of the outpatient population.

2. Certain federal programs are exempted.
Program Requirements for Residency Education in Pediatrics

Appropriate consideration also should be given to the total environment of the patient, including the psychosocial influences on and needs of the patient and family.

The following requirements pertain to ambulatory general pediatric care:

a. Continuity Clinic
To develop an understanding of the longitudinal aspects of growth, development, diseases and problems, continuing care of a group of patients throughout the 3 years of training is essential. Residents must have an assignment of at least 1/2 day per week in a continuity clinic throughout the 3 years of training. This assignment should receive priority over other duties and may be interrupted only for vacations and outside rotations located at too great a distance to allow the residents to return for the clinic. The periods of interruption may not exceed 3 months during any 1 year or 3 consecutive months at any time.

The continuity patient population must be sufficient in number and of adequate variety to meet the educational objectives. It must include well patients as well as those with complex and chronic problems. It also must include those initially cared for by the resident in the normal newborn nursery, in the general inpatient units, in the intensive care units, and in the subspecialty or emergency clinics. The teaching staff must monitor the appointment system to ensure the adequacy of the patient numbers and type of problems for each resident. Residents should arrange for the care of their patients when they themselves are not available.

Special attention should be given to anticipatory guidance and developmental and behavioral issues. Pediatric patients with chronic diseases and multiple problems, including physical and emotional handicaps, are in great need of comprehensive, coordinated care. Residents must learn how to serve as care managers for these patients and to function as a part of a health-care team. Subspecialty consultants and ancillary personnel must be available to the residents as they care for these patients.

b. Emergency and Acute Illness Experiences
In addition to their experience with acutely ill pediatric patients in the continuity clinics, residents must have at least 3 months of experience managing pediatric patients with acute problems, such as respiratory infections, dehydration, coma, seizures, poisoning, trauma, lacerations, burns, shock, and status asthmaticus. At least one of these months must be a block rotation in an emergency room setting during which the residents have the opportunity to function as the physician of first contact for pediatric patients with the problems mentioned above. It is not a sufficient educational experience if the pediatric residents function only on a consultative basis.

While high patient volume forces the setting of priorities and may facilitate the development of efficiency and sound clinical judgment, it should not reach a point where learning or patient care are compromised. The patient volume per resident must be kept reasonable, with due consideration given to the level of training of the residents, the ratio of new patients to those making return visits, and the complexity of the problems. Although they may be called upon to care for some adult patients, residents' major responsibility must be for an appropriate range of pediatric patients.

Residents in these settings must be supervised by pediatric teaching staff members or by other attending staff who have extensive experience in and knowledge of the care of pediatric emergencies. These individuals must participate with the members of the pediatric teaching staff in the establishment of educational goals for this experience and in the evaluation of the pediatric residents.

c. Private Practice Preceptorships
Office electives or preceptorships may constitute up to 2 months in each of the second and third years of pediatric residency. Assignments may be solid blocks of time or may run concurrently with other assignments on a part-time basis.

Programs using this educational method must submit to the RRC adequate descriptions of the content of these educational experiences each time the program is reviewed. Preceptors must be designated specifically by the director and chosen for their willingness and ability to teach. The manner in which responsibility is delegated is important. Residents must be involved in decision-making processes and not function merely as observers. They must accompany the preceptor on hospital visits. Their role in the management of inpatients should not, however, conflict with that of other house officers assigned to inpatient duty. A resident may not be employed to substitute for a pediatrician temporarily absent from the office. A preceptor must be physically present to supervise the resident and ensure a continuing educational experience.

A resident in a preceptorial relationship should be responsible for the maintenance of office records as well as for the management of patients assigned to him or her. The program director is responsible for the documentation of preceptorial activities, including justification of the qualifications of the preceptor, written evaluation of the resident by the preceptor, and evaluation of the preceptor by the resident.

3. Adolescent Medicine
There must be a structured experience in adolescent medicine involving didactic and clinical components and inpatient and ambulatory experience. It must be under the direction of a teaching staff member with expertise in adolescent medicine. Residents must have patient care experiences in the following: health maintenance examinations, family planning, sexually transmitted diseases, and gynecology.

Experiences in chemical dependency, sports medicine, health needs of incarcerated youth, and college health issues are strongly recommended. A separate clinic for adolescent patients is desirable.

4. Behavioral Developmental Pediatrics
Residents must participate in a structured experience in normal and abnormal behavior and development involving didactic and clinical components. Experience must include the care of patients from newborn through young adulthood.

5. Inpatient Care
The list of diagnoses and patient data requested in the program information forms must show evidence of a sufficient number and variety of complex and diverse pathologic conditions to ensure that the residents have adequate experience with patients who have acute and chronic illnesses as well as those with life-threatening conditions in the pediatric age groups. The experiences as supervised consultants on subspecialty rotations are distinct from this requirement.

Residents at more than one level of training must interact in the care of inpatients. The number of residents from other specialties who rotate on the pediatric service must not dilute the experience and peer interaction for the pediatrics residents.

The patient load for each first-year resident should allow time for close and effective management and detailed study of patients, yet should challenge the resident with diverse and complex problems. A first-year resident should be responsible for approximately 6 to 10 patients, depending on the average length of stay and the nature and severity of illness. Second- and third-
year residents may be involved in the care of substantially more patients than are first-year residents. Pediatric faculty with broad experience in primary care pediatrics should actively participate in the education of residents in the inpatient settings.

Regularly scheduled attending rounds must be conducted by qualified teachers who are immediately available to the residents for consultation and who are backed up by consultants in subspecialty areas. These rounds must occur at least three times per week. Opportunities also must be provided for residents to accompany attendings during focused physical examinations.

6. Normal Newborn
There must be the equivalent of at least 1 month spent in the care of normal newborns in the normal newborn nursery setting. This experience must include physical examination and counseling of the mother on the care and feeding of her infant.

C. Subspecialty Training
1. Duration and Level
The total amount of time committed to all subspecialty rotations must be at least 11 but not more than 15 months. No more than 6 months may be spent on any one subspecialty during the 3-year residency. The subspecialty rotations should occur primarily in the second and third years of training.

2. Subspecialty Rotations
There must be a rotation in neonatal critical care (Levels II and III) for a minimum of 4 but not more than 6 months, exclusive of experience with the normal newborn. Residents must have the opportunity to participate in the resuscitation of newborns in the delivery room.

In addition to the rotation in neonatal critical care, the program must require of each resident a minimum of four 1-month rotations from among the following pediatric subspecialties:
- Allergy/Immunology
- Cardiology
- Critical Care
- Endocrinology/Metabolism
- Gastroenterology
- Hematology/Oncology
- Nephrology
- Neurology
- Pulmonology

The remaining subspecialty experiences needed to comply with the requirement for 11 to 15 months of subspecialty training may be scheduled during part of the general rotations in the outpatient department and inpatient services or as block assignments. These may be chosen from the list above or from the following important subspecialty areas:
- Child Psychiatry
- Dermatology
- Genetics
- Infectious Disease
- Pediatric Radiology
- Pediatric Surgery
- Pediatric Rheumatology

With the exception of rotations in neonatal critical care, two elective subspecialty rotations may be combined over a 2-month period of time, provided the outpatient and inpatient experiences of the two subspecialties can be successfully integrated. If two areas that cannot be integrated are offered, each must be at least 1 month in duration.

3. Subspecialty Supervision
Subspecialty experience must be supervised by pediatricians who have been certified in their pediatric subspecialty areas by the appropriate boards of the ABP or by another specialty board or who possess suitable equivalent qualifications. The acceptability of equivalent qualifications will be determined by the RRC. These individuals must be directly involved in the supervision of residents during their training in the subspecialties.

4. Content of Required and Elective Subspecialty Experiences
All subspecialty rotations must have an adequate number and variety of patients to provide each resident with an appropriately broad experience in the subspecialty. These experiences also must include attending subspecialty conferences, appropriate reading assignments, and acquainting the residents with techniques used by subspecialists.

Each resident must have patient care responsibilities as a supervised consultant on the inpatient and outpatient services in each of his or her subspecialty experiences. As a supervised consultant the resident must have the opportunity to evaluate and to formulate management plans for subspecialty patients. Instances in which a resident functions solely as an observer will not fulfill this requirement.

D. Conferences
In addition to at least weekly conferences in general pediatrics and its subspecialties, there must be regularly scheduled conferences in pathology, psychology, and radiology. These must be conducted by persons qualified in the specific areas under discussion. Although the departmental clinical faculty may have sufficient knowledge and expertise to provide satisfactory instruction, participation by basic scientists is encouraged. Active participation by the teaching faculty should be documented.

As residents progress through their training, they should be increasingly involved in these conferences. Reasonable requirements for resident attendance should be established and resident and staff attendance monitored.

Rounds and conferences should correlate fundamental physiological, biochemical, microbiological, pathological, and psychological aspects of disease in the pediatric age groups. The content of the conferences should be integrated into the educational program to teach residents how to utilize basic science resources in developing an understanding of the mechanisms of diseases and their management.

Residents should be encouraged to attend postmortem examinations of patients on their service and to discuss the findings with the pathologist.

E. Clinical Investigation and Research
Research offers an important opportunity for the application of the basic sciences to clinical problems and is an important part of the preparation of the resident for a lifetime of self-education after the completion of formal residency training. The program must provide support for resident participation in scholarly activities. Residents should be taught how to engage in critical evaluation of the scientific literature through journal clubs and research conferences. The program also must provide the opportunity for residents to take part in scholarly activities, which may include clinical investigation and/or basic research. Teaching staff must offer guidance and technical support (eg, research design, statistical analysis) for residents involved in research.

VI. Facilities
A. Clinical Facilities
The inpatient and outpatient facilities must be adequate in size and variety and must have the appropriate equipment necessary for a broad educational experience in pediatrics.

There must be an appropriately equipped and staffed emergency room facility for the care of pediatric patients. The program also must have an intensive care facility that is appropriately equipped and staffed for the care of seriously ill pediatric patients.

B. Library
1. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.
2. Library services should include the electronic retrieval of information from medical databases.

3. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

VII. Evaluation

The program director is responsible for developing and implementing formal mechanisms for evaluation.

A. Evaluation of Residents

Program directors are required to keep accurate documentation of the general and subspecialty experiences of each resident in the program and to submit this information to the RRC if it is requested. The RRC also will require documentation of the exact nature of the general and subspecialty experiences at other institutions so that it can monitor the degree to which such experiences have educational merit.

The program should develop mechanisms by which residents can provide clear demonstration of the acquisition of fundamental knowledge and clinical skill prior to progression to the level of supervised semi-independent patient management.

Written documentation of regular periodic evaluation of the residents must be maintained. All evaluations must be formally reviewed with the residents at least annually but preferably semiannually.

It is essential that residents participate in existing national examinations. The annual in-service examination of the ABP is one example of an objective test that can be utilized by the program. An analysis of the results of these testing programs should guide the faculty in regard to the cognitive strengths and weaknesses of individual residents.

Residents should be advanced to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.

The program director is responsible for implementing fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.

The program must maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.

The program director and faculty are responsible for provision of a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.

B. Evaluation of Faculty

Teaching faculty must be evaluated on a regular basis. Documentation of faculty evaluation should include teaching ability and commitment as well as clinical knowledge. There must be a formal mechanism by which residents participate in this evaluation in a confidential manner.

C. Evaluation of the Program

The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident should participate in these reviews.

There should be documented evidence of periodic self-evaluation by the program in relation to the educational goals, the needs of the residents, and the teaching responsibilities of the faculty. This evaluation should include an assessment of the balance between the educational and service components of the residency. In addition, the teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, and the quality of supervision of the residents.

As part of the process, the program director must also monitor the performance by the program's graduates on the examinations of the ABP. Information gained from these evaluations should be used to improve the program.

VIII. Information Items

A. Evaluation by the RRC

Each program will be evaluated by the RRC at regular intervals. Program directors are required to provide the statistical and narrative information requested by the RRC for these evaluations. The RRC will judge the degree of compliance with these program requirements and the institutional requirements. Where multiple tracks exist within one program, each must comply with the requirements.

Prior approval of the RRC is required for the addition or deletion of a major participating hospital and for major changes in the format of a program. On review of a proposal for major change in a program, the RRC may determine that a site visit is necessary before a decision can be made.

One measure of the quality of a residency program is the performance of its graduates on the certifying examinations of the ABP. In its evaluation of residency programs the RRC will take into consideration the information provided by ABP regarding resident performance on the certifying examinations over a period of several years.

The provisions of the institutional requirements also must be met for accreditation.

B. Board Certification

Residents who plan to seek certification by the ABP should communicate with the president of the board to obtain the latest information regarding certification.

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Policies and Procedures for Residency Education in the Subspecialties of Pediatrics

As a general rule, pediatric subspecialty programs will be surveyed and reviewed in conjunction with the survey and review of the core pediatrics program to which they are attached. In special cases determined by the Residency Review Committee (RRC), or in the case of a new application, a subspecialty program may be surveyed and reviewed separately.

A separate set of forms will be completed for the core program and for each of the subspecialty programs being surveyed. Instructions will be provided regarding the preparation of the forms and the details of the survey.

To qualify for initial accreditation, a subspecialty program must function in conjunction with an accredited core program that is in good standing. If the core program is accredited on a probationary basis or is involved in implementing appeals procedures, an application for accreditation of a new subspecialty program attached to that core will not be accepted by the RRC.
The RRC will designate subspecialty programs as being accredited or not accredited. No further delineation of accreditation categories will be utilized. The accreditation of a subspecialty program will be directly tied to that of the core. If the core program is subsequently accredited on a probationary basis, this is simultaneously a warning to the related subspecialty programs that accreditation is in jeopardy. Withdrawal of accreditation of the core pediatrics program will result in the simultaneous loss of accreditation of all subspecialty programs that function in conjunction with it. Additional details regarding these procedures are found in the ACGME Manual of Policies and Procedures for Graduate Medical Education Review Committee.

If the core program remains in good standing but the RRC judges a subspecialty program to be in noncompliance with the program requirements, a warning will be issued. If suitable improvement is not demonstrated in the time specified by the RRC, accreditation may be withdrawn from the subspecialty program. The Procedures for Appeal of Adverse Actions may be utilized by subspecialty programs from which accreditation has been withdrawn in an action separate from withdrawal of accreditation from the core program.

Inquiries about accreditation of pediatric subspecialty programs should be directed to the executive secretary of the RRC for Pediatrics.

Program Requirements for Residency Education in the Subspecialties of Pediatrics

I. Introduction
Each subspecialty program must be organized and conducted in a way that ensures an appropriate environment for the well-being and care of the patients, provides residents with adequate training in the diagnosis and management of these subspecialty patients, and develops scholarship on the part of those residents.

These subspecialty programs must exist in conjunction with and be an integrated part of an Accreditation Council for Graduate Medical Education (ACGME)-accredited pediatric residency program. Their existence should not compromise the integrity of the core program.

Prerequisite training for entry into a pediatric subspecialty program should include the satisfactory completion of an ACGME-accredited pediatric residency or other suitable training. The director and teaching staff of a program must be prepared and comply with written educational goals for the program, and all educational components of a program should be related to these goals.

The program design and/or structure must be approved by the Residency Review Committee (RRC) as part of the regular review process. Participation by any institution providing more than 6 months of training in the program must be approved by the RRC.

II. Duration and Scope of Training
Pediatric subspecialty programs must provide two years of training, that must include progressive clinical, technical, and consultative experiences that will enable the resident to acquire expertise as a consultant in the subspecialty. A program must emphasize scholarship, self-instruction, development of critical analysis of clinical problems, and the ability to make appropriate decisions. There should be progressive acquisition of skills in investigative efforts related to the subspecialty.

III. Service Duties
Service commitments must neither compromise the educational goals and objectives nor preclude adequate time for personal needs. The call schedule should not be more frequent than every third night, averaged monthly, and the overall schedule should be designed to provide a monthly average of at least 1 day out of 7 without assigned duties in the program.

The program director and teaching staff must monitor resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction, and should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.

IV. Program Leadership and Teaching Staff
The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director
There must be a single program director responsible for the program. This director must be fully committed to the program in order to devote sufficient time to the achievement of the educational goals and objectives and must be based at the primary teaching site. The RRC must be notified promptly of a change in the leadership of the program.

1. Qualifications
The director must possess the following qualifications:
   a. Requisite and documented clinical, educational, investigative, and administrative abilities and experience.
   b. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)
   c. Certification by the relevant subspecialty board of the American Board of Pediatrics or acceptable equivalent credentials. The adequacy of alternate qualifications will be judged by the RRC.
   d. Appointment in good standing to the medical staff of an institution participating in the program.

2. Responsibilities
The responsibilities of the program director include the following:
   a. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of the subspecialty residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.
   b. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.
   c. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program.
   d. The supervision of residents through explicit written descriptions of supervisory lines of responsibility for the care of pa-
Program Requirements for Residency Education in the Subspecialties of Pediatrics

tients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.

Supervision of subspecialty residents must be provided by members of the teaching staff who are skilled in medical education as well as in the care of patients and who can devote adequate time to both of these endeavors. The supervising faculty must include teaching staff who are active and competent in their respective subspecialty disciplines and who are available to ensure proper education and to intervene in patient care as appropriate.

e. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.

B. Teaching Staff

1. In addition to the program director, there must be at least one other member of the teaching staff who is similarly qualified in the subspecialty to ensure continuity of the educational program.

2. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

3. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.

4. Appropriate consultant faculty must be available to provide the residents with a defined educational experience in related disciplines, as delineated in the special requirements for each subspecialty.

C. Other Program Personnel

Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

V. Scholarly Activity and Research

As part of the academic environment, an active research component must be included within each accredited subspecialty program. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. Recent productivity by the program and by the residents will be assessed.

Participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship must be demonstrated. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.

There must be adequate resources for scholarly activity, including research and critical analysis. Adequate laboratory space, equipment, and computer services for data analysis and statistical consultative services must be available to both the faculty and the residents.

A. Faculty Research/Scholarly Activity

The teaching staff must provide evidence of a commitment to and productivity in research in the pediatric subspecialty area. This research must be ongoing in clinical and/or basic aspects of the pediatric subspecialty field.

The RRC will consider the following as indicative of the commitment of the teaching staff to research:

1. Projects that are funded by agencies, requiring peer review
2. Publications in peer-reviewed journals
3. Presentations at national or regional scientific meetings
4. Research protocols that have been approved by the local Institutional Review Board

B. Research Program for Subspecialty Residents

Within the institution there must be provision of support for resident participation in scholarly activities. The subspecialty resident must be exposed to and take part in research projects that are conducive to a questioning attitude, to protocol development, and to critical analysis of new therapies and medical literature. Research experience should begin in the first year and continue for the entire period of training to allow adequate time for the development of research skills and to bring a project to completion.

Residents must help design, conduct, evaluate, and prepare for publication a clinical or laboratory research project in the subspecialty area. They also should be required to conduct research seminars and prepare a written report of their research activities.

Instruction in related basic sciences and associated disciplines such as research design, biostatistics, and epidemiology must be offered through courses, workshops, and seminars.

C. Medical Education

Subspecialty residents should be actively involved in the education of house staff and medical students. They should understand the appropriate role of the pediatric generalist in subspecialty care and participate in the residency and continuing education activities.

This should include a knowledge of curricular design and an active involvement in conferences, lectures, and clinical experiences for general pediatric residents.

Residents should have experience and guidance in the critical evaluation of pertinent medical literature and in medical writing and oral presentations. They should have the opportunity to develop teaching skills by giving lectures, conducting seminars and clinical conferences, and by preparing teaching materials. These efforts should be reviewed and evaluated by supervising faculty.

VI. Patient Population

Adequate numbers of pediatric subspecialty inpatients and outpatients, both new and follow-up, must be available to provide a broad experience for the residents. These should range in age from infancy through young adulthood, where appropriate. There is a critical balance among the number and variety of patients, the number of preceptors, and the number of residents in the program. Residents must have access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a program.

VII. Library Facilities

The training program must provide access to facilities for the residents to engage in scholarly activities, including conference rooms, medical library, and research laboratories. The library should be available day and night and should have an ample supply of current pediatric subspecialty textbooks and journals. Access to computerized literature search facilities is necessary.

VIII. Evaluation

There must be an ongoing mechanism for the assessment of resident performance, faculty performance, patient care, and program objectives.

A. Evaluation of Residents

The program must have formal mechanisms by which the knowledge, skills, and professional growth of the residents are evaluated at least semiannually. This assessment must specify how the acquisition of requisite skills for subspecialty competence is accomplished. A written record of these evaluations must be maintained, must be
formally reviewed with the residents, and must be accessible to authorized personnel. Residents should be advanced to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.

The program director must provide a written final evaluation for each resident who completes the program. This evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice in this pediatric subspecialty competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.

B. Evaluation of Faculty
Teaching faculty must be evaluated on a regular basis. Documentation of faculty evaluation must include teaching ability and commitment, as well as clinical knowledge and participation in scholarly activity. There must be a formal mechanism by which residents in both the core and subspecialty programs participate in this evaluation.

C. Evaluation of the Program
There must be documented evidence of periodic review and evaluation of the program in relation to the educational goals, the needs of the residents, and the clinical and research responsibilities of the faculty. At least one resident representative should participate in these reviews.

The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Written evaluations by residents should be utilized in this process.

Information gained from these evaluations should be used to implement improvements in the program.

IX. Evaluation by the RRC
Each program will be evaluated by the RRC at regular intervals, usually in conjunction with a review of the core program to which the subspecialty program is attached. Prior approval of the RRC should be obtained before implementation of major changes in the program during the interval between regular reviews.

Program directors are responsible for submitting complete and accurate information on the program to the RRC. Upon review of this information, the committee will judge the degree of compliance with the published standards.

In addition to complying with the requirements outlined in this document, each program must comply with the program requirements for the respective subspecialty, which may exceed the minimum requirements set forth above.

One measure of the quality of a training program is the performance of its graduates on the certifying examination of the sub-board. In its evaluation of these programs the RRC will take into consideration the information provided by the American Board of Pediatrics.

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Program Requirements for Residency Education in Neonatal-Perinatal Medicine

In addition to complying with the Program Requirements for Residency Education in the Subspecialties of Pediatrics, programs must comply with the following requirements, which may in some cases exceed the common requirements.

I. Scope of Training
The purpose of the training program in neonatal-perinatal medicine is to provide residents with the background to understand the physiology of the normal neonate and the pathophysiology of the sick infant and to diagnose and manage problems of the newborn. To ensure an appropriate educational environment, training programs in neonatal-perinatal medicine must exist in conjunction with an accredited obstetrical residency program as well as with an accredited program in pediatrics.

The training program must emphasize the fundamentals of clinical diagnosis and management of problems seen in the continuum of the development of the fetus through prenatal, intrapartum, and neonatal periods, including follow-up. Each resident must participate in the long-term follow-up of high-risk infants and must have the opportunity to learn to identify the high-risk pregnancy, to evaluate fetal well-being and maturation, and to become familiar with the aberrant factors that may develop during the intrapartum period. The resident must have the opportunity to develop special competence in the management of critically ill newborn infants, including techniques of neonatal resuscitation, venous and arterial access, endotracheal intubation, preparation for transport, ventilatory support, continuous monitoring, temperature control, nutritional support, and general principles of critical care. The residents should have the opportunity to develop an appreciation of the social implications of disorders of the fetus and newborn infant.

The program should also provide opportunity for residents to teach and assume some departmental administrative responsibilities.

II. Patient Population
An adequate number of infants with a variety of neonatal disorders must be available so that each neonatal-perinatal resident may acquire competency in the management of the critically ill infant and in the technical aspects of care. The obstetrical and neonatal-perinatal programs must be closely associated, and there should be a sufficient number and variety of high-risk obstetrical patients to ensure that the residents become knowledgeable in identifying high-risk pregnancies and evaluating fetal well-being and maturation.

The number of infants requiring ventilatory assistance must be sufficient to provide each resident with the opportunity to become skilled in the management of these infants. Similarly, there should be an adequate number of infants requiring major surgery, including cardiac surgery, to afford the resident the opportunity to become skilled in the preoperative and postoperative management of these infants.

Residents must follow discharged infants in sufficient numbers to become skilled in the evaluation and management of such infants, as well as to become aware of the socioeconomic impact and the psychosocial stress that such infants may place on a family.

III. Laboratory Techniques
Residents must be instructed in laboratory techniques essential to the care of the high-risk infant. Experience in tabulating and evaluating institutional and regional fetal and neonatal morbidity and
mortality should be provided. There also should be experience and instruction in techniques of collation and critical interpretation of data pertaining to immediate outcome and sequelae of various disease entities such as hyaline membrane disease, asphyxia, neonatal sepsis, blood group incompatibilities and congenital anomalies. This experience should be closely related to the evaluations of various modalities of therapy used in these disorders.

IV. Basic Sciences and Conferences
The program must include instruction in related basic sciences. Seminars, conferences, courses, and appropriate laboratory experiences must be offered in the basic disciplines related to pregnancy, the fetus, and the newborn. Examples of these are maternal physiological, biochemical, and pharmacological influences on the fetus; fetal physiology; fetal development; placental function (placental circulation, gas exchange, growth); physiological and biochemical adaptation to birth; physiology, biochemistry, pharmacology, and pathology relevant to diseases of the newborn; psychology of pregnancy and maternal-infant interaction; breast feeding and lactation; growth and nutrition; genetics; epidemiology; and biostatistics.

Residents should participate in regularly scheduled multidisciplinary conferences, such as sessions that review perinatal mortality, morbidity, and patient care, as well as in case conferences and current literature and research conferences.

V. Teaching Staff
Essential staff for the training program are
1. A minimum of three neonatologists to provide adequate supervision and to ensure the educational and research quality of the program.
2. A pediatric cardiologist as a consultant and teacher.
3. A surgeon skilled in pediatric surgery as a consultant and teacher.
5. An obstetrician with special competence in fetal-maternal medicine.
6. A pediatrician skilled in neurodevelopment as a consultant and teacher.

Appropriate consultant faculty must be available to provide the residents with a defined educational experience in related disciplines, including other pediatric subspecialties, fetal-maternal medicine, pediatric surgery, radiology, anesthesiology, pathology, social service, and nursing.

Staff from other disciplines should be readily available. These should include but not be limited to neurology, ultrasonography, genetics, infectious disease, neurosurgery, opthalmology, urology, orthopedics, and orthorhinolaryngology.

The following staff also are recommended: a bioengineer, an ultrasonographer well versed in perinatal ultrasonic techniques, and a statistician and/or epidemiologist.

Nursing staff must be sufficient to meet appropriate standards of care. This implies leadership by nurses skilled in neonatal and obstetrical intensive care. Medical social workers, qualified in maternal-child health, also must be available.

VI. Facilities and Laboratories
Because neonatal intensive care is an integral part of the institution in which the training program is housed, it is essential that the following facilities be available within that institution or in another readily available institution that ensures access to them on a 24-hour-a-day basis:
1. Microchemical laboratory
2. Blood gas laboratory
3. Perinatal diagnostic laboratory
4. Radiology and ultrasound imaging facilities
5. Diagnostic bacteriology and virology laboratory
6. Hematology laboratory
7. Blood bank
8. Electrocardiographic and electroencephalographic laboratories
9. Computed tomography and/or magnetic resonance imaging facilities

In addition to these essential diagnostic facilities, the following should be available within a reasonable period of time at the primary teaching site or nearby:
1. Screening laboratory for inborn errors of metabolism
2. Clinical toxicology laboratory
3. Nuclear medicine facilities
4. Cytogenetics laboratory

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Program Requirements for Residency Education in Pediatric Cardiology

In addition to complying with the Program Requirements for Residency Education in the Subspecialties of Pediatrics, programs must comply with the following requirements, which may in some cases exceed the common requirements.

I. Scope and Duration of Training
An accredited program in pediatric cardiology must provide 3 years of training.

The purpose of a training program in pediatric cardiology is to provide subspecialty residents with the foundation for understanding normal and abnormal cardiovascular conditions. Graduate training in pediatric cardiology should provide for properly balanced, well-organized, and progressive responsibility for care and study of patients in inpatient services, in intensive care units, and in ambulatory centers. The program must prepare the residents to provide optimal care and consultation for children with cardiovascular disease. Clinical training must be broad and include inpatient and outpatient experience, with the opportunity to observe heart disease in adults, particularly congenital and rheumatic disease. This responsibility must encompass age groups from the fetus and newborn through the young adult. The resident must be exposed to pathologic conditions ranging from mild to those requiring extensive or continued intensive care. There must be experience with a broad spectrum of congenital and acquired heart disease, both surgical and medical, and chronic as well as acute or emergency situations.

There must be opportunities to participate in and learn the fundamentals of administration of a pediatric cardiology program, including organization of clinics, organization and function of the cardiac team, and interaction with support agencies in the community such as government programs, third-party insurance companies, school nurses, public health nurses, and others.

The resident also must be provided experience in organizational responsibilities of a pediatric cardiologist in the community. This should include the functioning of a cardiac catheterization laboratory and a hospital-based pediatric cardiology service.

Residents must become familiar with preventive cardiology and with the psychosocial, ethical, and legal aspects of pediatric cardiology.

II. Clinical Experience
Programs in pediatric cardiology must include but not be limited to training in the following fundamental skills:
A. Noninvasive Techniques
Clinical diagnosis with special emphasis on auscultation and physical examination, roentgenology, electrocardiography, 2-D and M-mode echocardiography, Doppler ultrasound, exercise testing, Holter monitoring, and any other laboratory tests or imaging methods that may become established to facilitate diagnosis and management.

B. Invasive Techniques
Experience and instruction in the techniques and understanding of the value and limitations of diagnostic cardiac catheterization, selective angiocardiography, electrophysiology, and therapeutic catheter techniques.

C. Resuscitation Techniques
Experience and instruction in the techniques and understanding of the value and limitations of pericardiocentesis, thoracentesis, cardiopulmonary resuscitation, cardioversion, and temporary pacing.

D. Cardiac Catheterizations
The residents must be taught the use of relevant electronic equipment, recording devices, and angiographic equipment necessary to perform cardiac catheterization. In addition, the program must instruct the residents in the fundamentals of radiation safety. Accredited training programs should have a minimum yearly pediatric caseload of approximately 100 cardiac catheterizations and 75 operations employing extracorporeal circulation. Of these, approximately 30 catheterizations and approximately 24 open-heart surgical procedures should be performed on patients less than 1 year of age.

Experience with preoperative and postoperative care of patients having cardiac surgery, both by closed and open methods, in close cooperation with the cardiothoracic surgical staff, is required. Residents must have sufficient exposure to or instruction in current surgical techniques, methods of cardiopulmonary bypass, and hypothermia to develop adequate understanding of them. The resident should be instructed in the management of postoperative patients and postoperative complications, both immediate and delayed. Opportunity for long-term follow-up observations of both preoperative and postoperative patients must be provided.

The resident should participate in consultations or conferences in which the medical and surgical staffs evaluate the results of surgery and the patient's cardiac status prior to discharge from the hospital. The resident should have the opportunity to arrange for follow-up visits and send information to the referring physician to assist him or her in the future management of the patient.

In addition, the program must provide the resident with education in and exposure to rheumatic fever, collagen diseases, infectious endocarditis, and other infections and metabolic conditions. Residents should be instructed in the etiologic and risk factors in hypertensive and atherosclerotic heart disease, including hyperlipidemic states, and should gain experience in the prevention, diagnosis, and management of patients with these cardiovascular problems.

There must be a regularly scheduled pediatric cardiology clinic, which must be supervised by one or more members of the cardiology staff. Time and space in this clinic must be available for residents to provide continuity and follow-up care for all patients under their care.

Clinical data, including inpatients, outpatients, and patients undergoing catheterization and/or surgery, should be cross-indexed and kept in such a manner as to allow rapid evaluation and analysis of the assembled information, including age, diagnosis, outcome, etc.

III. Basic Sciences and Conferences
The program should offer courses, seminars, workshops, or laboratory experience to provide appropriate background in basic and fundamental disciplines related to the heart and cardiovascular system, such as anatomy, physiology, biochemistry, embryology, pathology, pharmacology, genetics, nutrition, bioelectronics, and biostatistics.

The resident must receive instruction in cardiovascular pathology. Specimens demonstrating the various types of congenital cardiovascular anomalies should be classified and readily available for study. Conferences involving current pathological material must be held and closely correlated with clinical experience; such conferences should have clinicians, surgeons, anesthesiologists, roentgenologists, and pathologists in attendance.

There must be structured education in embryology and anatomy of the normal heart and vascular system as well as potential deviations from normal. Normal and abnormal cardiovascular and cardiopulmonary physiology and metabolism should be taught, as well as fundamentals of cardiovascular pharmacology, including mechanisms of drug action, therapeutic indications, and side effects.

Conferences must be held on a regular basis in the areas of clinical diagnosis and therapy, including quality assurance evaluation, cardiovascular research, and clinical morphologic correlations. Conferences with other disciplines such as physiology, pharmacology, neonatology, cardiovascular radiology, cardiothoracic surgery, and adult cardiology are encouraged.

IV. Teaching Staff
A general pediatric staff with a broad range of subspecialty interests is essential to teach complete care of infants, children, adolescents, and young adults with cardiac problems. Members of the pediatric cardiology training staff must be board-certified in the subspecialty or possess suitable equivalent qualifications. Residents must also be assured of access to medical cardiologists and basic scientists actively engaged in cardiovascular research. Special staff expertise is desirable in electrophysiology, exercise physiology, invasive and interventional cardiac catheterization procedures, intensive care, preventive cardiology, and echo-Doppler (including fetal). A ratio of two pediatric cardiology training staff members to each resident is desirable.

The physician in charge of the catheterization procedures must be certified by the subboard of Pediatric Cardiology or possess suitable equivalent qualifications and must be able to carry out the technical aspects of the procedures and correlate the results of the study with clinical information in reaching sound anatomic, hemodynamic, and electrophysiologic conclusions. A second physician should be available to the catheterization lab in the event that additional help is needed or a complication develops.

In addition, an anesthesiologist and a cardiothoracic surgeon, all having expertise in the pediatric cardiovascular aspects of their specialties, should be immediately available for consultation, assistance, and emergency surgical procedures. Additional personnel, adequately trained in pediatric cardiovascular techniques, should be available.

Staff from other disciplines, including cardiovascular radiology, cardiothoracic surgery, adult cardiology, anesthesiology, neonatology, pulmonary disease, pathology, hematology, nephrology, gastroenterology, and genetics, should be readily available.

Residents should be taught to work with and utilize the special skills of pediatric cardiovascular nurses, intensive care nurses, catheterization laboratory technicians, operating room personnel, social workers, and psychologists.
V. Facilities and Equipment
It is desirable that all facilities be located at the same institution. Where a facility is shared by several institutions in the interest of cost and efficiency, the program director may arrange for a resident to rotate to that facility.

A. Catheterization Laboratory
To provide a comprehensive experience for the resident, the catheterization laboratory should be located within a facility completely equipped to take care of patients. A program utilizing a catheterization laboratory located in a facility that cannot meet this criterion will be expected to provide evidence that the educational experience is not compromised in this regard.

Up-to-date equipment in the catheterization laboratory must include facilities for diagnostic biplanar cineangiography and blood gas analyses and should include equipment for electrophysiological studies and interventional cardiology. A method for recording catheterization laboratory complications must be used and records kept of all complications. Resuscitation equipment must be available for all pediatric patients.

B. Inpatient Service
An active inpatient pediatric cardiology service is essential. It should provide all the diagnostic and treatment services characteristic of a comprehensive children's facility. Patients admitted to the inpatient service should be under the direct or indirect supervision of the training program staff and available to the residents.

C. Support Facilities
The following facilities should be available on a 24-hour basis:
1. General x-ray facilities and nuclear cardiology
2. A graphics laboratory with facilities for recording the standard electrocardiogram and 2-D and Doppler echocardiograms
3. Laboratories to do routine analyses of blood and urine; to determine blood gas values, blood chemistries, and blood clotting studies; and to cross-match blood
4. An operating room designed and equipped for cardiopulmonary extracorporeal circulation with appropriate monitoring devices, defibrillators, and cardiac pacing devices
5. A blood bank equipped to meet the demands of cardiac surgery, which must be closely affiliated with the center
6. An intensive care unit in each center in which patients with heart disease are cared for under the supervision of the training program staff and are available to the residents and in which there are preoperative and postoperative patients with heart disease, as well as appropriate personnel and equipment to provide provision of the special and constant care needed by these patients

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Program Requirements for Residency Education in Pediatric Critical Care Medicine
In addition to complying with the Program Requirements for Residency Education in the Subspecialties of Pediatrics, programs must comply with the following requirements, which may in some cases exceed the common requirements.

I. Scope of Training
The purpose of the training program in pediatric critical care medicine is to provide subspecialty residents with a foundation for understanding the pathophysiology of acute, life-threatening disease as well as the physiology of advanced life support; to prepare them for the care of critically ill pediatric patients; and to enable them to contribute to this pediatric subspecialty.

If there is more than one program in critical care medicine in the institution, there should be an institutional policy governing the educational resources committed to these programs and ensuring cooperation of the involved disciplines.

These programs must be organized and conducted in a manner that assures optimum patient care while providing residents with the opportunity to become skilled clinicians, competent teachers, and knowledgeable investigators familiar with and capable of administering a critical care unit.

To achieve this, the program must emphasize the fundamentals of clinical diagnosis, patient assessment, and clinical management. The subspecialty residents in pediatric critical care medicine must participate in the care of pediatric patients of all ages, from the infant to the young adult, and they must have the opportunity to acquire the knowledge and skills to diagnose and manage patients with acute life-threatening problems. This will include but not be limited to the opportunity to develop special competence in such areas as cardiopulmonary resuscitation; stabilization for transport; trauma; triage; ventilatory, circulatory, and neurologic support; management of renal and hepatic failure, poisoning, and complicated hematological, infectious, and immune problems; continuous monitoring; and nutritional support. The residents should have some of their clinical experience in other critical care settings, such as with anesthesiologists, in a medical intensive care unit (ICU), in a neonatal ICU, and in a surgical ICU.

There must be emphasis on developing a compassionate understanding of critical illness and death, so that the resident may be responsive to the emotional needs of the patients, their families, and the critical care staff.

Interpretation of laboratory studies essential to the care of the critically ill pediatric patient must be included in the curriculum. The program must teach pharmacologic principles and provide opportunity for the subspecialty residents to apply them to the critically ill patient. Instruction in biomedical instrumentation must be offered to familiarize the resident with current technology. The curriculum should include instruction in collusion and critical interpretation of patient care data. The resident in pediatric critical care medicine must function as a teacher and assume some administrative responsibilities. Though clinical training in pediatric critical care medicine must include direct patient care responsibilities, a graduated experience should propel the resident toward supervisory and teaching roles.

II. Conferences/Basic Science
There should be opportunities to participate in regularly scheduled, multidisciplinary conferences such as sessions reviewing morbidity and mortality, case conferences, journal review, and research conferences.

The training program must include instruction in (or other educational exposure to) related basic sciences, including pathology, physiology, microbiology, nutrition/metabolism, biomedical instrumentation, and biostatistics.

III. Faculty
Appropriate consultant and collaborating faculty in related disciplines must be available at the facility housing the residency program. This must include specialists in the various pediatric subspecialties and surgeons having special expertise with pediatric patients. The faculty must also include specialists in cardiovascular surgery, neurosurgery, radiology, anesthesia, orthopedics, otolaryngology, neurology, psychiatry, nephrology, pathology, social ser-
services, and nursing who have sufficient experience with pediatric patients to qualify them to play a part in the residents' education.

Essential physician staff for the training program are
1. At least two pediatric intensivists, to provide adequate supervision of residents and to ensure the educational and research quality of the program
2. A pediatric cardiologist as a consultant and teacher who must be certified by the appropriate subspecialty board or have equivalent credentials
3. A pediatric nephrologist as a consultant and teacher who must be certified by the appropriate subspecialty committee or have equivalent credentials
4. A neonatologist as a consultant and teacher who must be certified by the appropriate subspecialty board or have equivalent credentials
5. An anesthesiologist with pediatric expertise as a consultant and teacher; there should be in-house, 24-hour anesthesiology coverage
6. A pediatric infectious disease specialist
All of the members of the physician teaching staff should be currently certified by the appropriate specialty board and should be certified by the relevant subboard of the American Board of Pediatrics, where appropriate. Where this is not the case, evidence of suitable equivalent qualifications must be provided. The Residency Review Committee will determine the acceptability of equivalent qualifications.

The following other staff are essential to the program to contribute to the resident's understanding of the broad impact of pediatric intensive care:
1. A respiratory therapy staff adequate to meet the clinical needs of patients and the educational needs of the resident in pediatric critical care
2. A skilled nursing staff capable of providing pediatric intensive care to the patients and contributing to the resident's understanding of the bedside nursing procedures involved in caring for these patients
3. Pediatric social workers and support staff to meet the needs of ICU patient and their families
The following staff are recommended
1. A bioengineer
2. A statistician and/or epidemiologist
3. An ethicist

IV. Patient Population
An adequate number of pediatric ICU patients must be available for the subspecialty resident in pediatric critical care to acquire competence in the management of critically ill infants, children, adolescents, and young adults, including preoperative and postoperative care of the surgical patient. In the case of a patient on the surgical service, the pediatric resident should collaboratively participate with the surgeon who is managing the care of the patient. To meet the educational objectives of the program, the average daily census in the ICU should be at least four patients per resident assigned to the pediatric critical care service.

The number of patients requiring mechanical ventilation must be sufficient to provide each resident with the opportunity to become skilled in their management. There must be available to the teaching program an adequate number of patients in the pediatric age groups requiring major surgery, including cardiac and neurosurgery, to ensure that the subspecialty resident participates in the intensive care of these patients.

V. Facilities
A. Facilities and equipment must meet the generally accepted standards of modern intensive care units and must be available within the institution on a 24-hour-a-day basis. These include but are not limited to
1. Microchemistry laboratory
2. Blood gas laboratory
3. Hematology laboratory
4. Blood bank
5. Diagnostic bacteriology and virology laboratories
6. Radiology facilities with portable capabilities for bedside use
7. Facilities for special radiographic imaging including computerized axial tomography and radionuclide scanning
8. Electrocardiographic laboratory with portable capabilities for bedside use
9. Echocardiography laboratory with portable facilities
10. Electrocardiographic laboratory with portable capabilities for bedside use
11. Cardiac catheterization facility
B. In addition to these essential diagnostic and support facilities, the following are considered highly desirable and should be available:
1. Clinical toxicology laboratory
2. Laboratory that can screen for inborn errors of metabolism

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Program Requirements for Residency Education in Pediatric Endocrinology
In addition to complying with the Program Requirements for Residency Education in the Subspecialties of Pediatrics, programs must comply with the following requirements, which may in some cases exceed the common requirements.

I. Scope of Training
The purpose of the training program must be to provide the residents with the background to diagnose and manage endocrine diseases and to understand the physiology of hormonal regulation in childhood, adolescence, and young adulthood.

The program must emphasize fundamentals of clinical diagnosis with special emphasis on history taking and physical examination. An opportunity must be available for the residents to learn about the pertinent aspects of genetics. Particular emphasis should be placed on the areas of counselling and biochemical genetics, cytogenetics, and their phenotypic expression.

II. Patient Population
Adequate numbers of patients, representing a wide variety and complexity of endocrine disorders and ranging in age from newborn to young adult, must be available to the training program. It is important that residents have a continuing responsibility for the care of patients in the outpatient clinic throughout their training.

The clinical experience must involve patients in but not limited to the following categories:
1. Short stature, including constitutional delay
2. Disorders of anterior pituitary hormone physiology, including growth hormone deficiency
3. Disorders of posterior pituitary hormone physiology, including diabetes insipidus
4. Disorders of hypothalamic regulation of hormonal secretion
5. Disorders of thyroid hormone physiology, secretion and synthesis
6. Diagnosis and management of thyroid nodules and neoplasms
Program Requirements for Residency Education in Pediatric Gastroenterology

In addition to complying with the Program Requirements for Residency Education in the Subspecialties of Pediatrics, programs must comply with the following requirements, which may in some cases exceed the common requirements.

I. Introduction
The principal goal of a training program should be the development of competent subspecialists. The program must provide the resident in gastroenterology with the background and experience to diagnose and manage patients with acute and chronic diseases of the digestive system (esophagus, stomach, intestines, liver, and pancreas), including those that are life-threatening, and to conduct research in this specialized field. The resident must be guided in developing clinical judgment and skills and in acquiring medical knowledge, humanistic qualities, and professional attitudes and behaviors that are appropriate for the pediatric gastroenterologist.

II. Duration and Scope of Training
A. Length of Training
A period of 2 years of progressive educational experience is required, which includes the development of procedural skills, responsibility for patient care, and participation in research.

Any program that extends training beyond the minimum requirements must present a clear educational rationale consonant with the program requirements and objectives for residency training. The program director must obtain approval of the Residency Review Committee prior to implementation and at each subsequent review of the program. Prior to entry into the program, each resident must be notified in writing of the required length of training.

The educational program must be organized and conducted in a way that ensures an appropriate environment for the well-being and care of the patients and their families.

B. Breadth of Experience
The program must emphasize developmental gastrointestinal physiology in infants, children, adolescents, and young adults and the correlation of pathophysiology with clinical disorders to develop the residents' competence in the clinical diagnosis and medical management of patients with these disorders. There must be training in the selection, performance, and evaluation of procedures necessary for morphological, physiological, immunological, microbiological, and psychosocial assessment of gastrointestinal diseases.

Residents must have clinical experience in the use of a variety of diagnostic tests and therapeutic procedures, e.g., the use of imaging techniques such as computed tomography and magnetic resonance imaging, as well as conventional x-rays (contrast studies), ultrasound and hepatobiliary scans, tests of digestive system function, and assessment of nutritional status and pancreatic function.

C. Procedures
Residents must receive training in the following procedures:

- Colonoscopy
- Diagnostic upper endoscopy
- Establishment and maintenance of patients with enteral and parenteral nutrition (include nutritional assessment)
- Flexible and rigid sigmoidoscopy
- Paracentesis
- Percutaneous liver biopsy
- Rectal biopsy
- Small bowel biopsy

In addition, residents should have training in the following:

- Anorectal manometry
- Breath hydrogen analysis
- Dilatation of esophagus
- Endoscopic retrograde cholangiopancreatography (ERCP)
- Therapeutic upper endoscopy (sclerosis of esophageal varices)
- Colonoscopy with polypectomy
- Esophageal manometry

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Pancreatic stimulation test
Esophageal pH monitoring
Placement of percutaneous gastrostomy

The program must have formal mechanisms for monitoring each resident's development of skills in the performance of these procedures and for including this in the regular evaluations.

D. Didactic and Laboratory Experience
The program should offer instruction, through courses, workshops, seminars, and laboratory experience, to provide an appropriate background for residents in the basic and fundamental disciplines related to the digestive system, such as embryology, physiology, pharmacology, nutrition, pathology, biochemistry, molecular biology, immunopathology, and genetics. Training in the evaluation of the psychosocial aspects of chronic gastrointestinal disease as they affect the child and competence in counseling chronically ill patients and their families should be components of the training program. Health education, biomedical ethics, and preventive measures for digestive disease also should be emphasized.

E. Administrative Experience
The residents must receive instruction and experience in the operational aspects of a pediatric gastroenterology facility, e.g., staffing needs, unit management, and planning for program development.

III. Patient Population
The clinical component must involve broadly based experience with an appropriate range of pediatric patients having gastrointestinal problems. The patient population available to the program must have sufficiently varied and complex diseases and a volume sufficiently great to ensure that the residents have the opportunity to become clinically competent in the management of common as well as uncommon gastrointestinal, hepatobiliary, and pancreatic diseases in patients ranging from infancy through young adulthood.

Residents must have ongoing responsibility for the continuing care of patients with chronic gastrointestinal problems and must have sufficient opportunities to provide consultation on a wide variety of patients to become familiar with the gastrointestinal manifestations of a broad spectrum of pediatric illnesses.

This clinical experience must involve the management of patients with gastrointestinal disorders, including but not limited to the following categories:

A. Signs and Symptoms
1. Vomiting (including gastroesophageal reflux)
2. Acute and chronic abdominal pain
3. Acute and chronic diarrhea
4. Constipation (including Hirschsprung's disease)
5. Gastrointestinal bleeding

B. Diseases/Disorders
1. Growth failure and malnutrition (including an understanding of nutritional assessment and parenteral nutrition)
2. Malabsorption (celiac disease, cystic fibrosis, pancreatic insufficiency, etc.)
3. Gastrointestinal allergy
4. Peptic ulcer disease
5. Jaundice
6. Liver failure (including evaluation and follow-up care of the patient requiring liver transplantation)
7. Digestive tract ananies
8. Chronic inflammatory bowel disease
9. Functional bowel disorders
10. Evolution of gastrointestinal problems in the immune-compromised host
11. Other gastrointestinal disorders, such as gastrointestinal infections, motility disorders, infectious and metabolic liver diseases, and pancreatitis

IV. Facilities and Support Services
The following must be available to the program:
A. Space in an ambulatory setting for optimal evaluation and care of outpatients
B. An inpatient area with a full array of pediatric and related services (including surgery and psychiatry) staffed by pediatric residents and faculty
C. Full support services, including radiology, laboratory, nuclear medicine, pathology and nutrition
D. Pediatric intensive care unit
E. Neonatal intensive care unit
F. Access to gastrointestinal function laboratory capable of measuring intestinal absorptive function, esophageal physiology pancreatic function, and nutritional parameters in pediatric patients
G. Flexible endoscopy facilities

V. Faculty
A. Specialty Consultants
In addition to the minimum of two pediatric gastroenterologists (see Program Requirements for Residency Education in the Subspecialties of Pediatrics), consult and collaborative faculty in the following related pediatric disciplines must be readily available to the program: neonatology, hematology, immunology, genetics, and infectious disease, as well as specialists in pediatric surgery, pediatric anesthesiology, pediatric pathology, pediatric radiology, and child psychiatry and/or psychology.
B. Other Personnel
A nutritionist or registered dietitian with special skills in pediatrics must be available. Also, a nurse specialist or physician extender in pediatric gastroenterology should be available to the program.

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Program Requirements for Residency Education in Pediatric Hematology/Oncology

In addition to complying with the Program Requirements for Residency Education in the Subspecialties of Pediatrics, programs must also comply with the following requirements, which may in some cases exceed the common requirements.

I. Scope of Training
A program in pediatric hematology/oncology must provide the educational environment for the resident to develop an understanding of the pathophysiology of pediatric hematologic and oncologic disorders and to develop competence in the clinical diagnosis and management of these disorders. There must be training in the selection, performance, and evaluation of procedures necessary for appropriate assessment of these disorders.

The program must emphasize the fundamentals of clinical diagnosis, with special emphasis on history taking and physical examination, and must provide sufficient clinical experience with both inpatients and outpatients having hematologic and oncologic disorders to allow residents to develop skill in diagnosing and managing both common and unusual problems.
The clinical experience must involve patients who have a broad variety of hematologic-oncologic problems, and should include but not be limited to the following categories:
1. Leukemias, both acute and chronic
2. Solid tumors of organs, soft tissue, bone, and central nervous system
3. Lymphomas
4. Bone marrow failure
5. Hemoglobinopathies, including the thalassemia syndromes
6. Inherited and acquired disorders of the red-cell membrane and of red-cell metabolism
7. Autoimmune hemolytic anemia
8. Nutritional anemia
9. Inherited and acquired disorders of white blood cells
10. Platelet disorders, including ITP and acquired and inherited platelet function defects
11. Hemophilia, von Willebrand’s disease, and other inherited and acquired coagulopathies
12. Hematologic disorders of the newborn
13. Transfusion medicine and use of blood products
14. Congenital and acquired immunodeficiencies
The resident must also have experience with bone marrow transplantation and its complications, including graft versus host disease.
The resident must become familiar with all aspects of chemotherapy, surgical therapy, and radiotherapy, including treatment protocols and management of complications, diagnosis and treatment of infections in the compromised host, appropriate use of transfusion of the various blood components, plasmapheresis, and bone marrow transplantation. The program should provide the resident with experience as a member of a multidisciplinary team for patients with cancer and chronic life-threatening hematologic disorders.
The resident should be instructed in the methods of physiologic support of the cancer patient, including parenteral nutrition, control of nausea, and management of pain. The pediatric oncology component of the program must include education in the staging and classification of tumors, the application of multimodal therapy, how to function as a member of the oncology team, the epidemiology and etiology of childhood cancer, how to make appropriate observations, and how to keep accurate patient data.
The resident should participate in the activities of the tumor board and in the provision of comprehensive care to the child with cancer and should have experience in support of the patient, family, and staff in dealing with terminal illness. Residents should be guided in the development of skills in communication and counseling.

II. Patient Population
Adequate numbers of patients with hematologic and oncologic disorders, ranging in age from newborn through young adult, must be available to the training program. Residents must have continuing responsibility for the care of patients with malignant disease and chronic hematologic problems. A program having fewer than 40 teaching patients with newly diagnosed oncologic disease each year must specifically demonstrate that it is able to provide the breadth of experience required for a training program. There should be opportunity for the residents to provide consultation for a sufficient variety of patients to become familiar with the hematologic manifestations of a broad spectrum of pediatric illnesses.

III. Laboratory Experience and Related Services
The residents must be exposed to the proper use of laboratory techniques for diagnosis. There should be particular emphasis on recognition of the limitations of the various methods and the pitfalls in interpretation of laboratory results. Residents should be instructed in the normal variations in laboratory data that occur at different ages and the influence of medications, toxins, and systemic disease on hematologic values.
The residents should be provided with a background that will enable them to utilize the current diagnostic procedures of hematology and oncology. These include (a) the performance and interpretation of bone marrow aspiration and biopsy, (b) lumbar puncture with evaluation of cerebrospinal fluid, (c) microscopic interpretation of peripheral blood films, and (d) interpretation of all hematologic laboratory diagnostic tests. Appropriate educational experiences in the laboratories, including blood bank and tissue pathology, should be included.
The principal training institution should have available the diagnostic services of radiology, nuclear medicine, computerized tomography, sonography, angiography, clinical chemistry, microbiology, immunology, and genetics.

IV. Basic Sciences/Conferences
The training program should provide instruction in the related basic sciences, including the structure and function of hemoglobin and iron metabolism, the phagocytic system, splenic function, cell kinetics, immunology, coagulation, genetics, the principles of radiation therapy, the characteristics of malignant cells, tissue typing, blood groups, pharmacology of chemotherapeutic agents, microbiology and anti-infective agents in the compromised host, and nutrition.

V. Teaching Staff
At least three pediatric hematologists/oncologists must be based at the primary teaching site and must devote sufficient time to the program to ensure adequate teaching and to provide critical evaluation of the progress and competence of the residents. Appropriate consultant faculty must be available to provide the resident with a definitive educational experience in related disciplines, including pediatric surgery and surgical specialties, radiation oncology, diagnostic radiology, gynecology, infectious disease, pathology, psychiatry, clinical psychology, immunology, cardiology, endocrinology, gastroenterology, genetics, nutrition, pain control, and physical medicine and rehabilitation.

VI. Facilities
Space in an ambulatory setting must be provided for optimal evaluation and care of patients, including facilities for outpatient chemotherapy and transfusions. An inpatient area with full array of pediatric and related services staffed by pediatric residents and faculty must also be present. Full support must include radiology, laboratory, pathology, intensive care, respiratory therapy, physical therapy, nutrition, social services, psychiatry, and psychology.
The program must also have access to specialized laboratories capable of assigning red-cell enzymes, identifying unusual hemoglobin, performing human lymphocyte antigen typing, immunophenotyping of leukemic blast cells, cytogenetic analysis, and identifying complex congenital and/or acquired hematostatic abnormalities.

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Program Requirements for Residency Education in Pediatric Nephrology
In addition to complying with the Program Requirements for Residency Education in the Subspecialties of Pediatrics, programs must comply with the following requirements, which may in some cases exceed the common requirements.
I. Scope of Training

The purpose of the training program is to provide residents with the capability and experience to diagnose and manage renal diseases and to understand the physiology of fluid and electrolyte regulation.

The training program must be designed to develop the physician’s competence in the clinical diagnosis, pathophysiology, and medical treatment of disorders of the kidneys; urologic abnormalities; hypertension; and disorders of body fluid physiology in newborns, infants, children, adolescents, and young adults. Longitudinal experience must be provided in the therapy of acute renal failure and end-stage renal disease, including hemodialysis, continuous arteriovenous hemofiltration, peritoneal dialysis, and renal transplantation. Training and experience in the selection, performance, and evaluation of procedures, including renal biopsy, necessary for morphologic and physiologic assessment of renal disease must be included.

There also should be training in the evaluation of psychosocial aspects of life-threatening and chronic diseases as they affect the patient and the family, and in counseling both acutely and chronically ill patients and their families.

The resident also should be provided with instruction and experience in the operational aspects of a pediatric nephrology service, including the dialysis facility. Knowledge of staffing needs, unit management, preparation of grants and proposals, quality assurance programs, appropriate communication with referring physicians, and planning for program development should be acquired during the training.

II. Patient Population

Adequate numbers of patients with a wide variety and complexity of renal disorders must be available to the training program. It is important that residents have a continuing responsibility for the care of outpatients throughout their training.

The clinical experience must involve but not be limited to patients in the following categories:
1. Congenital anomalies of the genitourinary tract
2. Hypertension
3. Renal disorders in systemic disease
4. Renal infections
5. Acute renal failure
6. Chronic renal failure
7. Renal transplantation
8. Neoplasms of the kidney
9. Fluid and electrolyte disorders
10. Acute and chronic glomerular diseases
11. Renal tubular disorders
12. Nepholithiasis

III. Basic Science/Conference

The program must offer instruction through courses, workshops, seminars and laboratory experience to provide appropriate background for residents in diagnostic techniques and in the basic and fundamental disciplines related to the kidney. These should include embryology, physiology, pharmacology, pathology, immunopathology, genetics, biochemistry, cell biology, molecular biology, parenteral nutrition, magnetic resonance imaging, computed tomography, ultrasound, and nuclear medicine.

IV. Teaching Staff

Appropriate consultant faculty must be available to provide the resident with a definitive educational experience in related disciplines, including but not limited to urology, surgery, pathology, radiology, immunology, infectious disease, neonatology, hematology-oncology, and organ transplantation.

V. Facilities and Support Services

The facilities available must be sufficient to provide continuing contact with patients in both inpatient and outpatient settings. Transplantation and dialysis are essential components of the program.

In addition, certain ancillary support services and facilities must be available. These include urology, radiology, pathology, psychiatry and/or psychology, nuclear medicine, clinical laboratory, nutritional support services, nursing services, and social services.

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Program Requirements for Residency Education in Pediatric Pulmonology

In addition to complying with the Program Requirements for Residency Education in the Subspecialties of Pediatrics, programs must comply with the following requirements, which may in some cases exceed the common requirements.

I. Scope of Training

The purpose of the training program is to provide the resident with the background to diagnose and manage pediatric patients with acute and chronic respiratory disorders, including those that are life-threatening, and to prepare the resident to conduct research in this special field. The program should emphasize normal pulmonary physiology in pediatric patients and correlation of pathophysiology with clinical disorders. It must require research and provide opportunity for the development of teaching skills on the part of the residents. This educational program must be organized and conducted in a way that ensures an appropriate environment for the well-being and care of the patients and their families.

The training program must be designed to develop the physician’s competence in the clinical diagnosis, pathophysiology, and medical treatment of respiratory disorders in infants, children, adolescents, and young adults. There must be training in the selection, performance, and evaluation of procedures necessary for morphologic and physiologic assessment of pulmonary diseases.

The clinical component must be broadly based, with experience in a variety of pediatric pulmonary problems. The patient population must be sufficiently varied and frequently encountered to ensure that the pediatric pulmonology resident has the opportunity to become clinically competent in its management.

Clinical experience in the interpretation of a variety of diagnostic tests and the performance of therapeutic procedures must be available to the resident. Examples are the interpretation of new imaging techniques in relation to conventional x-rays and lung scans, tests of pulmonary function, evaluation of host defense mechanisms, and assessment of nonrespiratory functions of the lungs. The resident must have the opportunity to become proficient in bronchoscopy, thoracentesis, and physical and respiratory therapy. Training must include experience in respiratory intensive care procedures, eg, tracheal intubation, mechanical ventilation, cardio-pulmonary resuscitation, and must provide the opportunity for residents to develop an understanding of how a patient’s critical respiratory problems affect other critical organ systems.

The program must offer instruction through courses, workshops, seminars, and laboratory experience to provide an appropriate experience for residents in the basic and fundamental disciplines related to the lung, such as embryology, physiology, pharmacology, pathology, allergy and immunology, immunopathology, and genetics. Training must be provided in the evaluation of the psychosocial aspects of chronic pulmonary disease as they affect the pediatric patient and his or her family. Opportunity also must be provided for
residents to develop competence in counseling chronically ill patients and their families. Health education and preventive measures related to pulmonary disease also should be emphasized.

The resident in pediatric pulmonology should be exposed to formal sessions on organizing teaching programs, on medical writing, and on oral presentation. The resident must have the opportunity to develop teaching skills by conducting lectures, seminars, and clinical conferences and by preparing written reports and teaching material. These efforts must be reviewed and evaluated by the supervising faculty.

The resident must be provided with instruction and experience in operational aspects of a pediatric pulmonology facility. Knowledge of staffing needs, unit management, grant proposals, and planning for program development must be acquired.

II. Patient Population and Facilities

A. Patient Population

An adequate number and variety of patients with pulmonary disorders, who range in age from newborn through young adulthood, must be available. It is particularly important that residents have continuing responsibility for the care of patients with chronic pulmonary problems. There should be sufficient opportunity for the resident to provide consultation on a variety of patients to become familiar with the pulmonary manifestations of a broad spectrum of pediatric illnesses.

The clinical experience must involve patients having both a broad variety of pediatric pulmonary problems, including but not limited to the following categories:
1. Asthma and allergic disorders affecting the pulmonary system
2. Bronchopulmonary dysplasia
3. Cystic fibrosis
4. Lower respiratory tract infections
5. Newborn respiratory diseases
6. Pulmonary intensive care of infants and children
7. Disorders of control of breathing, eg, apnea
8. Airway appliances and chronic ventilatory assistance
9. Aspiration syndromes
10. Anomalies of the respiratory system
11. Chronic suppurative lung disease
12. Evolution of pulmonary problems in the compromised airway
13. Other respiratory diseases, such as collagen vascular disease, hemosiderosis, fibrosing alveolitis, and acute lung injuries
14. Multiple trauma, to include carbon monoxide poisoning, respiratory distress associated with head trauma, and rib fracture

B. Facilities Must Include:
1. Space in an ambulatory setting for optimal evaluation and care of patients
2. An inpatient area with full pediatric and related services staffed by pediatric residents and faculty
3. Full support services, including radiology, laboratory, nuclear medicine, and pathology
4. Pediatric intensive care unit
5. Neonatal intensive care unit
6. Pediatric pulmonary function laboratory capable of measuring lung volumes, including body plethysmography, flows, gas exchange, and bronchoprovocation studies
7. Invasive and noninvasive pediatric cardiac laboratories
8. An inpatient unit capable of meeting the needs of young adults with cystic fibrosis, including consultative evaluation by internists where appropriate
9. Flexible bronchoscopy capability
10. Adequate resources for research, including statistical consultation, laboratory space, and computer services

III. Faculty

In addition to the program director, there must be at least one other similarly qualified faculty member in pediatric pulmonology to ensure continuity of the educational program and to provide adequate supervision of the residents and the required academic and research components of their training.

Consultant faculty in related disciplines must also be available at the institution where the training takes place. These must include faculty with special expertise in the following areas:
1. Pediatric cardiology
2. Pediatric critical care
3. Neonatology
4. Pediatric surgery
5. Allergy/immunology
6. Pediatric otolaryngology
7. Pediatric infectious disease
8. Pediatric radiology
9. Pediatric anesthesiology
10. Pediatric pathology

These essential members of the teaching staff should be certified by the appropriate subboard of the American Board of Pediatrics or must possess suitable equivalent qualifications. The Residency Review Committee will determine the acceptability of such equivalent qualifications. In addition, consultants should be available in the following areas:
1. Genetics
2. Pediatric gastroenterology
3. Pediatric neurology
4. Developmental pediatrics
5. Nutrition

IV. Other Personnel

The following staff are essential:
1. A pediatric respiratory therapy staff sufficient to meet the clinical needs of patients and the teaching of parents and to contribute to the education of the resident
2. Nurses experienced in pediatric pulmonology
3. Pediatric social workers
4. Pediatric nutritionists

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Program Requirements for Residency Education in Pediatrics Sports Medicine

I. Introduction

In addition to complying with the requirements below, each program must comply with the Program Requirements for Residency Education in the Subspecialties of Pediatrics.

II. Scope and Duration of Training

An educational program in sports medicine must be organized to provide a well-supervised experience at a level sufficient for the resident to acquire the competence of a physician with added qualifications in this field. It shall be 12 months in duration.

The practice of sports medicine is the application of the physician’s knowledge, skills, and attitudes to those engaged in sports and exercise. Thus, the program must provide training in the development of the clinical competencies needed to diagnose and manage medical illnesses and injuries related to sports and exercise, for example, first-degree sprains, strains, and contusions, including ap-
Program Requirements for Residency Education in Pediatrics Sports Medicine

Appropriate referrals of, for example, fractures, dislocations, and third-degree sprains. Clinical experience must include injury prevention, preparticipation evaluation, management of acute and chronic illness or injury, and rehabilitation as applied to a broad spectrum of undifferentiated patients. There must be experience functioning as a team physician and in the promotion of physical fitness and wellness.

The program should emphasize physiology and biomechanics; principles of nutrition; pathology and pathophysiology of illness and injury; pharmacology; effects of therapeutic, performance-enhancing, and mood-altering drugs; psychological aspects of exercise, performance, and competition; ethical principles; and medical-legal aspects of exercise and sports.

III. Teaching Staff

In addition to the program director, each program must have at least one other faculty member with similar qualifications who devotes a substantial portion of professional time to the training program.

The teaching staff must include orthopedic surgeons who are engaged in the operative management of sports injuries and other conditions and who are readily available to teach and provide consultation to the residents. Teaching staff from the disciplines of nutrition, pharmacology, pathology, exercise physiology, physical therapy, behavioral science, physical medicine and rehabilitation, and clinical imaging also should be available to assist in the educational program. Coaches and athletic trainers should also be included.

IV. Facilities and Resources

The program must include the following:

A. Patient Population

A patient population, unlimited by age or gender and adequate in number and variety to meet the needs of the training program, must be available. The program director must ensure that residents are accorded meaningful patient responsibility with the supervision of a faculty member at all facilities and sites.

B. Sports Medicine Clinic

There must be an identifiable clinic that offers continuing care to patients who seek consultation regarding sports- or exercise-related health problems. Nonsurgical residents must be supervised by a physician who has qualifications in sports medicine and is certified by the American Board of Emergency Medicine, the American Board of Family Practice, the American Board of Internal Medicine, or the American Board of Pediatrics or who possesses suitable equivalent qualifications.

Adequate up-to-date diagnostic imaging and rehabilitation services must be readily available and accessible to clinic patients. Consultation in medical and surgical subspecialties, physical therapy, nursing, nutrition, and pharmacology must be available. The opportunity to render continuing care and to organize recommendations from other specialties and disciplines is mandatory and will require that medical records include information pertinent to the assessment and management of patients with health problems related to sports and exercise.

C. Sporting Events/Team Sports/Mass-Participation Events

The program must have access to sporting events, team sports, and mass-participation events during which the resident can have meaningful patient responsibility.

D. Acute-Care Facility

There must be an acute-care hospital, with a full range of services, associated with and in proximity to the sponsoring residency. This facility must be readily accessible to patients served by the program.

V. Educational Program

The curriculum must provide the educational experiences necessary for the residents to achieve the cognitive knowledge, psychomotor skills, interpersonal skills, professional attitudes, and practical experience required of physicians in the care of patients with health problems related to sports and exercise.

Didactic as well as clinical learning opportunities must be provided as part of the required curriculum for all residents. Conferences or seminars/workshops in sports medicine should be specifically designed for the residents to augment the clinical experiences.

All educational activities must be adequately supervised, while allowing the resident to assume progressive responsibility for patient care. The clinical activities in sports medicine should represent a minimum of 50% of the time in the program. The remainder of the time should be spent in didactic, teaching, and/or research activities, and the primary care or emergency medicine ambulatory facility.

Residents must spend ½ day per week maintaining their skills in their primary specialty.

Participation in the following must be required of all residents:

A. Preparticipation Evaluation of the Athlete

The program must ensure that all sports medicine residents are involved in the development and conduct of preparticipation examination programs.

B. Acute Care

The resident must have appropriate authority and responsibility to participate meaningfully in the medical care that is provided to acute-care patients (see Scope and Duration of Training, above). In addition, the program should arrange for residents to observe representative inpatient and outpatient operative orthopedic procedures.

C. Sports Medicine Clinic Experience

The resident must attend patients in a continuing, comprehensive manner, providing consultation for health problems related to sports and exercise. The resident shall spend at least 1 day per week for 10 months of the training period in this activity.

If patients are hospitalized, the resident should follow them during their inpatient stay and assume outpatient care following the hospitalization. Consultation with other physicians and professionals in other disciplines should be encouraged.

D. On-Site Sports Care

The residents should participate in planning and implementation of all aspects of medical care at various sporting events. The program must ensure that supervised sports medicine residents provide on-site care and management to participants in these events.

In addition, the resident must participate in the provision of comprehensive and continuing care to a sports team. Preferably, the experience should include several teams that engage in seasonal sports.

E. Mass-Participation Sports Events

The resident should participate in the planning and implementation of the provision of medical coverage for at least one mass-participation event. The program must ensure that its residents have experience that includes providing medical consultation, direct patient care, event planning, protection of participants, coordination with local emergency medical systems, and other medical aspects of those events.
VI. Specific Knowledge and Skills

A. Clinical
The program must provide educational experiences for the residents to develop clinical competence in the overall field of sports medicine.

The curriculum must include but not be limited to the following content and skill areas:
1. Anatomy, physiology, and biomechanics of exercise
2. Basic nutritional principles and their application to exercise
3. Psychological aspects of exercise, performance, and competition
4. Guidelines for evaluation prior to participation in exercise and sport
5. Physical conditioning requirements for various activities
6. Special considerations related to age, gender, and disability
7. Pathology and pathophiology of illness and injury as it relates to exercise
8. Effects of disease, eg, diabetes, cardiac conditions, arthritis, on exercise and the use of exercise in the care of medical problems
9. Prevention, evaluation, management, and rehabilitation of injuries
10. Understanding pharmacology and effects of therapeutic, performance-enhancing, and mind-altering drugs
11. Promotion of physical fitness and healthy lifestyles
12. Functioning as a team physician
13. Ethical principles as applied to exercise and sports
14. Medical-legal aspects of exercise and sports
15. Environmental effects on exercise
16. Growth and development related to exercise

B. Patient Education/Teaching
The program must provide the experiences necessary for the residents to develop and demonstrate competence in patient education regarding sports and exercise. They must have experience teaching others, eg, nurses, allied health personnel, medical students, residents, coaches, athletes, other professionals, and members of patients' families. There must also be relevant experience working in a community sports medicine network involving parents, coaches, certified athletic trainers, allied medical personnel, residents, and physicians.

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Program Requirements for Residency Education in Physical Medicine and Rehabilitation

I. Introduction
A. An approved residency in physical medicine and rehabilitation must document that it provides an educational experience of such quality and excellence as to ensure that its graduates possess those competencies necessary to enter level independent practice of this specialty. This must include knowledge about the diagnosis, etiology, treatment, prevention, and rehabilitation of those neuromusculoskeletal, cardiovascular, pulmonary, and other system disorders common to this specialty in patients of both sexes and all ages. The program must provide for the graduate to develop the attitudes and psychomotor skills required to:
1. Perform the general and specific physiatric examination procedures and laboratory procedures such as electromyography and nerve conduction studies
2. Modify his or her history-taking technique to include data critical to the recognition of physical and psychosocial impairments that may create functional disabilities
3. Be able to make sound clinical judgments
4. Design rehabilitation strategies to minimize and prevent impairment and maximize functional independence with return of his or her patient to family and community

The program must provide the graduate with the ability to effectively coordinate a team of allied rehabilitation practitioners to the maximum benefit of his or her patient by:
1. Thorough understanding of each allied health professionals' role
2. The ability to write adequately detailed prescriptions for physiatric treatment
3. The acquisition of management and leadership skills necessary to rehabilitation team leadership

Additionally, the program must provide the graduate with awareness of his or her own strengths and limitations and of the necessity for continued professional development. The program must provide for the resident with the means to develop the necessary written and verbal communication skills essential to the effective practice of physiatry.

B. The organization and philosophy of the residency program must make the resident aware that there are no shortcuts to clinical competence and no substitutes for hard individual study. The initiative and originality of all residents must be stimulated, their independence of mind promoted, and their critical appraisal of current literature encouraged.

The director and teaching staff of a program must prepare and comply with written educational goals for the program.

1. Program Design
All educational components of a residency program should be related to program goals.

a. The program design and/or structure must be approved by the Residency Review Committee (RRC) for Physical Medicine and Rehabilitation as part of the regular review process.

b. Participation by any institution providing 6 months or more of training in a program of 3 or more years must be approved by the RRC.

2. Program Evaluation
The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Written evaluations by residents should be utilized in this process.

II. Duration of Training
A. A minimum of 4 years of graduate medical education, 3 years of which must be physical medicine and rehabilitation training, is necessary to train a physician contemplating specialization in this field.

One year of the training is to develop fundamental clinical skills. One year of the total training must consist of an accredited transitional year or include 6 months in family practice, internal medicine, pediatrics, general surgery, or a combination of these.

The other 6 months of this year may include any combination of the following specialties:
- Anesthesiology, cardiology, critical care medicine, emergency medicine, family practice, general internal medicine, general surgery, nephrology, neurology, neurosurgery, oncology, orthopedic
surgery, pediatrics, psychiatry, pulmonary medicine, radiology, rheumatology, urology, and vascular medicine.

Training in any of the specialties selected during this year must be for a period of at least 1 month. This training must take place within the first half of the total training.

B. Programs can choose either to provide 3 years of physical medicine and rehabilitation training and appoint residents at the PG-2 level or to provide 4 years of training to include these fundamental clinical skills.

C. A program of 3 years’ duration is responsible for the 36 months of physical medicine and rehabilitation training and responsible for ensuring that residents appointed at the PG-2 level have achieved training in fundamental clinical skills. A program of 4 years’ duration is responsible for the quality of the integrated educational experience for the entire 4 years and includes training in fundamental clinical skills.

III. Administration and Organization

A. Physical medicine and rehabilitation should be organized as a major specialty, operating as a service department to the broad fields of medicine and surgery.

B. To provide complete training, it is necessary to have beds assigned, preferably in one area and conveniently located geographically to facilitate the physical medicine and rehabilitation mission and training. A minimum census of eight physical medicine and rehabilitation inpatients should be available for each resident assigned to an inpatient service.

C. The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

D. Program Director

There must be a single program director responsible for the program.

1. Qualifications of the program director include:
   a. The professional ability, enthusiasm, and sense of responsibility to ensure the quality of the educational program. The director must have the authority and time needed to fulfill administrative and teaching responsibilities to achieve the educational goals of the program and to participate with other institutional program directors in maintaining the quality of all programs.
   b. Adequate time commitment and tenure of office. Many institutions have found that a full-time program director is desirable. If the program director is not full-time, then he or she must have adequate time available without other conflicting responsibilities. To maintain program continuity, he or she should be assigned over a period of years to the program directorship.
   c. License to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)
   d. Certification by the American Board of Physical Medicine and Rehabilitation or suitable equivalent qualifications as a psychiatrist, together with qualifications as a teacher, clinician, and administrator.
   e. Appointment in good standing to the medical staff of an institution participating in the program.
   f. Broad experience in teaching residents and a sufficient level of clinical experience and competence in management skills.

2. Responsibilities of the program director include:
   a. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.
   b. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.
   c. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program.
   d. The supervision of residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.
   e. Regular evaluation of residents’ knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician.
   f. The provision of a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident’s performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident’s permanent record maintained by the institution.
   g. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.
   h. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.
   i. Preparation of an accurate statistical and narrative description of the program as requested by the RRC.
   j. Notification of any major changes in the program. Changes of program director must be reported immediately to the RRC for review of approval status.

E. Teaching Staff

1. There must be a sufficient number of professional medical staff who are highly competent clinicians and motivated to teach residents. Ordinarily, they should be board-certified or
Program Requirements for Residency Education in Physical Medicine and Rehabilitation

qualified to apply for admission to the examination of the American Board of Physical Medicine and Rehabilitation and/or an appropriate professional society or board or should possess suitable equivalent qualifications.

2. These teachers must participate regularly and systematically in the training program and be readily available for consultations, especially when the resident is faced with a major therapeutic or diagnostic problem, a clinical emergency, or a crisis in patient care. Part-time faculty should have specific teaching responsibilities in which they engage with appropriate regularity. The teachers should be afforded an opportunity on a regular basis for advancing their educational methodology skills. As individuals who set examples for residents, they should make reasonable scholarly contributions, improve clinical care, participate in research, and/or contribute to the professional literature.

3. To improve educational quality a formal system should exist to identify special competencies and weaknesses of professional faculty, and attention should be paid to making teaching assignments within their realms of greatest competency. Serious efforts should be made where indicated to correct faculty weakness. Residents should have a formal mechanism for faculty and rotation evaluation that is regularly reviewed by the program chairman.

4. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

5. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

6. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

F. Professional staff in the disciplines of nursing, occupational therapy, orthotics and prosthetics, physical therapy, psychology, rehabilitation nursing, social work, speech-language pathology, audiology, and vocational counseling, who are competent in their fields and professionally certified by their respective professional organizations and who are willing and capable of contributing to the resident's education, should be integrated into both the didactic and clinical experience of the resident, whenever relevant. There should be evidence of coordination of the teaching roles of the allied health practitioners, and they, too, should be afforded regular opportunity for improving their educational skills.

G. Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

H. There must be adequate equipment and space available to carry out a comprehensive training program in physical medicine and rehabilitation. Residents should gain familiarity with the safety, calibration, and maintenance, as well as the clinical use, of medical equipment common to the various therapy areas and laboratories. These include diathermies; ultrasound; radiant and conductive heat sources; other thermotherapy and hydrotherapy devices; ultraviolet; exercise equipment; canes, crutches, walkers, and other ambulatory aids; wheelchairs; special devices for the impaired driver; electrodiagnostic and electromyographic (EMG) equipment; cystometric equipment; urodynamic laboratory instruments; simple splinting apparatuses, and audiometric devices. The occupational therapy area must be adequately equipped to give the residents experience in activities of daily living and in the evaluation of and training in devices to improve skills in activities of daily living. Psychometric and vocational and social evaluation facilities and test instruments must be adequate to expose the residents to the broad spectrum of their prescription and their use and interpretation in the common practice of rehabilitation medicine. Rehabilitation facilities sponsoring or participating in residency training in physical medicine and rehabilitation should be accredited by the Joint Commission on Accreditation of Healthcare Organizations and/or the Commission on Accreditation of Rehabilitation Facilities. If the facility is not so accredited, reasons why accreditation was not sought or was denied must be explained.

I. The residents must have the opportunity to observe and gain fundamental understanding of orthotics and prosthetics, including fitting and manufacturing, through documented arrangements made with appropriate orthotic-prosthetic facilities. All of the items listed in Section III. H. should include equipment suitable for all age groups with special concern for availability of modified equipment for the pediatric or geriatric patient.

J. The residents should have the opportunity to observe and gain fundamental understanding of the types of patients served; referral patterns and services available in community rehabilitation facilities, including but not limited to nursing homes, sheltered workshops, and other vocational facilities; schools for the multiply handicapped, deaf, and blind; and independent living facilities for the severely physically impaired individual. On-site visits as well as lectures should be offered.

The residents should have the opportunity to observe and gain fundamental understanding of alternative delivery systems for rehabilitation care, including but not limited to day hospitals, rehabilitation nursing homes, and home health care services. The residents should be exposed to these several types of delivery systems if available in the residency program hospital(s). If not available, then some introduction to these types of care should be made by on-site visits as well as didactic lectures.

K. The sponsoring institution should provide an adequate, available professional library with suitable basic textbooks and journals pertinent to general medicine and surgery and the specialty of physical medicine and rehabilitation. Loan capabilities with other main or lending libraries should be available. Also, there must be access to an on-site library or collection of appropriate texts and journals in each institution participating in the residency program. Library services should include the electronic retrieval of information from medical databases. On-site libraries and/or collections of texts and journals must be readily available during evening hours and weekends. Some scholarly experience that demands the use of library reference facilities should be a part of the residency program.

L. Basic teaching aids such as slide projectors, sound film units, videotape facilities, and the like should be available. Reasonable access to these areas on nights and weekends for residents and staff should be available.

M. Adequate office space should be available for the faculty and residents to participate both in clinical examinations of patients and in self-study.

N. Adequate space must be available and designated for seminars, lectures, and other teaching experiences, to include team conferences and specialty care clinics such as orthotics, prosthetics, children's handicaps, and the like.
IV. Educational Programs
A. The clinical care of patients is the heart of an adequate program because the chief objective of residency education is the development of clinical competence in its graduates. The attainment of this chief objective must not be attenuated by participation of the resident in other activities. Residency is an ongoing responsibility; activities outside the educational program must be monitored so as not to interfere with the resident's ability to perform in the educational process.

Physicians must have a keen sense of personal responsibility for continuing patient care and must recognize that their obligations to patients are not automatically discharged by any given time of the day or any particular day of the week. Duty hours and weekend call for residents reflect the concept of responsibility for patients and provide for adequate patient care. It is the responsibility of the program director, however, to ensure and monitor assignment of reasonable inpatient and outpatient duty hours for care to ensure that the resident is not subjected regularly to excessively difficult or unduly prolonged duties. It is also the program director's responsibility to have written guidelines that address these issues.

Residents at all levels, on the average, should have the opportunity to spend 1 full day out of 7 free of inpatient and outpatient care duties and, on the average, should be on night call no more often than every third night. The resident must be provided with adequate support, such as sleeping and food facilities, during duty hours.

B. Formal education should have a high priority. Residents must obtain adequate and supervised experience in administration, unit management, and teaching. Residents should have the opportunity to participate in structured, supervised research. A program director may elect to offer a special research or academic track for selected residents. This may take the form of an elective or a research rotation. The inclusion of structured research training must not compromise the attainment of clinical competence.

C. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:
1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.
2. Participation in journal clubs and research conferences.
3. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.
4. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.
5. Offering of guidance and technical support (eg, research design, statistical analysis) for residents involved in research.
6. Provision of support for resident participation in scholarly activities.

D. Didactic instruction must be well organized, thoughtfully integrated, based on sound educational principles, and carried out on a regularly scheduled basis. In a progressive fashion, it must expose residents to topics appropriate to their level of training. Systematically organized formal instruction (prepared lectures, seminars, assigned reading, etc.) must be an essential part of the residency. Staff meetings, clinical case conferences, journal clubs, and lectures by visitors are desirable adjuncts but must not be used as a substitute for an organized didactic curriculum.

E. The curriculum must include adequate and systematic training in the basic sciences relevant to physical medicine and rehabilitation such as anatomy, physiology, pathology, and pathophysiology of the neuromusculoskeletal, cardiovascular, and pulmonary systems; kinesiology; functional anatomy; physics; electronics; computer technology and instrumentation related to the field; physiologic responses to the various physical modalities and therapeutic exercises; and the procedures commonly employed by physiatry. This training should be correlated with clinical training but should, when appropriate, include the teaching of basic scientists. An accessible anatomy laboratory for dissection and anatomy review is highly desirable.

F. To ensure the stimulating educational atmosphere that a peer group provides, a minimum number of residents should be enrolled in a program at all times. It is impossible to exactly define how many residents are necessary to the "critical mass" needed to maintain vitality of a program; however, all programs should have residents in each year of training. In addition, each program should provide educational experiences that bring together all of the residents of the program at frequent and regular intervals. Failure to recruit any new residents for 2 consecutive years will result in RRC review and possible negative action.

G. The clinical portion of the curriculum must include a sufficient variety, depth, and volume of clinical experiences.

H. The training program must include a significant amount of time spent in responsibility for the direct clinical care of hospitalized patients as well as outpatients. Residents must devote at least one-third of their residency experience to work with hospitalized patients. It is undesirable for a program to devote more than two-thirds of a resident's time to the care of hospitalized patients.

I. Clinical experiences should allow for progressive responsibility, with lesser degrees of supervision as the resident advances and demonstrates new competencies. Supervision must include faculty review of a clearly written patient history and physical examination and a meaningful continuous record of the patient's illness, background, and management strategies, as well as lucid presentations of the case summary.

J. Provision must be made for the resident to review personally pertinent laboratory, biopsy, roentgenographic, and imaging materials for his or her patients and also to observe directly the various therapies in the treatment areas.

K. The clinical curriculum must be planned to develop measurable competencies to aid in rehabilitation medicine in the following areas:
1. History and physical examination pertinent to physical medicine and rehabilitation
2. Assessment of neurological, musculoskeletal, and cardiovascular-pulmonary systems, to include evaluation of sensation, reflexes, muscle strength, muscle endurance, joint range of motion, functional capacities, gait analysis, mental status, peripheral vascular status, and heart and lung status
3. Data gathering and interpreting of psychosocial and vocational factors
4. Techniques for EMG, nerve conduction, and somatosensory evoked potential studies
5. Prescriptions for orthotics, prosthetics, wheelchairs and ambulatory devices, special beds, and other assistive devices
6. Prescriptions for and supervision of therapeutic modalities and testing performed by physical therapists, occupational therapists, speech therapists, psychologists, and vocational
Program Requirements for Residency Education in Plastic Surgery

I. Introduction

A. Definition of the Specialty

Training in the specialty of plastic surgery deals with the resection, repair, replacement, and reconstruction of defects of form and function of the integument and its underlying anatomic systems, including the craniofacial structures, the oropharynx, the trunk, the extremities, the breast, and the perineum. It includes aesthetic (cosmetic) surgery of structures with undesirable form. Special knowledge and skill in the design and transfer of flaps, in the transplantation of tissues, and in the replantation of structures are vital to these ends, as is skill in excisional surgery, in management of complex wounds, and in the use of alloplastic materials. Residency training in plastic surgery is designed to educate and train physicians broadly in the art and science of plastic and reconstructive surgery and to develop a competent and responsible plastic surgeon with high moral and ethical character capable of functioning as an independent surgeon. A variety of educational plans will produce the desired result.

B. Scope of Training (Including Prerequisites)

1. All prerequisite residency training must be taken within programs accredited by the following organizations: the Accreditation Council for Graduate Medical Education (ACGME), the Royal College of Physicians and Surgeons of Canada, or the American Dental Association.

2. The curriculum for residency training in plastic surgery is 2 years. A program may be accredited for more than 2 years (such as in the integrated model or the independent model using a 3-year format) when it is demonstrated that there is a clear educational rationale, consonant with the Program Requirements for Plastic Surgery and the objectives for residency training, that cannot be met in a 2-year curriculum or when the program director has delineated a program with special goals that exceed those defined in the program requirements.

3. Training Models: the Residency Review Committee (RRC) for Plastic Surgery recognizes two training models, independent and integrated.

   a. Independent Model

   In the independent model of training, residents complete 2 or 3 years of concentrated plastic surgery training with no less than 12 months of senior/chief responsibility, after successful completion of one of the following prerequisite curricula:

   1. A minimum of 3 years of clinical training with progressive responsibility in the same program in general surgery. Transitional year or rotating internships may not be used to fulfill this requirement.

   2. A complete neurological surgery, orthopaedic surgery, otolaryngology, or urology residency.

   3. Satisfactory completion of a residency program in oral and maxillofacial surgery approved by the American Dental
Association (ADA) is an alternate pathway for prerequisite training prior to a plastic surgery residency. This pathway is available only to those individuals holding a DMD/MD or DDS/MD degree. Training must also include a minimum of 24 months of progressive responsibility on surgical rotations under the direction of the general surgery program director after receipt of the MD degree. Rotations in general surgery during medical school, prior to receiving the MD degree, will not be considered as fulfilling any part of the 24-month minimum requirement.

b. Integrated Model
In the integrated model, residents complete 5 or 6 years of ACGME-accredited plastic surgery training following receipt of an MD or DO degree from an institution accredited by the Liaison Committee on Medical Education (LCME) or the American Osteopathic Association.

1. The integrated curriculum must contain no less than 5 years of clinical surgical training under the authority and direction of the plastic surgery program director.

2. Of these 5 or 6 years, no less than 24 months must be concentrated plastic surgery training with no less than 12 months of senior/chief responsibility on the clinical service of plastic surgery.

3. Additional clinical experiences appropriate to the training of a plastic surgeon should be provided in anesthesiology, burn management, critical care medicine, emergency medicine, cardiothoracic surgery, general surgery, neurological surgery, oncologic surgery, orthopaedic surgery, otolaryngology, pediatric surgery, trauma management, and vascular surgery.

4. Accreditation by the ACGME is required for all years of the training program.

5. The program director must obtain the approval of the sponsoring institution and the RRC for the length of training prior to implementation and at each subsequent review of the program.

6. Prior to entry into the program, each resident must be notified in writing of the required length of training. The required length of training for a particular resident may not be changed without mutual agreement during his or her program unless there is a break in his or her training or the resident requires remedial training. All such changes must have prior approval of the RRC.

7. Residents must complete the length of training for which they have enrolled (ie, although residents may transfer from one program to another, they may not change from one model of training to another without RRC prior approval).

8. Experience beyond the approved residency that may be required by the American Board of Plastic Surgery or other certifying body (eg, a period of time in independent practice) is not reviewed by the RRC.

II. Institutional Organization
A. Sponsoring Institutions
An educational program in plastic surgery must have one sponsoring institution within a single geographic location with primary responsibility for the entire program. Appropriate institutions include medical schools, hospitals, and medical foundations. The sponsoring institution must provide sufficient faculty, financial resources, and academic support to enable the program to comply with the requirements for accreditation. This support must include sufficient operating time to ensure adequate resident surgical experience.

B. Participating Institutions
When there is a cooperative educational effort involving multiple institutions, the commitment of each institution to the program must be documented in an affiliation agreement that conforms to ACGME Institutional Requirements I.C.

1. Participating institutions include the sponsoring institution and other affiliated institutions approved by the RRC for clinical training.

2. Participating institutions must promote the educational goals of the program rather than simply enlarging the program, and they must not be added primarily for the purpose of meeting service needs.

3. Programs using multiple hospitals must ensure the provision of a unified educational experience for the residents. Affiliations that merely duplicate experiences otherwise available within the program are not acceptable.

4. Participating institutions that are geographically distant from the sponsoring institution are not desirable. These are acceptable only if they offer special resources, which are unavailable locally, that significantly augment the overall educational experience of the residents.

5. The number and distribution of participating institutions must not preclude the satisfactory participation of residents and faculty in conferences and other educational activities of the program.

C. Appointment of Residents
1. The RRC will approve a total number of residents to be trained in the program by training year. The number will be based primarily upon the number, qualifications, and commitment of the faculty; the volume and variety of the patient population available for educational purposes; and the total of institutional resources committed to resident education; and the state of the program's compliance with the Institutional and Program Requirements at the time of the most recent accreditation review of the program.

2. Programs may not enroll more residents at any level of training than the number of residents approved by the RRC for that year of training, except when a resident's training is extended because the program director has determined the need for additional training to meet the minimum requirements for competency. In this circumstance, the program director must notify the RRC in writing of the decision to extend a resident's training. Otherwise, any increase (including temporary increases) in the number of residents at any level of training or increase in the total number of residents must receive prior approval of the RRC. Requests for changes in the approved resident complement of a program must include a strong educational rationale. Requests based primarily on service considerations will not be approved.

3. Vacancies
   a. In an independent training model, a vacancy in resident complement, if filled, must be at the same level in which the vacancy occurs, unless otherwise approved by the RRC.
   b. In an integrated training model, the program director may appoint a new resident at a level that overlaps that of another resident in the program, provided that (1) each appointment does not adversely affect the training experience of residents already in the program and (2) commencing at the time when the resident whose departure created the vacancy would have completed training, the average number of residents graduating yearly will not exceed the number approved by the RRC over the accredited length of the program.

III. Faculty Qualifications and Responsibilities
The program director and the teaching staff are responsible for the general administration of a program, including those activities re-
lated to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director

There must be a single program director responsible for the program.

1. Qualifications of the program director include:
   a. An experienced, clinically active, competent teacher, clinician, and administrator.
   b. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)
   c. Certification by the American Board of Plastic Surgery or suitable equivalent qualifications in plastic surgery, as determined by the RRC.
   d. Appointment in good standing to the medical staff of an institution participating in the program.
   e. Frequent changes in leadership or long periods of temporary leadership are undesirable and may adversely affect the accreditation status of the program.

2. Responsibilities of the program director include:
   a. Familiarity with the current institutional requirements and program requirements approved by the ACGME. These requirements must be met for approval of a program.
   b. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.
   c. Prompt notification of the executive secretary of the RRC in writing of any major change in the program that may significantly alter the educational experience for the residents, including:
      1. Changes in leadership of a section, division, or department of plastic surgery, such as appointment as a permanent or acting program director, section head, division head, or chief, or department chairman.
      2. Changes in administrative structure that affect the status of the program/division or department of plastic surgery within the institution.
   d. Obtaining prior approval of the RRC for the following changes in the program to determine if an adequate educational environment exists to support these changes. On review of a proposal for a major change in a program, the RRC may determine that a site visit is necessary.
      1. The addition or deletion of any participating institution to which residents rotate for 3 months or longer (including individual rotations of less than 3 months, which taken collectively total 3 months or longer)
      2. The addition or deletion of any rotation for 3 months or longer
      3. Any change in the approved resident complement of the program
      4. Any change in the length or format of the training program
   e. Developing, maintaining, and communicating written guidelines specifically delineating the supervisory responsibilities of the faculty and attending staff in each hospital or facility utilized by the training program, to include promulgation of regular call schedules for the attending and resident staffs.
   f. Ensuring that the educational environment, the volume and variety of patient population, and the concept of progressive surgical responsibility are scrupulously followed.

   g. Selecting residents for appointment to the program in accordance with institutional and departmental policies and procedures.
   h. Selecting and supervising the teaching staff and other program personnel at each institution participating in the program.
   i. Annually collecting, compiling, and retaining records of the number and types of plastic surgery operative procedures performed in all institutions and facilities utilized in the clinical education of residents. This information must be provided as requested in the format and form specified by the RRC.
   j. Annually compiling a comprehensive record of the number and type of operative procedures performed by each resident completing the program. This record must include all of the procedures in which the plastic surgery resident was either surgeon or assistant during that year and must be signed by both the resident and the program director as a statement of its accuracy. This information must be provided as requested in the format and form specified by the RRC. These records must be maintained by the program director.
   k. Having documentation on file of the satisfactory completion of prerequisite training before the candidate begins plastic surgery training.
   l. Verifying the credentials of a transferring resident prior to accepting the resident into the program. Verification should include documentation of all rotations for which the transferring resident has been given credit by the previous program director. The program director who accepts a transferring resident should modify the individual’s course of study as needed to ensure that the resident completes all training requirements prior to graduation.
   m. Regularly evaluating the residents and the program, as noted in Section VI of these Program Requirements.
   n. Advising resident applicants of the prerequisite requirements of the American Board of Plastic Surgery.
   o. Implementing fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.
   p. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.
   q. Preparing an accurate statistical and narrative description of the program as requested by the RRC.

B. Number and Qualifications of Faculty

1. There must be sufficient numbers of qualified faculty and/or attending staff available at all times at each of the participating institutions to supervise and instruct residents to ensure optimal patient care and resident education.
   a. The faculty of plastic surgeons must be certified by the American Board of Plastic Surgery or possess suitable equivalent qualifications in plastic surgery, as determined by the RRC.
   b. The faculty and attending staff should possess qualifications that contribute to the training program, including high moral and ethical standards, and should demonstrate an appropriate commitment in time and energy to fulfill the teaching assignments.
   c. There must be evidence of scholarly activity among the plastic surgery faculty. Such evidence should include a high order of teaching skills, participation in clinical and/or basic research, involvement in plastic surgery and/or other medical scientific organizations and their meetings, and publication in refereed journals, monographs, and books.
Program Requirements for Residency Education in Plastic Surgery

5. A member of the faculty of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

6. The faculty must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

7. The faculty should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the faculty, and the quality of supervision of residents.

C. Program Research and Scholarly Activity

Graduate medical education must take place in an environment of inquiry and scholarship, in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility.

The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:

1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.

2. Participation in journal clubs and research conferences.

3. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.

4. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.

5. Offering of guidance and technical support (e.g., research design, statistical analysis) for residents involved in research.

6. Provision of support for resident participation in scholarly activities.

D. Other Program Personnel

Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

IV. Facilities and Resources

A. Inpatient Facilities

1. Although inpatient facilities may vary from one participating institution to another, the plastic surgery inpatient service should have an adequate number of beds, support personnel, and proper equipment to ensure quality patient care and education.

2. Operating suites as well as diagnostic and treatment facilities must contain technologically current equipment.

B. Outpatient Facilities

Appropriately equipped outpatient facilities, including operating suites, clinics, and office space, must be available for resident participation in the regular preoperative evaluation, treatment, and postoperative follow-up of patients for whom the resident has responsibility.

C. Library Facilities

1. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.

2. Library services should include the electronic retrieval of information from medical databases.

3. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

D. Other Facilities and Resources

Within the participating institutions of the program, the following must be adequate and readily available:

1. Laboratory services

2. Diagnostic imaging

3. Medical library resources, including current texts and journals relevant to the practice of plastic surgery, that are accessible to residents on a 24-hour basis

4. Adequate space and resources for conferences, including appropriate audiovisual equipment

5. Data information systems sufficient to support research activities and enable the program to meet its record-keeping and data-reporting needs

6. Sufficient technical and clerical support personnel to meet the needs of the educational program

V. Educational Program

A. Program Goals and Objectives

The director and faculty of a program must prepare and comply with written educational goals for the program.

1. Program Design

   All educational components of a residency program should be related to program goals.

   a. The program design and/or structure must be approved by the appropriate review committee as part of the regular review process.

   b. Participation by an institution providing more than 3 months of training must be approved by the RRC.

2. Program Evaluation

   The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Written evaluations by residents should be utilized in this process.

B. Clinical Components

Knowledge of surgical design, surgical diagnosis, embryology, surgical and artistic anatomy, surgical physiology and pharmacology, wound healing, surgical pathology and microbiology, adjunctive oncological therapy, biomechanics, rehabilitation, and surgical instrumentation is fundamental to this specialty. The judgment and technical capability for achieving satisfactory surgical results are mandatory qualities for the plastic surgeon.

1. Specific training should be provided in the following areas:

   a. Congenital defects of the head and neck, including clefts of the lip and palate, and craniofacial surgery

   b. Neoplasms of the head and neck, including the oropharynx, and training in appropriate endoscopy

   c. Cranio-maxillofacial trauma, including fractures

   d. Aesthetic (cosmetic) surgery of the head and neck, trunk, and extremities

   e. Plastic surgery of the breast

   f. Surgery of the hand/upper extremities
g. Plastic surgery of the lower extremities
h. Plastic surgery of congenital and acquired defects of the trunk and genitalia
i. Burn management, acute and reconstructive
j. Microsurgical techniques applicable to plastic surgery
k. Reconstruction by tissue transfer, including flaps and grafts
l. Surgery of benign and malignant lesions of the skin and soft tissues

2. There must be a well-organized and well-supervised outpatient clinic. This clinic must operate in relation to an inpatient service used in the program.
   a. Residents must have the opportunity to see patients, establish provisional diagnoses, and initiate preliminary plans prior to the patients' treatment.
   b. An opportunity for follow-up care must be provided so that the results of surgical care may be evaluated by the responsible residents.
   c. These activities must be carried out under appropriate faculty supervision. If residents participate in preoperative and postoperative care in a private office, the program director must ensure that the resident functions with an appropriate degree of responsibility with adequate supervision.
   d. Adequate experience should be provided in office practice procedures and management.

3. The institutions in the program must have an adequate number and variety of adult and pediatric surgical patients available for resident education. Experience in all 12 categories of surgical experience is important and must not be limited by excessive clinical responsibility in any one or several categories or by excessive nonclinical activities.

4. Generally equivalent and adequate distribution of categories and cases among the residents must be demonstrated.
5. Resident experience in patient management should demonstrate graduated and progressive responsibility.
6. Senior plastic surgery residents may be expected to serve as intermediate supervisors when documented prior experience makes it appropriate, but they must always have supervision available from faculty or staff.

C. Didactic Components

The scope of plastic surgery is so broad that a well-organized, comprehensive, and effective educational curriculum is necessary to ensure that all residents experience training in all the various areas of the specialty, including pertinent related basic science applications. The written curriculum should reflect careful planning of all years of the program, with evidence that the cyclical presentation of core specialty knowledge is being supplemented by the addition of current information, including practice management, ethics, and medical-legal topics as related to plastic surgery.

1. Conferences should be organized by the faculty and held to allow discussion of topics selected to broaden knowledge in the wide field of plastic surgery and to evaluate current information.
2. Conferences should embrace the scope of plastic surgery training as outlined in sections I.A and V.B.1.a-i of these program requirements.
3. Teaching conferences must include basic science subjects, such as anatomy, physiology, pathology, embryology, radiation biology, genetics, microbiology, and pharmacology.
4. There should be regular, documented attendance of plastic surgery conferences by residents and staff. Residents on off-service rotations should attend the conferences of that rotation.
5. Periodic review of the morbidity and mortality experiences of the service must be documented.
6. Participation in and presentation of educational material at conferences is expected of residents. Adequate time for preparation should be permitted, both to maximize the educational experience for the residents and to emphasize the importance of the experience.

D. Resident Policies

1. Supervision
   It is incumbent on the program director to ensure that there is adequate supervision for all resident patient care and educational activities.

2. Working Conditions and Environment
   a. The program director must establish an environment that is optimal both for resident education and for patient care, while ensuring that undue stress and fatigue among residents are avoided. It is his or her responsibility to ensure assignment of appropriate in-hospital duty hours so that residents are not required to perform excessively difficult or prolonged duties regularly.
   b. It is desirable that residents' work schedules be designed so that on average, excluding exceptional patient care needs, residents have at least 1 day out of 7 free of routine responsibilities and be on call in the hospital no more often than every third night.
   c. During these on-call hours, residents should be provided with adequate sleeping, lounge, and food facilities.
   d. There must be adequate backup so that patient care is not jeopardized during or following assigned periods of duty.
   e. Annual vacation time shall be additional time off.
   f. Support services must be such that residents do not spend an inordinate amount of time in noneducational activities that can be discharged properly by other personnel.
   g. Different rotations may require different working hours and patterns. A distinction must be made between on-call time in the hospital and on-call availability at home vis-a-vis actual hours worked. The ratio of hours worked and on-call time will vary, particularly at the senior levels, and therefore necessitates flexibility.

3. Residency training in plastic surgery is a full-time responsibility; activities outside the educational program must not interfere with the residents' performance in the educational process as determined by the program director and must not interfere with the residents' opportunities for rest, relaxation, and study.

4. Appointment of Individuals for Special Training
   a. The appointment of other individuals for special training or education must not detract from the educational opportunities of the residents. The appointment of such individuals must be reported to the RRC.
   b. Addition of such individuals by a program director and/or institution requires a clear statement of the areas of training, clinical responsibilities, duration of the training, and the impact of these individuals on the training of the residents, regardless of the level of training of the resident. This statement is to be supplied to the RRC at the time the program is reviewed.
   c. If individuals so appointed, in the judgment of the RRC, detract from the education of the residents, the accreditation status of the program may be adversely affected.

E. Other Required Components

1. Training must take place in an environment of inquiry and scholarship. Residents must be taught to understand and apply the scientific method to clinical medicine through scholarly activity. Residents should have genuine opportunities to engage in scholarly activities such as participation in ongoing clinical and/or basic research projects with which appropriate faculty are involved, preparation of reports for publication (e.g., case reports, summaries of current scientific knowledge, or reviews of recent
developments in plastic surgery), and participation in scientific meetings.

2. Recognizing the comprehensive nature of the specialty of plastic surgery, there should be clinical resources for the education of plastic surgery residents in anesthesiology, burn management, emergency medicine, cardiothoracic surgery, general surgery, neurological surgery, orthopaedic surgery, otolaryngology, pediatric surgery, surgical critical care, surgical oncology, trauma management, and vascular surgery.

VI. Evaluation

A. Evaluation of Residents

Residents should be evaluated at the completion of each rotation by the faculty member who is responsible for the resident's supervision and training. The progress of each resident, including personality characteristics and ethics, knowledge, skills, and professional growth, must be evaluated by the program director in consultation with the faculty in a semiannual, written review using appropriate criteria and procedures. The semiannual review should accomplish the following:

1. The evaluations must document any efficiencies to be corrected prior to completion of the residency program.

2. The evaluations must be communicated in a timely manner to the individual resident in a confidential conference with the program director, with a discussion of remedial steps, if any. The review and comments should be signed by the resident and program director and maintained on file by the program director for at least 5 years following the resident’s completion of the program.

3. The record of evaluations for each resident must be maintained and must be accessible to the resident and other authorized personnel.

4. A final written evaluation for each resident who completes the program must be provided. The evaluation must include a review of the resident’s performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident’s permanent record maintained by the institution.

5. There must be a written basis for annual advancement of a resident and written procedures for redress of grievances and due process.

B. Faculty Evaluation

1. At least annually, all individual faculty members must be formally evaluated by the program director as well as by the residents. A mechanism for sharing the results of such evaluations with the faculty that preserves resident confidentiality in the evaluation process must be employed.

2. The program should demonstrate that such evaluations are used in improving the program.

C. Internal Evaluation

There should be provisions for annual internal evaluation of the educational, research, and clinical aspects of the program. Residents should participate in this evaluation. A written summary of these evaluations should be made available at the time of the periodic survey and review of the program.

VII. Board Certification

A. One measure of the quality of a program is the performance of its graduates with respect to the American Board of Plastic Surgery certification process. Graduates of ACGME-approved programs are expected to complete this process successfully. A program will be judged deficient if during the most recent 5-year period more than 60% of its graduates fail either the qualifying or the certifying examination on the first try.

B. Residents who plan to seek certification by the American Board of Plastic Surgery should communicate with the Secretary of the Board to obtain current information regarding certification prior to beginning their training.

ACGME: February 1994 Effective: July 1995

Program Requirements for the Subspecialties of Plastic Surgery

I. General Information

A. A postgraduate fellowship is a prescribed post-surgery residency educational experience of at least 1 year devoted to the enhancement of knowledge and skills in a defined area of plastic surgery. Postgraduate fellowship programs of graduate education in the subspecialties of plastic surgery may be accredited only in institutions that sponsor accredited residency programs in plastic surgery, or that are related by formal agreement to such institutions or programs. Accordingly, subspecialty programs will be considered for accreditation only if they function in direct association with a residency program in plastic surgery accredited by the Accreditation Council for Graduate Medical Education.

B. Postgraduate fellowship education in plastic surgery is a component in the continuum of the educational process; therefore, such education will take place only after completion of an accredited residency in plastic surgery, except under very unusual circumstances and with the prior approval of the Residency Review Committee.

C. Postgraduate fellowship programs will be considered for accreditation only in subspecialty areas that meet the requirements for accreditation as established by the Accreditation Council for Graduate Medical Education.

D. The essentials enumerated in the Program Requirements for Residency Training in Plastic Surgery are also applicable to the postgraduate fellowships. In conformity with the Program Requirements, programs must provide an intellectual environment for acquiring the knowledge, skills, clinical judgment, and attitudes that are essential to the practice of the specific subspecialty. This objective can be achieved only when the program director, the supporting faculty and staff, and the administration are fully committed to the educational program and when appropriate resources and facilities are present. Effective graduate education is not achieved when the educational program functions primarily to meet service commitments.

The following items, adapted from the Program Requirements for Residency Training in Plastic Surgery, merit emphasis:

1. The postgraduate fellowship program director must be qualified to supervise and to educate fellows appropriately in the specific subspecialty and must be certified by the American Board of Plastic Surgery or possess equivalent qualifications. The program director will be responsible for ensuring that adequate facilities and other necessary resources are available to provide an education of high quality. There should be a sufficient number of qualified faculty to provide the educational experience and to evaluate the progress and performance of the fellow. As with residency program directors in plastic surgery, it is essential that postgraduate fellowship program directors devote sufficient time and effort to the postgraduate fellowship program and related activities. It is desirable that the postgraduate fellowship program be appointed on a full-time basis.
2. A postgraduate fellowship must provide sufficiently advanced education to allow the fellow to acquire special skill and knowledge in a specific subspecialty. This education should consist of academic and technical components. The academic component should emphasize scholarship, self-instruction, teaching, development of analytic skills and surgical judgment, and research creativity. The technical component should ensure the ability of the fellow to perform skillfully the procedures required for the practice of the subspecialty.

E. Programs will be evaluated according to the following postgraduate fellowship prerequisites:
1. A sufficient number of new and follow-up patients must be present to ensure appropriate inpatient and outpatient experience for each fellow.
2. Subspecialty conferences, seminars, and literature review activities of high quality and of sufficient number must be regularly scheduled. Active participation of the fellow in the planning and the production of these meetings is essential.
3. A fellow must have the opportunity to provide consultation with faculty supervision and should have clearly defined educational responsibilities for residents, medical students, and allied health personnel. These teaching experiences should correlate basic biomedical knowledge with the clinical aspects of the subspecialty.
4. There must be close interaction between the parent residency program in plastic surgery and the postgraduate fellowship programs. Lines of responsibility for the plastic surgery resident and the fellow must be clearly defined. In addition, the fellow should maintain a defined interaction with residents and fellows in other disciplines.
5. A postgraduate fellowship program should have an investigational component. A fellow must learn to design, to carry out, and to interpret research studies. Supervised participation in research projects should occur. Time and facilities must be available to research activity.
6. A postgraduate fellowship must offer supervised training in the operative procedures and in the technical skills integral to the subspecialty discipline involved. Instruction and experience must be sufficient for the fellow to acquire an understanding of the common procedures of the subspecialty and their indications, risks, and limitations.

F. Postgraduate fellowship program directors must have a clearly defined method for regular periodic assessment of the performance of the fellow. The assessment must include cognitive, motor, and interpersonal skills, and surgical judgment. There must be provision for regular communication of this information to the fellow and to the residency program director.

G. The following policies and procedures pertain to the accreditation of postgraduate fellowship programs:
1. Program information forms to be used for accreditation of a postgraduate fellowship will be distributed to the director of the plastic surgery residency program. It will be the responsibility of the residency program director to collect information from directors of the postgraduate fellowship programs that are to be reviewed for accreditation. A site visitor will review the entire institutional program in plastic surgery, including the postgraduate fellowship programs being considered for accreditation. The statistical and narrative reports for all components of the program will be forwarded to the Residency Review Committee for Plastic Surgery (RRC-PS). The RRC-PS will review the institutional program in its entirety and will determine the accreditation of the plastic surgery residency program and the postgraduate fellowship programs.

2. Postgraduate fellowship programs will be accredited only if the residency program in plastic surgery is accredited. The accreditation status of postgraduate fellowship programs may equal but not exceed the accreditation status of the parent plastic surgery residency program. A plastic surgery residency program may achieve and retain accreditation whether or not the affiliated postgraduate fellowship programs are accredited. Loss of accreditation of the plastic surgery residency program will result in loss of accreditation of all postgraduate fellowship programs related to that residency.
3. The review cycle for postgraduate fellowship programs will be coordinated with review cycle for the plastic surgery residency program with provision for separate review of a postgraduate fellowship program when major changes occur.
4. Progress reports may be used to obtain additional information regarding postgraduate fellowship program progress and development.
including the appropriate technical skills, to manage patients with these disorders.

5. This opportunity must include experience in the clinical diagnosis and interpretation of laboratory data relative to the above disorders. Experience in microsurgery and other special technology relative to the management of hand problems must be provided, as well as experience in the special diagnostic skills such as electrodiagnosis and radiology relative to treating problems of the hand.

6. The spectrum of education shall extend from the initial management of the patient through aftercare, rehabilitation, and the final evaluation.

II. Facilities and Resources
A. Modern facilities to accomplish the overall educational program must be available and functioning. These include inpatient, ambulatory care, and laboratory resources for adult and pediatric patients and, specifically, support services in the diagnostic fields of pathology, radiology, physical and occupational therapy, orthotics, and prosthetics. There must be the opportunity for prolonged personal posthospital follow-up of patients cared for by the fellow.

B. It is desirable that the educational program be affiliated with a facility in which there is additional accredited training in surgery, plastic surgery, and orthopaedic surgery as well as other medical and surgical specialties and subspecialties. Available learning resources must include traditional libraries with current books and periodicals as well as facilities for viewing audiovisual material such as videotapes and sound slide programs.

C. Library
1. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.
2. Library services should include the electronic retrieval of information from medical databases.
3. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

D. Research and Scholarly Activity
1. Research
   Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility.
2. Scholarly Activity
   The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the faculty. While not all members of a faculty must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:
   a. Active participation in the faculty in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.
   b. Participation in journal clubs and research conferences.
   c. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.
   d. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.
   e. Offering of guidance and technical support (e.g., research design, statistical analysis) for residents involved in research.
   f. Provision of support for resident participation in scholarly activities.

III. Program Personnel
The program director and faculty are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director
There must be a single program director responsible for the program.
1. Qualifications of the program director include:
   a. Requisite and documented clinical, educational, and administrative abilities and experience.
   b. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)
   c. Certification by the American Board of Plastic Surgery or suitable equivalent qualifications with documented qualifications and experience in hand surgery.
   d. Appointment in good standing to the medical staff of an institution participating in the program.

2. Responsibilities of the program director include:
   a. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the faculty. It should be readily available for review.
   b. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.
   c. Selection and supervision of the faculty and other program personnel at each institution participating in the program.
   d. The supervision of residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the faculty. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.
   e. Regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician.
   f. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.
   g. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.
   h. Preparation of an accurate statistical and narrative description of the program as requested by the RRC.
B. Faculty
1. There must be a sufficient number of faculty with documented qualifications to instruct and supervise adequately all the residents in the program. Members of the teaching faculty must be able to devote sufficient time to meet their supervisory and teaching responsibilities.
2. All members of the faculty must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participating in scholarly activities.
3. A member of the faculty of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.
4. The faculty must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.
5. The faculty should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the faculty, and the quality of supervision of residents.

C. Other Program Personnel
Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

IV. Evaluation
A. Program
The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Written evaluations by residents should be utilized in this process.

B. Hand Surgery Resident
The program director, with participation of members of the faculty, shall:
1. At least semiannually evaluate the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures.
2. Communicate each evaluation to the resident in a timely manner.
3. Advise residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.
4. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.
5. Provide a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.

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Program Requirements for Residency Education in Preventive Medicine

I. Introduction
Preventive medicine is a specialty of medical practice, the primary foci of which are (a) the study of disease processes as they occur in communities and in defined population groups and (b) the stimulation of practices with respect to the community and the individual that will advance health by promoting health-enhancing environments and behaviors, preventing disease and injury, making possible early diagnosis and treatment, and fostering habilitation and rehabilitation of persons with disabilities.

A. Basic Components
Preventive medicine has a group of common basic components, whatever the specific field of practice. A given component may be of major importance in some fields of practice and of lesser importance in others, but a basic capability is essential in each. These components are the:
1. Application of biostatistical principles and methodology;
2. Recognition of epidemiological principles and methodology;
3. Planning, administration, and evaluation of health and medical programs and the evaluation of outcomes of health behavior and medical care;
4. Recognition, assessment, and control of environmental hazards to health, including those of occupational environments;
5. Recognition of the social, cultural, and behavioral factors in medicine;
6. Application and evaluation of primary, secondary, and tertiary prevention;
7. Assessment of population and individual health needs.

B. Program phases
1. To impart the knowledge and develop the skills necessary to achieve these objectives, graduate education in preventive medicine must include three phases: the clinical phase, the academic phase, and the practicum phase. Each of these phases must be no less than 1 year in duration, except for the academic phase, as described in section III.B of the common program requirements.
2. A program may be accredited for one, two, or three phases. A program will not be accredited for the clinical phase if the clinical phase is accredited by another specialty.
3. The program director should counsel residents in the academic phase in the selection of assignments, services, or elective courses that will help provide the skills and knowledge needed in the resident's practicum experiences and intended fields of practice in preventive medicine. The program director must provide information that describes the program's accreditation status to each applicant and resident.

II. Administration
A. Program Personnel
The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

1. Program Director Qualifications
   a. The entire residency program should be under the supervision of one physician who is certified by the American Board of Pre-
ventive Medicine in the appropriate field of preventive medicine or who possesses suitable equivalent qualifications and who is judged by the Residency Review Committee (RRC) to be suitably qualified on the basis of knowledge and experience of at least 3 years in the field of preventive medicine after completion of residency training. A physician who is not certified in the appropriate field of preventive medicine but is judged by the RRC to possess suitable equivalent qualifications may serve as program director. The program director must devote sufficient time and effort to the program to ensure its educational quality. At all times, there must be continuity and direction in the education and supervision of residents.

b. Requisite and documented clinical, educational, and administrative abilities and experience.

c. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)

d. Appointment in good standing to the medical staff of an institution participating in the program.

2. Responsibilities of the Program Director

a. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.

b. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.

c. Selection and supervision of the faculty and other program personnel at each institution participating in the program.

d. The supervision of residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.

e. Regular evaluation of residents’ knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician.

f. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.

g. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.

h. Preparation of an accurate statistical and narrative description of the program as requested by the RRC.

3. Faculty

a. There must be a sufficient number of faculty with documented qualifications to instruct and supervise adequately all the residents in the program. Faculty members must be able to devote sufficient time to meet their supervisory and teaching responsibilities.

b. All members of the faculty must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.

c. A faculty member at each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

d. The faculty must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

e. The faculty should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the faculty, and the quality of supervision of residents.

4. Other Program Personnel

Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

B. Residency Advisory Committee

There must be a residency advisory committee (RAC) consisting of members expert in the field, which must evaluate and advise on the content, conduct, and effectiveness of the training program and make appropriate recommendations.

1. A substantial number of the committee must be persons other than the primary faculty or staff of the sponsoring institution.

2. The program director shall be an ex-officio member and shall not chair the committee.

3. The chairman of the RAC shall be a physician.

4. Residents in the program should be represented on the Committee.

5. The RAC shall meet with the frequency required to discharge these responsibilities, but not less than semiannually, and shall report at least annually to the head of the sponsoring institution.

6. Formal minutes of the RAC meetings shall be kept and shall be submitted to the RRC with the annual report.

7. The resident(s) shall provide the chairman of the RAC with the residents’ annual evaluation of the program.

C. Participating Institutions

Individual phases or parts of the training program may be offered at participating institutions. It is essential that agreements between the sponsoring and participating institutions be defined and that the agreements contain the educational objectives of the program.

1. New or updated affiliation agreements must be included with the annual report.

2. The program will keep all active agreements on file for review at the time of the site visit.

3. The program director is responsible for reviewing the agreements annually and for assuring updates as needed to ensure currency.

4. The reciprocal commitments of the residency program and the participating institutions must be explicit in a written agreement or contract indicating:

a. The educational objectives of the affiliation experience;

b. The scope of the affiliation with placement locations

c. The resources, including space, support services and clinical facilities, of the affiliate that will be available to the residents;

d. The duties and responsibilities the residents will have in the affiliate;

e. The relationship that will exist between residents and staff of the residency program and the affiliate;

f. The supervisory relationship and identified supervisor who shall be qualified by certification or equivalent experience in the area, as determined by the program director. There must be
active participation by the residents at the affiliated site, and resident supervision on-site must be performed by a physician or appropriately qualified health professional.

III. Educational Program

A. General Support

The residency program and its affiliates must maintain adequate facilities, including office and laboratory space and access to computer facilities. A basic collection of reference texts and periodicals in preventive medicine and public health shall be maintained. Support services, including secretarial, should be provided. Residents must be provided with adequate office facilities during assigned duty hours. All residents should be provided funds for travel to designated professional meetings.

B. Required Program Phases

1. General Information

a. The RRC will consider for accreditation programs that offer (a) the clinical, academic and practicum phases; (b) the academic and practicum phases, or (c) the practicum phase alone.

b. Programs based in non-academic institutions which offer only a practicum year must have formal affiliation with a school of public health, a medical school offering an MPH or equivalent degree, or another program’s accredited academic phase.

c. Programs that offer the academic and practicum phases or the practicum phase only are to accept only individuals who have completed training in an accredited clinical phase.

d. If the clinical phase is not taken as part of the preventive medicine residency program, the resident may meet the clinical phase requirement with a year in an accredited program in one of the recognized direct primary patient care specialties eg, family practice, pediatrics, internal medicine, and obstetrics and gynecology, or a transitional year program.

2. Clinical Phase

The clinical phase constitutes a graduate year of clinical training and experience in direct patient care. A clinical year must provide broad experience in direct patient care, including ambulatory and inpatient hospital experience, and must be completed prior to the start of the practicum phase. If a clinical year is offered by the preventive medicine residency program, it must meet the following requirements for accreditation:

a. In addition to the preventive medicine residency, there must be at least one Accreditation Council for Graduate Medical Education-accredited primary care residency at the same institution.

b. Those disciplines considered to provide a broad scope of educational experience in fundamental skills are family practice, pediatrics, internal medicine, and obstetrics and gynecology.

c. Other departments participating in the clinical year training shall be identified and have delineated roles. The qualifications of the participating faculty should be equivalent to those of the faculty in the accredited primary care residencies.

d. The curriculum should consist of at least 3 months of hospital experience in internal medicine. In addition, there should be a balanced program of outpatient and inpatient care, to provide a broad range of exposure to other types of patients, including pediatrics, obstetrics and gynecology, and emergency medicine. Elective rotations should be determined by the needs of the individual resident and/or the requirements of the specialty program. A clinical year consisting exclusively of a series of outpatient clinic rotations will not be considered as offering an adequate breadth of training.

e. The program should be approved by the institution's clinical coordinating committee or equivalent authority.

f. All participating hospitals must be accredited by the Joint Commission on the Accreditation of Healthcare Organizations (JCAHO).

C. Academic Phase

1. General Information

The academic phase consists of a course of study leading to the degree of Master of Public Health or an equivalent degree in an institution accredited by a nationally recognized accrediting agency. The course of study requires a minimum of 1 full academic year or its equivalent as determined by the RRC. The resident who is in a degree-granting institution must meet all requirements for the degree. When no degree is granted, a postbaccalaureate curriculum of equivalent content, depth, and rigor may be acceptable, provided the curriculum is approved by an appropriate body, such as the graduate school or academic senate of an institution accredited by a nationally recognized accrediting agency. In such a case, the written notification of approval must be supplied to the RRC.

2. Required Coursework

The required coursework shall in all cases include biostatistics, epidemiology, health services organization and administration, environmental and occupational health, and social and behavioral influences on health.

3. Research Activities

Adequate opportunities should be available for the resident to participate in research activities appropriate to the chosen field of training.

4. Practicum Phase

The practicum phase is a year of continued learning and supervised application of the knowledge, skills, and attitudes of preventive medicine in the field of special study.

a. Duration

The practicum phase shall be the equivalent of 12 full months in duration. Programs that offer a combined 2-year academic/practicum program must provide a clearly delineated schedule to the RRC showing that adequate time is available to complete both the academic and the practicum components of the program. Academic work shall precede or be concurrent with activities of the practicum phase that apply the principles embodied in the academic program.

b. Content

The practicum phase shall offer both didactic and applied components, which shall be provided in settings in which there are well-organized programs appropriate to the particular field of preventive medicine. There shall be provision for the supervised application of the knowledge, skills, and attitudes of preventive medicine gained in the academic phase and in the didactic component of the practicum phase. The resident must assume progressive responsibility during the course of training.

C. Program Goals and Objectives

The director and teaching staff of a program must prepare and comply with written educational goals for the program.

1. Program Design

All educational components of a residency program should be related to program goals.

a. The program design and/or structure must be approved by the RRC as part of the regular review process.
b. Participation by any institution providing more than 3 months of training in a program of less than 3 years in duration must be approved by the RRC.

2. Program Evaluation
The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Written evaluations by residents should be utilized in this process.

D. Duty Hours and Personal Responsibility
Residents hours on duty in a clinical setting shall be scheduled and monitored to avoid excessive stress and fatigue. Residents must have a keen sense of personal responsibility for continuing patient care and must recognize that their obligation to patients is not automatically discharged at any given hour of the day or any particular day of the week. In no case should a resident go off duty until the proper care and welfare of patients have been ensured. Duty hours and night and weekend call for residents must reflect the concept of responsibility for patients and provide for adequate patient care. Residents must not be required regularly to perform excessively difficult or prolonged duties. When averaged over 4 weeks, residents should spend no more than 80 hours per week in all duties. Residents at all levels should, on average, have the opportunity to spend at least 1 day out of 7 free of hospital duties and should be on call no more often than every third night. There should be adequate opportunity to rest and sleep when on call for 24 hours or more. There should be adequate backup so that patient care is not jeopardized during or following assigned periods of duty.

E. Program Research and Scholarly Activity
Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility.

1. Scholarly Activity
The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:
- a. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.
- b. Participation in journal clubs and research conferences.
- c. Active participation in regional or national professional and scientific societies, particularly through presentation at the organizations’ meetings and publication in their journals.
- d. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.
- e. Offering of guidance and technical support (e.g., research design, statistical analysis) for residents involved in research.
- f. Provision of support for resident participation in scholarly activities.

2. Library
- a. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.
- b. Library services should include the electronic retrieval of information from medical databases.
- c. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

IV. Evaluation
A. Resident Evaluation
The program director, with participation of the faculty, shall evaluate resident performance at least semiannually. The evaluations must be reviewed with the resident formally and in a timely manner. Where appropriate, interim evaluation is encouraged.

1. The resident’s supervisor in the clinical and practicum phases shall provide a written evaluation to the program director and the resident on completion of the rotation.
2. The evaluations for each resident must be kept available for review by the individual resident and by the reviewer at the time of the survey.
3. The program director and faculty will certify that residents completing the program have fulfilled all established requirements based on the above evaluations. This final evaluation should be part of the resident’s permanent record and should be maintained by the institution.
4. Each program must develop and use specific performance measures. A variety of acceptable techniques for performance assessment may be utilized. A record must be maintained of the instruments and processes used for assessment.
5. Evaluation of residents in the academic phase will be the responsibility of the sponsoring institution and will include a transcript or equivalent document provided to each resident. All academic activities should be coordinated with the individual resident’s residency director.

B. Program Evaluation
1. With the exception of the years when accreditation occurs, an annual report must be submitted to the RRC. The program director must describe each individual resident’s activities and any significant change in program staffing, affiliations, or facilities for the year covered by the report. Minutes of the RAC meetings and new or updated interinstitutional agreements must be furnished with the report. The annual report forms will be furnished to the program directors by the executive secretary of the RRC.
2. Residents shall have the opportunity to provide written evaluation of the adequacy, quality, and appropriateness of each component of the educational program. This evaluation shall be provided to the chairman of the RAC annually.
3. A record must be maintained of periodic internal assessment of the program by the program director, faculty, and residents.
4. The RRC may consider the performance of graduates on the examinations of the American Board of Preventive Medicine as one measure of the quality of the training program.

V. Board Certification
Residents should contact the Executive Director of the American Board of Preventive Medicine for information regarding Board Certification.
Program Requirements for Residency Education in Public Health and General Preventive Medicine

I. Introduction

A. Scope of the Specialty
Public health and general preventive medicine is the specialty of preventive medicine that deals with health promotion and disease prevention in communities and in defined populations. Practitioners in this field are found in governmental and voluntary health agencies, academic and health-care institutions, group practice settings, and health service research organizations. Many of these specialists deal with public health practice, the direction and management of health-care institutions and delivery systems, the community's health, and the health status and demographics of population groups. Some of these specialists provide prevention interventions for individual patients, while others are involved in the health status of both groups and individuals.

B. General Objectives
The achievement of knowledge and skills in the component functions of preventive medicine will enable the graduate practitioner to:
1. Perform epidemiological investigations of acute and chronic diseases and injuries
2. Use appropriate statistical techniques in the design of studies and interpretation of findings relative to disease interventions performed on individuals and in monitoring and experimental protocols
3. Plan, administer, and evaluate programs to promote health and prevent disease in medical practice settings and in public health agencies
4. Design, perform, and evaluate clinical trials
5. Apply clinical interventions in the general population
6. Assess health risk factors in individual persons and groups and prescribe appropriate interventions
7. Assess and ameliorate the impact of environmental and occupational risk factors on individual persons and on groups
8. Assess the clinical and public health program needs of populations, eg., workers, communities, or military groups
9. Achieve maximum advantage through collaboration with other members of the health promotion and preventive medicine team
10. Develop budgeting and personnel management skills
11. Develop research skills in other areas appropriate to health promotion and disease prevention

II. Required Phases

A. Clinical Phase
The clinical phase is described in the common program requirements. If the resident has already chosen an area of special emphasis, the clinical phase should be designed to strengthen skills in that area.

B. Academic Phase
The academic phase is described in the common program requirements. Program directors shall counsel residents and school authorities on coursework that should be taken as electives. Electives should be chosen according to the special emphasis and interest of the resident and the Program Requirements for Residency Education in Preventive Medicine.

C. Practicum Phase
1. Description
   a. The purpose of the practicum phase is to give the resident experience in practicing general preventive medicine and public health in established programs under the guidance of skilled practitioners. The scope of that experience must be broad enough to ensure an appreciation for and ability to cope with a range of preventive medical problems in different settings. Additionally, the training must provide opportunity for concentrated experience in an area of the resident's special emphasis.
   b. This phase shall be the equivalent of 12 months' duration. Programs that offer a combined 2-year academic/practicum program must provide the Residency Review Committee (RRC) a clearly delineated schedule showing that adequate time is available to complete both the academic and practicum phases.
   c. Didactic education must be documented and must offer a broad range of topics such as the medical aspects of health promotion, disease prevention and surveillance, toxic exposure, health economies, clinical issues in prevention, management techniques, and current epidemiological issues.
   d. Residency programs are encouraged to make rotations in occupational medicine available to their residents.
   e. The program should include studies that offer each resident an opportunity to participate in data gathering and analysis procedures.
   f. The program must provide at least a 1-month experience in a public health agency, and this must be documented for each resident.
   g. The adequacy of highly fragmented assignments may require special documentation.
   h. Because the practitioners of public health and preventive medicine will need management skills, the program should include experience in budgeting, fiscal control, personnel practice, and administrative techniques, including automated record keeping and computer applications in the management of health services.
   i. Special attention should be given to the political process, governmental structure, and health policy. It is highly desirable that observation or participation in legislative and regulatory procedures as well as public relations be included.

2. Sponsoring and Participating Institutions
   a. The facilities in which training is provided need not conform to a rigid pattern. The sponsoring institution may be an educational institution, a research center, or an operating health agency. The affiliation(s) must be documented by written agreements, as specified in the common program requirements.
   1. If the sponsoring institution is an educational or research institution, it should have resources for developing a comprehensive graduate program in preventive medicine. In the case of a sponsoring institution that is not a public health agency, affiliation(s) must be negotiated with a health department, other health agency, or organization to ensure appropriate didactic and research opportunities.
   2. If the sponsoring institution is a health agency, it should offer a comprehensive experience in community or public health. The program may include communicable and chronic disease control, health-care administration, health protection and promotion, maternal and child health, environmental health and sanitation, and mental health. To ensure an appropriate didactic component, including the gathering and analyzing of data, affiliations must be negotiated with a medical school or school of public health and
that relationship documented in a written agreement, as specified in the common program requirements.

b. In addition to the sponsoring institution, a practicum may be given in participating institutions that are chosen to meet particular needs of residents.

3. Facilities

a. The resources and structure of a participating institution should be well established and should serve a population or provide research and educational programs sufficiently comprehensive to ensure appropriate experience in public health and general preventive medicine.

b. The competence and interest of the professional and supervisory staff in residency education should be ensured to the satisfaction of the RRC.

Program Requirements for Residency Education in Occupational Medicine

I. Introduction

Occupational medicine is a specialty within preventive medicine that focuses on the relationships among the health of workers; the ability to perform work; the arrangements of work; and the physical, chemical, and social environments of the workplace. Practitioners in this field recognize that work and the environment in which work is performed can have favorable or adverse effects upon the health of workers as well as other populations; that the nature or circumstances of work can be arranged to protect worker health; and that health and well-being at the workplace are promoted when workers' physical attributes or limitations are accommodated in job placement.

The principal concerns of occupational medicine are

A. The Worker: The appraisal, maintenance, restoration, and improvement of health through the application of the principles of preventive medicine, medical care, rehabilitation, and environmental medicine; and the matching of health or physical attributes of the worker with the requirements of jobs.

B. The Workplace: The appraisal and design of work and the workplace for the purpose of controlling within safe limits exposures to potentially injurious substances or conditions; the evaluation of hazards or toxic materials in the workplace; and arranging work so that it conforms to the physiological requirements of workers.

C. Information Management: The collection, collation, storage, and analysis of health data to facilitate epidemiologic study of health phenomena related to work or to health-enhancing activities; the dissemination of health-relevant information to workers, regulatory agencies, customers, and others who may benefit from such information; and the protection from inappropriate release of confidential medical information.

D. Administration: The application of social, economic, and management principles to organize, implement, and assess activities designed to promote the health and well-being of workers; and the capability of dealing with relevant regulatory, legal, and industrial relations organizations.

II. Educational Program

A. Phases

1. Clinical Phase
   The clinical phase is described in the common program requirements.

2. Academic Phase
   The requirements of the academic phase are described in the common program requirements. The academic phase shall include the required courses listed in the common program requirements as well as topics selected from the list of didactic components referenced in Section II.B.1 of the Program Requirements for Residency Education in Occupational Medicine.

3. Practicum Phase
   The practicum phase shall prepare the resident for the comprehensive practice of occupational medicine and shall afford opportunities for the resident to deal with clinical, scientific, social, legal, and administrative issues from the perspectives of workers and their representatives, employers, and regulatory or legal authorities.

   a. There shall be opportunities for the planned and supervised application of the knowledge and skills acquired in the prior phases of residency education. Residents shall have sufficient continuity of service in practicum activities to foster the assumption of authentic clinical and administrative responsibility and the development of mature judgment and resourcefulness.

   b. For at least 4 months the resident shall engage in supervised practice within the real world of work. Through interaction with occupational health personnel, workers, human resources and industrial relations personnel, line supervisors, worker representatives, and the medical community, the resident must gain experience in the clinical and administrative aspects of direct worker care and job assignment, medical screening and surveillance, health conservation and promotion, environmental assessment, employee assistance, and relevant regulatory compliance.

   Appropriate practicum opportunities may be found in a variety of settings in which a comprehensive program of occupational medicine and related health and administrative services exists. Suitable sites may include heavy and light manufacturing; the utilities, services, and transportation sectors; and clinics that provide comprehensive services to workers and employers.

   Diagnostic and referral clinics organized primarily for the diagnosis and assessment of occupational disease can have a vital role in the education of residents but do not afford the broad practicum opportunities specified above. This experience need not be obtained at a single site nor received in a single 4-month block; however, sufficient sustained attendance at each facility must occur to permit the assumption of significant clinical and administrative responsibility.

   c. A 4-month equivalent based on distributed time totaling 4 months can be acceptable, provided that less-than-full-time attendance does not compromise the assumption of responsibility. The program director must document the distributed time totaling 4 months to the satisfaction of the Residency Review Committee. The adequacy of highly fragmented assignments may require special documentation. Assignments that do not afford opportunity for the development of responsibility are not acceptable.

   d. Extensive time commitments to the care of minor employee complaints or to service functions characterized by highly repetitive or standardized procedures do not contribute to professional growth and must not be permitted to dilute the educational value of the practicum experience.

   e. Because the team approach is an important aspect of occupational medical practice, residents must have assignments that require collaborative work with industrial hygienists, nurses, and safety personnel, and also with counselors or others concerned with psychosocial issues.
f. Residents are encouraged to engage in research during the practicum phase with the advice and supervision of the teaching faculty. However, the practicum must be primarily an educational experience that prepares the resident for the comprehensive practice of occupational medicine. The commitment of time to the development of new knowledge, however valuable, must not impair achievement of the fundamental objectives of the practicum by diluting the educational experience, diminishing peer interaction, or impeding the assumption of progressive clinical and administrative responsibility.

B. Required Components
The following components are required and may be addressed in more than one phase of the program:

1. Didactic Component
   A didactic component must be provided in the practicum phase. This component shall include structured lectures, journal clubs, symposia, etc., that focus on the following topics:
   a. Environmental physiology, including responses to heat, pressure, noise, and other physical stresses
   b. Occupational disease, including diagnosis, differential diagnosis, prevention, and treatment
   c. Toxicology, including basic principles, clinical applications, and risk assessment
   d. Industrial hygiene, including instrumentation, data interpretation, and basic environmental control measures
   e. Safety, including behavioral factors in accident causation and control and medical support of accident investigation
   f. Ergonomics
   g. Determination of fitness to work, placement of workers, and adaptations of work to accommodate handicaps
   h. Employee assistance programs, including substance abuse and rehabilitation
   i. Health education and health promotion, lifestyle risk factors as they are affected by the occupational environment
   j. Occupational health data management and analysis
   k. Management and administrative aspects of an occupational health program

2. Clinical Component
   The clinical component shall include but not be limited to each of the following topics:
   a. Clinical care of workers in the prevention, diagnosis, treatment, and rehabilitation of work-related disorders
   b. Evaluation of the fitness of workers for normal or modified work assignments in a wide variety of work environments and the assessment of impairment and disability
   c. Counseling and education of workers and supervisors with respect to work or environmental hazards, health-related habits of living, and the arrangements of work

3. Administrative Component
   The administrative component will provide the resident with opportunities for management responsibilities and shall include but not be limited to each of the following topics:
   a. The planning, administration, supervision, and evaluation of a broad program for the protection and promotion of the health and safety of workers in the work setting, including health risk assessment, accident evaluation, and risk reduction
   b. Application of administrative and scientific principles in the achievement of compliance with regulatory requirements and those of workers’ compensation plans
   c. Acquisition, collation, storage, and analysis of health and environmental data

Program Requirements for Residency Education in Aerospace Medicine

I. Introduction
Aerospace medicine is a specialty of medical practice within preventive medicine that focuses on the health of a population group defined by the operating crews and passengers of air and space vehicles, together with the support personnel who are required to operate such vehicles. Segments of this population often work and live in remote, isolated, and sometimes closed environments under conditions of physical and psychological stress rarely encountered in terrestrial life. Specialty training for the physician in this field must, therefore, address the diagnosis, prevention, and treatment of disorders associated with these unique environments and with the adaptive systems designed to enhance performance and support life under such conditions.

II. Educational Program
In addition to the common program requirements, the phases of a residency in aerospace medicine shall contain:

A. Clinical Phase
The clinical phase is described in the common program requirements. Training should emphasize neuropsychiatry, ophthalmology, cardiopulmonary diagnosis, and emergency medicine. It is desirable that this year of clinical training be accomplished in a hospital or medical complex in which patients with aerospace-related medical problems are frequently encountered. Progressive patient responsibility should be assigned to residents. Supplemental clinical training in the areas mentioned above shall be provided during the practicum year, as described below.

B. Academic Phase
The requirements of the academic phase are described in the common program requirements. Additional academic requirements for aerospace medicine are normally integrated into the curriculum leading to a postbaccalaureate degree. In addition to the coursework required in the common program requirements, course content should emphasize environmental physiology and toxicology with respect to the biological effects of altered pressure, temperature, atmospheric chemistry, and ionizing radiation. Facilities should be available for laboratory or clinical investigation of problems with direct application to the specialty, and supervised participation by the resident in a formal research project should be encouraged. Because of the paramount role of clinical care in an aerospace medicine practice, it is desirable that the academic faculty be either part of or formally affiliated with an accredited school of medicine.

C. Practicum Phase
This year of supervised application should be accomplished in an institutional setting where operational aeromedical problems are routinely encountered and aerospace life support systems are under active study and development. Aircraft accident investigation and aircraft certification regulations must be included. Laboratory facilities should be equipped to provide simulated environments in which the effects of and adaptation to extreme conditions of temperature, barometric pressure, acceleration, weightlessness, and psychological stress can be studied. A flight training program should be available both to familiarize the resident with basic aeronautical skills and to provide a source of clinical material for the supervised management of common clinical problems encountered among flight personnel.

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Program Requirements for Residency Education in Psychiatry

I. Introduction
A. Scope of Education
An approved residency program in psychiatry must provide an educational experience designed to ensure that its graduates will possess sound clinical judgment, requisite skills, and a high order of knowledge about the diagnosis, treatment, and prevention of all psychiatric disorders and the common medical and neurological disorders that relate to the practice of psychiatry. While residents cannot be expected to achieve the highest possible degree of expertise in all of the diagnostic and treatment procedures used in psychiatry in 4 years of training, those individuals who satisfactorily complete residency programs in psychiatry must be competent to render effective professional care to patients. Furthermore, they must have a keen awareness of their own strengths and limitations and of the necessity for continuing their own professional development.

B. Duration and Scope of Education
1. Admission Requirements
Physicians may enter psychiatry programs at either the first-year or second-year postgraduate level. Physicians may enter programs at the second-year postgraduate level only after successful completion of one of the following:
a. A broad-based clinical year of accredited training in the United States or Canada in programs in internal medicine, family practice, or pediatrics;
b. An Accreditation Council for Graduate Medical Education (ACGME)-accredited transitional year program;
c. One year of an ACGME-accredited residency in a clinical specialty requiring comprehensive and continuous patient care.
2. Length of the Program
a. A complete psychiatry residency is 48 months. Twelve of these months may be spent in an ACGME-approved child and adolescent psychiatry residency. Accreditation by the ACGME is required for all years of the training program. Programs may not permit residents to use vacation time or other benefit time to advance the date of graduation from training. Although residency is best completed on a full-time basis, part-time training at no less than half time is permissible to accommodate residents with personal commitments (eg, child care).
b. Any program that alters the length of training beyond these minimum requirements must present a clear educational rationale consonant with the program requirements and objectives for residency training. The program director must obtain the approval of the sponsoring institution and the Residency Review Committee (RRC) prior to implementation and at each subsequent review of the program.
c. Prior to entry into the program, each resident must be notified in writing of the required length of training for which the program is accredited. The required length of training for a particular resident may not be changed without mutual agreement during his or her program, unless there is a break in his or her training or the resident requires remedial training.
d. Programs should meet all of the Program Requirements for Residency Education in Psychiatry. Under rare and unusual circumstances, programs of either 1 year's or 2 years' duration may be approved, even though they do not meet all of the above requirements for psychiatry. Such 1- or 2-year programs will be approved only if they provide some highly specialized educational and/or research programs. Also, such programs will be approved only if they ensure that residents will complete the didactic and clinical requirements outlined in the program requirements.
3. Program Format by Year of Training
a. First Year of Training
A psychiatric first postgraduate year must include at least 4 months in internal medicine, family practice, and/or pediatrics. This training must be in a clinical setting that provides comprehensive and continuous patient care.
1. Neurology rotations may not be used to fulfill this 4-month requirement.
2. One month, but no more, of this requirement can be fulfilled by an emergency medicine rotation, as long as the experience is predominantly with medical evaluation and treatment, as opposed to surgical procedures.
3. For residents transferring into a program, there must be documentation in the training record that they have met this requirement in either current or prior training.
4. A psychiatric first postgraduate year should not include more than 6 months in psychiatry and must not include more than 8 months in psychiatry.
5. A minimum of 2 months of neurology, or its full-time equivalent or a part-time basis, is required prior to completion of training. It is highly desirable that this experience occur during a psychiatric first postgraduate year.
6. It is highly desirable that the Department of Psychiatry maintain contact with residents during the first postgraduate year while they are on services other than psychiatry.

b. The Second Through Fourth Years of Training
Although some of the training described below may be offered in the first postgraduate year, all must be completed prior to graduation from the program.
1. The program must have an explicitly described educational curriculum covering the broad spectrum of clinical psychiatry as outlined in V.B.1.a-0.
2. The formal didactic instruction must include regularly scheduled lectures, teaching rounds, seminars, clinical conferences, and required reading assignments covering the topics identified in Section V.
3. There must be an educationally sound balance among time spent in direct patient care, clinical and didactic teaching, and supervision. Formal educational activity shall have high priority in the allotment of the resident's time and energies. Service needs and clinical responsibilities must not prevent the resident from obtaining the requisite didactic educational activities and formal instruction.

II. Institutional Organization
A. Sponsoring Organization
1. Programs should be conducted under the sponsorship of an institution that meets the institutional requirements that apply to residency programs in all specialties, as outlined in the Essentials of Accredited Residencies.
2. The administration of the sponsoring institution(s) should be understanding of and sympathetic to the attainment of educational goals and should evidence the willingness and ability to support these goals philosophically and financially. The latter includes a commitment by the institution and by the program that embraces appropriate compensation for faculty and residents, adequate offices and educational facilities, and support services, as well as opportunities for research.
3. It is important that each affiliated institution offer significant educational opportunities to the overall program. The reasons for including each institution within the program must be stated. The number and distribution of participating training sites must not preclude satisfactory participation by residents in teaching and training exercises. Geographic proximity will be one factor in evaluating program cohesion, continuity, and "critical mass." Affiliated training sites will be evaluated on the basis of whether they contribute to a well-integrated educational program with respect to both didactic and clinical experiences.

B. Selection and Appointment of Residents
1. The program director is responsible for maintaining a process for selecting resident physicians who are personally and professionally suited for training in psychiatry. It is highly desirable that each program have a residency selection committee to advise the program director.

2. The program should document the procedures used to select residents. Application records should contain complete information from medical schools and graduate medical education programs. A documented procedure should be in place for evaluating the credentials, clinical training experiences, past performance, and professional integrity of residents transferring from one program to another, including from an adult to a child and adolescent psychiatry program. This procedure must include solicitation and documentation of relevant information from the training directors of the previous programs participated in by the transferring resident. This documentation must specify all clinical and didactic experiences for which the resident has been given credit. Those residents selected at the second postgraduate year or above must have satisfied the training objectives cited above for reaching that level of training.

3. The residency program director must accept only those applicants whose qualifications for residency include sufficient command of English to facilitate accurate, unimpeded communication with patients and teachers.

4. A transferring resident's educational program must be sufficiently individualized so that he or she will have met all the educational and clinical experiences of the program, as accredited, prior to graduation.

5. The RRC will determine the size of the program's permanent resident complement based on the program's clinical and academic resources.

6. To promote an educationally sound, intellectually stimulating atmosphere and effective graded responsibility, programs must maintain a critical mass of at least three residents at each level of training. Programs that fall below this prescribed critical mass will be reviewed, and if this deficiency is not corrected, they will be subject to negative action.

7. Programs in which the number of residents exceed the resources of patient population, faculty, or facilities for adequate training will be found deficient on the basis of size.

8. Any permanent change in the number of approved positions requires prior approval by the RRC. Prior approval is not required for temporary changes in resident numbers due to makeup or remedial time for currently enrolled residents or to fill vacancies. Approval of permanent increases will require documentation that didactic and clinical training, including supervision, will not be compromised.

III. Faculty Qualifications and Responsibilities
The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director
There must be a single program director responsible for the program. Each residency program must be under the direction of an experienced, fully trained, and qualified psychiatrist whose major responsibility is to maintain an excellent educational program. The residency program director must possess the necessary administrative, teaching, and clinical skills and experience to conduct the program. Continuity of leadership over a period of years is important to the stability of a residency program. Frequent changes in leadership or long periods of temporary leadership usually have a negative effect on an educational program and may adversely affect the accreditation status of the program. The program director must:

1. Be licensed to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)

2. Be certified by the American Board of Psychiatry and Neurology or possess equivalent qualifications in psychiatry satisfactory to the RRC.

3. Have an appointment in good standing to the medical staff of an institution participating in the program.

4. Devote at least one-half of his or her time to the administration and operation of the educational program, including didactic, supervisory, and clinical teaching activities. Programs with multiple institutions, many residents, and/or a large clinical population will require additional time.

B. Responsibilities of the Program Director
1. The program director must have appropriate authority to oversee and to organize the activities of the educational program. The responsibilities of this position should include but not be limited to the following:

   a. Resident appointments and assignments in accordance with institutional and departmental policies and procedures.

   b. Supervision, direction, and administration of the educational activities.

   c. Coordination of training in each geographically separate institution.

   d. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program.

   e. The supervision of residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff.

   f. Regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician.

   g. Provision of a written final evaluation for each resident who completes the program, as specified in Section V.I.A.7.

   h. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to applicants, residents, and members of the teaching staff. It should be readily available for review.

   i. Provision of written information to applicants and residents regarding financial compensation, liability coverage, and the

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1. Programs seeking interim approval of a permanent increase in the number of approved resident positions should contact the executive secretary of the RRC.
policies regarding vacations, sick leave, and parental leave, as well as other special leaves.

j. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.

k. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.

l. Maintenance of a permanent record of evaluation for each resident and having it accessible to the resident and other authorized personnel. These will be made available on review of the program.

m. Preparation of an accurate statistical and narrative description of the program as requested by the RRC for Psychiatry.

n. Notification in writing of the executive secretary of the RRC within 60 days of any major change in the program that may significantly alter the educational experience for the residents, including:

1. Changes in leadership of the department or the program.
2. Changes in administrative structure, such as an alteration in the hierarchical status of the program or department within the institution.
3. Changes in the resident complement that would bring the number of residents below the required critical mass of three residents per year for 2 consecutive years.

2. The program director must obtain prior approval for the following changes in the program for the RRC to determine if an adequate educational environment exists to support these changes:

a. The addition of any participating institution to which residents rotate for 6 months or longer.

b. The addition or deletion of any rotation of 6 months or longer.

c. Any increase in the approved number of resident positions in the program.

d. Any change in the total length of the program.

On review of such proposals or important changes in a program, the RRC may determine that a site visit is necessary.

C. Education Policy Committee

The director of the residency program should have an educational policy committee composed of members of the psychiatry program teaching staff that includes representation from the residents as well as a member of the teaching staff from each ACGME-approved subspecialty residency that may be affiliated with the psychiatry residency. There should be a written description of the committee, including its responsibility to the sponsoring department or institution and to the program director. This committee should participate actively in:

1. Planning, developing, implementing, and evaluating all significant features of the residency program, including the selection of residents (unless there is a separate residency selection committee).

2. Determining curriculum goals and objectives.

3. Evaluating both the teaching staff and residents

D. Number and Qualifications of the Faculty

All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, commitment to their own continuing medical education, and participation in scholarly activities.

1. There must be a sufficient number of teaching staff to instruct and supervise adequately all the residents in the program. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities. The residency must be staffed by a sufficiently wide variety and appropriate number of capable psychiatrists and other mental health professionals with documented qualifications to achieve the goals and objectives of the training program.

2. The faculty psychiatrists should be certified by the American Board of Psychiatry and Neurology or have equivalent qualifications in psychiatry satisfactory to the RRC.

3. A written record of the educational responsibilities of all staff and faculty members (whether full-time or part-time) who participate directly in the education of residents is essential. That record should include the qualifications and experience of the faculty member and the nature, as well as the frequency, duration, and site, of the teaching activity.

4. There must be evidence of scholarly activity among the faculty psychiatrists. Scholarly activity is defined as professional activities that serve to enhance the profession or professional knowledge. While not all members of a faculty need be investigators, scholarly activities should be present on a continuous basis. There should also be evidence of participation in a spectrum of academic and professional activities within the institution as well as within local and national associations. Such evidence should include:

a. Documentation of teaching excellence.

b. Participation in clinical and/or basic research.

c. Involvement in relevant medical scientific organizations and their meetings.

d. Publications in refereed journals, monographs, and books.

5. The faculty must participate regularly and systematically in the training program and be readily available for consultation whenever a resident is faced with a major therapeutic or diagnostic problem.

6. The faculty psychiatrists should actively participate in the planning, organization, and presentation of conferences as well as clinical teaching and supervision.

7. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

8. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

9. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

E. Other Program Personnel

Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

IV. Program Facilities and Resources

A. Clinical Facilities and Resources

1. All programs must have adequate patient populations for each mode of required training and, minimally, must include organized clinical services in inpatient, outpatient, emergency, consultation-liaison, and child and adolescent psychiatry.
2. Training programs must have available to them adequate inpatient and outpatient facilities, clinics, agencies, and other suitable placements where the residents can meet the educational objectives of the program. The program should specify the facilities in which the goals and objectives are to be implemented.
3. All residents must have available offices adequate in size and decor to allow them to interview patients and accomplish their duties in a professional manner. The facility also must provide adequate and specifically designated areas in which residents can perform basic physical examinations and other necessary diagnostic procedures.

B. Other Educational Resources
1. The administration of the facility must provide ample space and equipment for educational activities. There must be adequate space and equipment specifically designated for seminars, lectures, and other teaching exercises.
2. The program must have available audiovisual equipment and teaching material such as films, audio cassettes, and videotapes, as well as the capability to record and play back videotapes.
3. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions. Library services should include the electronic retrieval of information from medical databases.
4. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

This library should provide:
   a. A substantial number of current basic textbooks in psychiatry, neurology, and general medicine
   b. A number of the major journals in psychiatry, neurology, and medicine sufficient for an excellent educational program
   c. The capability to obtain textbooks and journals on loan from major medical libraries
   d. Capability to perform MEDLINE or other medical information searches (or ready access to a library that has this capacity).
5. Each clinical service must have a mechanism that ensures that charts are appropriately maintained and readily accessible for regular review for supervisory and educational purposes. Randomly selected charts will be reviewed at the time of survey.

V. Educational Program
The director and teaching staff of a program must prepare and comply with written educational goals for the program. All educational components of a residency program should be related to program goals. The program design and/or structure must be approved by the RRC for Psychiatry as part of the regular review process.

A. Objectives of Training
1. First Year
   The training obtained during the first postgraduate year should provide residents with medical skills most relevant to psychiatric practice. These include being able to
   a. Undertake the initial clinical and laboratory studies of patients presenting with a broad range of common medical and surgical disorders
   b. Diagnose common medical and surgical disorders and formulate appropriate initial treatment plans
   c. Provide limited, but appropriate, continuous care of patients with medical illnesses and make appropriate referrals
   d. Be especially conversant with medical disorders displaying symptoms likely to be regarded as psychiatric and with psychiatric disorders displaying symptoms likely to be regarded as medical
   e. Be especially cognizant of the nature of the interactions between psychiatric treatments and medical and surgical treatments
   f. Relate to patients and their families, as well as other members of the health-care team with compassion, respect, and professional integrity.
2. Second Through Fourth Years
   The program must provide a well-planned, high-quality curriculum that includes specific, assessable objectives for program components as well as criteria for graduation. These must be written and provided to each resident and faculty member. Residents must be taught to conceptualize all illnesses in terms of biological, psychological, and sociocultural factors that determine normal and disordered behavior. They must be educated to gather and organize data, integrate these data with a comprehensive formulation of the problem to support a well-reasoned differential diagnosis, formulate a treatment plan, and implement treatment and follow-up. The program must provide residents with sufficient opportunities to develop professionalism, knowledge, clinical skills, and professional principles.
   a. The didactic curriculum should include:
      1. Critical appraisals of the major theories and viewpoints in psychiatry, together with a thorough grounding in the generally accepted facts
      2. Presentation of the biological, psychological, sociocultural, economic, ethnic, gender, religious/spiritual, sexual orientation, and family factors that significantly influence physical and psychological development in infancy, childhood, adolescence, and adulthood
      3. Presentation of the etiologies, prevalence, diagnosis, treatment, and prevention of all of the psychiatric conditions in the current standard diagnostic statistics manual, to include the biological, psychological, sociocultural, and iatrogenic factors that affect the long-term course and treatment of psychiatric illness
      4. Comprehension of the diagnosis and treatment of neurologic disorders commonly encountered in psychiatric patients, such as neoplasms, dementia, headaches, head trauma, infectious diseases, movement disorders, multiple sclerosis, Parkinson's disease, seizure disorders, and stroke and related disorders
      5. The use, reliability, and validity of the generally accepted diagnostic techniques, including physical examination of the patient, laboratory testing, imaging, neuropsychologic testing, and psychological testing
      6. The financing and regulation of psychiatric practice, including information about the structure of governmental and private organizations that influence mental health care
      7. Medical ethics as applied to psychiatric practice
      8. The history of psychiatry and its relationship to the evolution of modern medicine
      9. The legal aspects of psychiatric practice
      10. When and how to refer
      11. Research methods in the clinical and behavioral sciences related to psychiatry
   b. Clinical training should provide sufficient experiences in:
      1. The elements of clinical diagnosis with all age groups (of both sexes and including some ethnic minorities), such as interviewing; clear and accurate history taking; physical, neurological, and mental status examination; and complete and systematic recording of findings
Program Requirements for Residency Education in Psychiatry

2. Relating history and clinical findings to the relevant biological, psychological, and social issues associated with etiology and treatment
3. Formulating a differential diagnosis and treatment plan for all conditions in the current standard nomenclature, taking into consideration all relevant data
4. The major types of therapy, including short- and long-term individual psychotherapy, psychodynamic psychotherapy, family therapy, group therapy, cognitive and behavior therapy, crisis intervention, pharmacological and other somatic therapies, and drug and alcohol detoxification
5. Providing continuous care for a variety of patients from different age groups, seen regularly and frequently for an extended time, in a variety of treatment modalities
6. Psychiatric consultation in a variety of medical, surgical, and community settings
7. Providing care and treatment for the chronically mentally ill with appropriate psychopharmacologic, psychotherapeutic, and social rehabilitative interventions
8. Psychiatric administration, especially leadership of interdisciplinary teams
9. Providing psychiatric care to patients who are receiving treatment from nonmedical therapists and coordinating such treatment
10. Knowledge of the indications for and limitations of the more common psychological tests
11. Critically appraising the professional and scientific literature
12. Ability to teach psychiatry to students in the health professions

B. Curriculum
1. Clinical Experience
   Carefully supervised clinical care of patients is the core of an adequate program. The clinical services must be so organized that residents have major responsibility for the care of a significant proportion of all patients assigned to them and that they have sufficient and high-quality supervision. The number of patients for whom residents have primary responsibility at any one time must be small enough to permit residents to provide each patient with appropriate treatment and to have sufficient time for other aspects of their educational program. At the same time, the total number must be large enough to provide an adequate depth and variety of clinical experiences.

   The amount and type of patient care responsibility a resident assumes must increase as the resident advances in training. Each resident must have major responsibility for the diagnosis and treatment of a reasonable number and adequate variety of patients with both acute and chronic illnesses representing the major psychotic and nonpsychotic categories of psychiatric illness. Adequate experience must also be ensured in the diagnosis and management of the medical and neurological disorders encountered in psychiatric practice. Each resident must have supervised experience in the evaluation and treatment of patients of both sexes, of various ages from childhood to old age, and from a variety of ethnic, racial, social, and economic backgrounds.

   It is desirable that residents have didactic learning and supervised experiences in the delivery of psychiatric services in the public sector (such as community mental health centers and public hospitals and agencies) and in managed-care health systems. The clinical experiences are to be designed to develop the requisite skills as outlined in Section VA.2.b, above. Specific clinical experiences must include:
   a. Neurology. Supervised clinical experience in the diagnosis and treatment of neurological patients. This 2-month experience (or its equivalent if done on a part-time basis) may occur on either an inpatient and/or an outpatient basis. The training must provide opportunities to conduct initial evaluations, to participate in the subsequent diagnostic process, and to follow patients during the treatment and/or evolution of their neurological illness. The training in neurology should provide sufficient didactic and clinical experience to develop expertise in the diagnosis of those neurological conditions that might reasonably be expected to be encountered in psychiatric practice and that must be considered in the differential diagnosis of psychiatric conditions.
   b. Inpatient. Significant responsibility for the assessment, diagnosis, and treatment of an appropriate number and variety of general adult psychiatric inpatients for a period of not less than 9 months but no more than 18 months (or its full-time equivalent if done on a part-time basis) in 4 years of training. In general, it is highly desirable that the minimum general, adult inpatient experience be 12 months in duration, although it is recognized that in some settings other training opportunities might lead to the absolute minimum of 9 months. Inpatient rotations on specialized clinical services such as substance abuse, geriatrics, research units, day and/or partial hospitalization, and child and adolescent psychiatry will not be included in assessing the required minimum 9-month inpatient experiences for residency training, unless the rotation on such specialized units is comparable in breadth, depth, and experience to training on general inpatient units. Those rotations not fulfilling the above requirement will be included in assessing the maximum allowable 18-month inpatient experience.
   c. Outpatient. An organized, continuous, supervised clinical experience in the assessment, diagnosis, and treatment of outpatients of at least 1 year (or its full-time equivalent if done on a part-time basis) that emphasizes a developmental and biopsychosocial approach to outpatient treatment. This must include experience with a wide variety of disorders, patients, and treatment modalities, with experience in both brief and long-term care of patients, using individual psychotherapy (including psychodynamic, cognitive, behavioral, biological, and social rehabilitation approaches to outpatient treatment). Long-term psychotherapy experience must include a sufficient number of patients seen at least weekly for at least 1 year, under supervision. Other long-term treatment experiences should include patients with differing disorders and chronicity and should include some patients who are chronically mentally ill.
   d. Child and adolescent psychiatry. An organized clinical experience under the supervision of qualified child and adolescent psychiatrists in the evaluation, diagnosis, and treatment of children, adolescents, and their families. Such experiences should be no less than 2 months full-time equivalent and involve a sufficient number and variety of patients, by both age and psychopathology, treated with a variety of interventional modalities. Residents should have experiences in determining the developmental status and needs for intervention with the children of some of their adult patients and in consulting with these patients regarding the referral of their children for psychiatric services. Residents must have patient care responsibility under the supervision of qualified child and adolescent psychiatrists. While adolescent inpatient units may be used to satisfy a portion of this requirement, rotations to student health services may not.
   e. Consultation/liaison. Supervised psychiatric consultation/liaison responsibility of a minimum of 2 months full-time equiva-
dent, involving patients on other medical and surgical services. While on-call experiences may be a part of this training, such experiences alone will not be sufficient to constitute adequate training in consultation/liaison psychiatry.

f. Emergency psychiatry. Supervised responsibility on an organized, 24-hour psychiatric emergency service that is responsible for evaluation, crisis management, and triage of psychiatric patients. Instruction and experience should be provided in learning crisis intervention techniques, including the evaluation and management of suicidal patients. A psychiatric emergency service that is a part of or interfaces with other medical emergency services is desirable because of the opportunities for collaboration and educational exchange with colleagues in other specialties. There must be organized instruction and supervised clinical experience in emergency psychiatry that lead to the development of knowledge and skills in the emergency evaluation, crisis management, and triage of patients. This should include the assessment and management of patients who are a danger to themselves or others, the evaluation and reduction of risk to caregivers, and knowledge of relevant issues in forensic psychiatry. There should be sufficient contact with patients to enable the resident to evaluate the effectiveness of clinical interventions. While on-call experiences may be a part of this training, such experiences alone will not be sufficient to constitute adequate training in emergency psychiatry.

g. Community psychiatry. Supervised responsibility in community-based mental health activities. This should include consultation with at least one community agency.

h. Geriatric psychiatry. Supervised clinical management of geriatric patients with a variety of psychiatric disorders, including familiarity with long-term care in a variety of settings.

i. Addiction psychiatry. Supervised clinical management of patients with alcoholism and drug abuse, including detoxification and long-term management in inpatient and/or outpatient settings and familiarity with self-help groups.

j. Forensic psychiatry. Supervised experience in evaluation of patients with forensic problems under the supervision of a psychiatrist.

k. Supervised clinical experience in the evaluation and treatment of couples, families, and groups.

l. Techniques for evaluation and management of danger (of the patient dangerous to self and others) should be taught in every aspect of patient care.

m. Psychological testing. Supervised experience with the more common psychological test procedures, including neuropsychological assessment, in a sufficient number of cases to give the resident an understanding of the clinical usefulness of these procedures and of the correlation of psychological test findings with clinical data. Under the guidance of a qualified clinical supervisor, residents should have experience with the interpretation of the psychological tests most commonly used, and some of this experience should be with their own patients.

n. Supervised experience in utilization review and total quality management.

o. Supervised, active collaboration with psychologists, psychiatric nurses, social workers, and other professional and parapersonal mental health personnel in the treatment of patients.

2. Didactic Components

The didactic and clinical curriculum must be of sufficient breadth and depth to provide residents with a thorough and well-balanced presentation of the generally accepted theories, schools of thought, and major diagnostic and therapeutic procedures in the field of psychiatry.

a. The curriculum must include a significant number of interdisciplinary clinical conferences and didactic seminars for residents in which psychiatric faculty members collaborate with neurologists, internists, and colleagues from other medical specialties and mental health disciplines.

b. Didactic instruction must be systematically organized, thoughtfully integrated, and based on sound educational principles, and must include prepared lectures, seminars, and assigned readings that are carried out on a regularly scheduled basis. In a progressive fashion, it should expose residents to topics appropriate to their level of training as outlined in Section V.A.2 above. Staff meetings, clinical case conferences, journal clubs, and lectures by visitors are desirable adjuncts, but they must not be used as substitutes for an organized didactic curriculum.

c. The curriculum must include adequate and systematic instruction in neurobiology, psychopharmacology, and other clinical sciences relevant to psychiatry; child and adult development; major psychological theories, including learning theory and psychodynamic theory; and appropriate material from social and behavioral sciences such as sociology and anthropology. The curriculum should address development, psychopathology, and topics relevant to treatment employed with psychiatric illness, including the chronically mentally ill.

d. The residency program should provide its residents with instruction about American culture and subcultures, particularly those found in the patient community associated with the training program. This instruction should include such issues as sex, race, ethnicity, religion/spirituality, and sexual orientation. Many physicians may not be sufficiently familiar with attitudes, values, and social norms prevalent among various groups of contemporary Americans. Therefore, the curriculum should contain enough instruction about these issues to enable residents to render competent care to patients from various cultural backgrounds. This instruction must be especially comprehensive in those programs with residents whose cultural backgrounds are significantly different from those of their patients.

e. Didactic exercises should include resident presentation and discussion of clinical case material at conferences attended by faculty and fellow residents. This training should involve experiences in formulating and discussing the theoretical and practical issues involved in the diagnosis and management of the cases presented.

3. Supervision

Clinical training must include adequate, regularly scheduled, individual supervision. Each resident must have at least 2 hours of individual supervision weekly, in addition to teaching conferences and rounds, in the PG-2 through PG-4 years of training. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.

4. Clinical Records

Clinical records must reflect the residents' ability to:

a. Record an adequate history and mental status, physical, and neurological examinations

b. Organize a comprehensive differential diagnosis

c. Proceed with appropriate laboratory and other diagnostic procedures

d. Develop and implement an appropriate treatment plan accompanied by regular and relevant progress notes

e. Prepare an adequate discharge summary and plan
C. Resident Policies
1. The program should not allow on-call schedules and activities outside the residency to interfere with education, performance, or clinical responsibility. The program should ensure:
   a. One day out of 7 free of program duties;
   b. On average, on-call duty no more than every third night;
   c. Adequate backup if patient care needs create resident fatigue sufficient to jeopardize patient care or resident welfare during or following on-call periods.
2. Each resident must be given a copy of the Essentials of Accredited Residencies at the beginning of training.
3. Readily available procedures for assisting the resident to obtain appropriate help for significant personal or professional problems should be in place.

D. Other Required Components
1. Scholarly Activity of the Residents and Faculty
   Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility. The following components of a scholarly environment should be present:
   a. The program must promote an atmosphere of scholarly inquiry, including the provision of access to ongoing research activity in psychiatry. Residents must be taught the design and interpretation of research studies, including the responsible use of informed consent, research methodology, and interpretation of data. The program must teach expertise in the critical assessment of new therapies and developments as described in the literature. Residents must be advised and supervised by faculty members qualified in the conduct of research. Programs must have a plan to foster the development of skills for those residents interested in conducting psychiatric research. This plan should include opportunities for conducting research under the supervision of a mentor and training in the principles and methods of research.
   b. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.
   c. Participation in journal clubs and research conferences.
   d. Active participation in national professional and scientific societies, particularly through presentations at the organizations’ meetings and publication in their journals.
   e. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.
   f. Offering of guidance and technical support (e.g., research design, statistical analysis) for residents involved in research.
   g. Provision of support for resident participation in scholarly activities.
2. Progressive Responsibility
   Under supervision, resident clinical experience in patient management should demonstrate gradual and progressive responsibility.
3. Teaching Opportunities
   An important part of the education of the resident is the development of teaching skills. Residents should have ample opportunity to teach students in the health professions.
4. Electives
   All programs should provide residents an opportunity to pursue individually chosen electives.
5. Resident Logs
   There must be a record maintained of specific cases treated by residents, in a manner that does not identify patients but that illustrates each resident’s clinical experience in the program. This record must demonstrate that each resident has met the educational requirements of the program with regard to variety of patients, diagnoses, and treatment modalities. In the case of transferring residents, the records should include the experiences in the prior as well as the current program. This record should be reviewed periodically with the program director or designee, and be made available to the surveyor of the program.

VI. Internal Evaluation
The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Written evaluations by residents should be utilized in this process.

A. Evaluation of Residents
   All programs should state specifically and as clearly as possible the objectives and competencies required for successful completion of the program. These objectives and criteria should be made available to residency applicants.
   1. Regular, systematic, documented evaluation of the knowledge, skills and professional growth of each resident, using appropriate criteria and procedures, must be maintained, including complete records of evaluations containing explicit statements on the resident’s progress toward meeting educational objectives and his or her major strengths and weaknesses. Each evaluation should be communicated to the resident in a timely manner.
   2. The program must provide opportunity for and document regularly scheduled meetings between the resident and the program director or designated faculty members. These meetings should be of sufficient frequency, length, and depth to ensure that the residents are continually aware of the quality of their progress toward attainment of professional expertise. These evaluation sessions should be held at least semiannually and preferably more frequently. The program should give residents opportunities to assess the program and the faculty in a manner that ensures resident confidentiality. Provision should be made for remediation in cases of unsatisfactory performance.
   3. The program must formally examine the cognitive knowledge of each resident at least annually in the PG-2 through PG-4 years, and conduct an organized examination of clinical skills at least twice during the 4 years of training.
   4. Residents should be advanced to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.
   5. A written set of due-process procedures must be in place for resolving problems that occur when a resident’s performance fails to meet required standards. These procedures must conform to those policies and procedures adopted by the sponsoring institution for the provision of due process to all residents training in sponsored programs and must include the criteria for any adverse action, such as placing a resident on probation, or for terminating a resident whose performance is unsatisfactory. The procedures should be fair to the resident, to patients under care, and to the training program. A copy should be provided to residents at the beginning of training.
   6. On any resident’s departure from a program (including by graduation), the program director must prepare a letter describing the nature and length of the rotations for which the resident has been given credit. If a resident departs the program without receiving full credit for all educational experiences, the reasons for
Program Requirements for Residency Education in Addiction Psychiatry

I. Introduction
   A. Definition of the Subspecialty
      Addiction psychiatry is the psychiatric subspecialty that focuses on the prevention, evaluation, and treatment of substance abuse and dependence as well as related education and research efforts. In addition, the addiction psychiatrist will be fully trained in the techniques required in the treatment of the large group of patients with the dual diagnosis of addictive disorders and other psychiatric disorders. Subspecialty training in addiction psychiatry is a component in the continuum of the educational process in psychiatry, taking place on satisfactory completion of an Accreditation Council for Graduate Medical Education (ACGME)-accredited psychiatry residency.

II. Institutional Organization
   A. The program must be administratively attached to and sponsored by a core residency program in psychiatry that holds full accreditation from the ACGME. Ongoing general psychiatry programs that have been comprehensively reorganized and reaccredited on a provisional basis may be exempted from this requirement. The program must function in close relationship to the psychiatry residency.

   B. The presence of residents in addiction psychiatry must not dilute or otherwise detract from the didactic or clinical experience available to general psychiatry residents. The Residency Review Committee (RRC) shall approve the size of the resident comple-

III. Program Requirements
   1. The addiction psychiatry resident must have satisfactorily completed an ACGME-accredited psychiatry residency prior to entering the program.
   2. Training in addiction psychiatry that occurred during the general residency training will not be credited toward this 1-year requirement.
   3. Training is best accomplished on a full-time basis. If it is undertaken on a part-time basis, the 12-month program must be completed within a 2-year period.
   4. Prior to entry, each addiction psychiatry resident must be notified in writing of the required length of training for which the program is accredited. The required length of training for a particular individual may not be changed without mutual agreement during his or her program unless there is a break in his or her training or the individual requires remedial training.

IV. Educational Goals and Objectives
   1. The program must offer advanced training such that the knowledge, skills, clinical judgment, and attitudes essential to the practice of addiction psychiatry at the consultant level are provided.
   2. Clinical experience must include the opportunity to evaluate and follow a variety of patients of both sexes, including adolescents and adult and geriatric age groups spanning a broad range of diagnoses, as enumerated in program requirements V.A.1.a.d. Residents must provide both primary and consultative care in both inpatient (including intensive care) and outpatient settings for patients whose conditions encompass a wide variety of types of substance abuse. Where the primary site of training is devoted to the care of patients with only a particular form of substance abuse, appropriate affiliations must be arranged to ensure that adequate exposure to a sufficient number and variety of substance-abusing patients is provided.
   3. Programs must be based on a structured written curriculum with well-defined goals and objectives. Clinical, basic science, and research conferences, as well as seminars and critical literature review activities pertaining to substance abuse, must be conducted regularly and as scheduled. The curriculum must include sufficient didactic content so that the graduates will have comprehensive understanding of the pharmacology of all commonly abused substances, as well as the actions of pharmacological agents used to treat these conditions. Clinical experience and didactics should be integrated to provide appropriate progressive learning.
   4. Training must focus on the biopsychosocial and functional concepts of diagnosis and treatment as applied to inpatient, outpatient, and other community settings. Iatrogenic aspects of illness, as well as sociocultural, ethnic, economic, ethical, and legal considerations that may affect or interact with the psychiatric care of these patients, must be included in the program.
   5. The program should present the epidemiology of substance abuse, such as social, cultural, and familial factors affecting the availability and use of addiction substances.
Program Requirements for Residency Education in Addiction Psychiatry

Any permanent changes in resident complement will require prior approval by the RRC.
C. The program must take place in facilities approved by the appropriate state licensing agencies and, where appropriate, by the Joint Commission on the Accreditation of Healthcare Organizations.
D. There shall be a clear educational rationale for the inclusion of each participating institution. The number of and distance between participating institutions shall not impair training and participation in conferences and other organized educational aspects of the program.
E. There must be current, written affiliation agreements between the sponsoring institution of the addiction psychiatry program and each of the participating institutions that conform to institutional requirements I.C.1-5. There should be an additional agreement between the addiction psychiatry program director and the individual responsible for addiction psychiatry education in each participating institution that specifies:
   1. The addiction psychiatry program goals and objectives and the means by which they will be accomplished.
   2. The resources and facilities in the institution(s) that will be available to addiction psychiatry residents.
   3. Information on professional liability insurance, fringe benefits, and vacations.
   4. The duties and responsibilities the addiction psychiatry residents will have in each institution.
   5. The relationship that will exist between addiction psychiatry residents and the residents and faculty in other programs, as appropriate.
   6. The supervision each addiction psychiatry resident will receive from the faculty in each institution.
   7. The provision of due process to all parties in the event of a dispute, disciplinary action, or termination.

III. Faculty and Staff

The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director

There must be a single program director responsible for the program. The program director should be an active clinician and must devote sufficient time to the program to ensure achievement of the educational goals and objectives. The program director should be primarily based at the main program teaching site.

1. Program Director Qualifications

The Program director must be:
   a. Certified by the American Board of Psychiatry and Neurology (ABPN) with Added Qualifications in Addiction Psychiatry or have equivalent qualifications in addiction psychiatry satisfactory to the RRC.
   b. Appropriately qualified by training and experience in psychiatric education and administration to direct and supervise the program.
   c. Licensed to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)
   d. Appointed in good standing to the medical staff of an institution participating in the program.
   e. Participate in scholarly activities appropriate to the subspecialty, such as local, regional, and national specialty societies; research; presentations; and publications.

2. Program Director Responsibilities

The program director will be the person who has primary responsibility for the administration of the program. Frequent changes in leadership or long periods of temporary leadership are undesirable and may adversely affect the accreditation status of the program. The program director shall be responsible for:
   a. Preparing a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.
   b. Supervising the recruitment, selection, and appointment process for applicants, including compliance with appropriate credentialing policies and procedures in accordance with institutional and departmental policies and procedures. The director must receive documentation from the prior general psychiatry program to verify satisfactory completion of all educational and ethical requirements for graduation before appointment to the program.
   c. Ensuring the provision of written descriptions of departmental policies regarding salary and benefits, due process, sickness and other leaves, call responsibilities, and vacation time to all residents on appointment to the program. All residents must be provided with written descriptions of the malpractice coverage provided for each clinical assignment.
   d. Monitoring the progress of each addiction psychiatry resident, including the maintenance of a training record that documents completion of all required components of the program as well as evaluations of residents' clinical and didactic work by supervisors and teachers. This record shall include a patient log for each addiction psychiatry resident, which shall document that each resident has completed all clinical experiences required by the program requirements and the educational objectives of the program.
   e. Supervising residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff.
   f. Regularly evaluating, with participation of members of the teaching staff, the residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician.
   g. Selecting and supervising the teaching staff and other program personnel at each institution participating in the program.
   h. Monitoring the quality of all didactic and clinical experiences, including the collection and review of periodic written confidential evaluations by residents of all such experiences and supervision.
   i. Maintaining all other training records, including those related to appointment; departmental processes regarding due process, sickness, and other leaves; call responsibilities; and vacation time.
   j. Providing a written final evaluation that documents the satisfactory completion of all program requirements for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.
   k. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff
should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.

1. Implementing fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints of grievances.

m. Notifying the RRC promptly of any major changes in the program or its leadership. Participation by any institution providing more than 3 months of training must be approved by the RRC.
   a. Preparing timely, accurate program information forms and related materials in preparation for review by the RRC.
   b. Reporting to the RRC by September 1 of each year the name of each resident in the program.

B. Number and Qualifications of the Physician Faculty

All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.

1. There must be a sufficient number of physician faculty members with documented qualifications to maintain a quality didactic and clinical educational program and to ensure adequate instruction and supervision of all residents in the program. In addition to the program director, there must be at least one other faculty member certified by the ABPN with Added Qualifications in Addiction Psychiatry or its equivalent. Programs with large patient populations, multiple institutions, and large resident complements will be expected to have additional faculty appropriate to their size and structure.

2. These individuals must be additionally qualified by experience in addiction psychiatry to provide the expertise needed to fulfill the didactic, clinical, and research goals of the program.

3. The faculty must devote sufficient time to the educational program in addiction psychiatry to ensure fulfillment of its goals and objectives and to meet their supervisory and teaching responsibilities.

4. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of the teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:
   a. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.
   b. Participation in journal clubs and research conferences.
   c. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations’ meetings and publication in their journals.
   d. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.
   e. Offering of guidance and technical support (eg, research design, statistical analysis) for residents involved in research.
   f. Provision of support for resident participation in scholarly activities.

5. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

6. The director of addiction psychiatry training at each participating institution shall be appointed by or with the concurrence of the addiction psychiatry program director to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

C. Multidisciplinary Team Exposure

Addiction psychiatry residents must be provided with meaningful patient care experiences as part of an interdisciplinary care team. The resident should work in settings that include representatives from clinical disciplines such as social work, psychology, psychiatric nursing, therapeutic activities, pharmacology, and nutrition, as well as clinicians in anesthesia (including pain management), emergency medicine, family practice, geriatrics, internal medicine, neurology, obstetrics-gynecology, surgical specialties, and pediatric/adolescent medicine as appropriate for the care of the patient. In addition, residents should work with others such as substance abuse counselors and, where appropriate, with teachers.

D. Other Program Personnel

Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

IV. Facilities and Resources

All elements of the program must be located in designated facilities based on written affiliation agreements between the participating institutions and the administration of the program.

A. Inpatient Care Facility

The department sponsoring the program must be a part of, or affiliated with, at least one acute-care general hospital with a full range of services, including medical and surgical services, intensive care units, emergency department, diagnostic laboratory, and imaging services. If the acute-care hospital is specialized and does not itself have the full spectrum of services described above, the program must document that it has access for training purposes to other affiliated acute-care facilities that have the services not present at the specialized facility.

B. Partial Hospitalization and Day Treatment Center

Programs must have access to a partial hospitalization or other day-care program. Such programs may be located in community-based institutions or within the sponsoring department of psychiatry in its acute-care hospital. Exposure to self-help and other community programs (such as 12-step programs widely used by substance-abusing patients) must be provided.

C. Ambulatory Care Service

The program must provide experience in a multidisciplinary ambulatory care facility such as a methadone maintenance clinic, an alcohol treatment clinic, or other specialized outpatient program.

D. Library

Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.

1. Library services should include the electronic retrieval of information from medical databases.

2. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

E. Ancillary Support Services

At all participating facilities, there must be appropriate support services to ensure an adequate educational experience. This in-
includes support personnel in all categories and physical resources to ensure that residents have sufficient time and place to carry out their clinical and educational functions.

F. Patient Population

The number and variety of new and follow-up patients spanning the life cycle from adolescence to old age must be sufficient to ensure an adequate outpatient and inpatient experience, as specified in I.C.2 and VA.1.7. The spectrum of patients should include diverse socioeconomic, educational, and cultural backgrounds.

G. Additional Educational Environment

The program must provide opportunities for the residents to render continuing care and to exercise leadership responsibilities in organizing recommendations from the treatment team, including the integration of recommendations from consulting medical specialists and other professionals in allied disciplines.

H. Faculty Supervision

Residents must be supervised in the performance of procedures integral to the specialty of addiction psychiatry. Supervision must include observation, assessment, and substantiation of the residents' knowledge and skills in clinical evaluation, technical proficiency, and professional attitudes. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.

V. Educational Program

The director and teaching staff of a program must prepare and comply with written educational goals for the program. All educational components of a residency program should be related to program goals. The program design and/or structure must be approved by the RRC for Psychiatry as part of the regular review process. The training program must provide opportunities for residents to develop advanced clinical knowledge and skills in the field of addiction psychiatry. These objectives will be accomplished by a combination of supervised clinical experience and formal didactic conferences. The curriculum must ensure the opportunity for residents to achieve the cognitive knowledge, interpersonal skills, professional attitudes, and practical experience required of an addiction psychiatrist providing acute and chronic care for the substance-abusing patient. All major dimensions of the curriculum must be structured educational experiences guided by written goals and objectives as well as by specified teaching and evaluation methods. The goals and objectives of each major component of the curriculum must be provided to the residents in writing on entering the program.

A. Clinical Experiences

The training program must include the following clinical components:

1. Evaluation, consultation, and treatment of
   a. Patients with primary alcohol and/or drug abuse and their families.
   b. Medical and surgical patients in the emergency department, intensive care units, and general wards of the hospital with acute and chronic drug and/or alcohol abuse and dependency, including acute intoxication and overdose.
   c. Psychiatric inpatients and outpatients with chemical dependencies and comorbid psychopathology, to include a broad range of psychiatric diagnoses, such as affective disorders, psychotic disorders, organic disorders, personality disorders, and anxiety disorders, as well as patients suffering from medical conditions commonly associated with substance abuse such as hepatitis and acquired immune deficiency syndrome.
   d. Medication-dependent patients with chronic medical disorders.

2. Exposure to the following substance abuse problems:
   a. Alcohol
   b. Opioids
   c. Cocaine and other stimulants
   d. Marijuana and hallucinogens
   e. Benzodiazepines
   f. Other drugs of abuse, including sedative/hypnotics and nicotine
   g. Miscellaneous/Unusual, eg. khat, nutmeg, designer drugs, organic solvents

3. Resident treatment of a minimum of five addicted outpatients with a variety of diagnoses requiring individual treatment for at least 6 months.

4. Rotations should provide residents with experience in evaluating acute and chronic substance-abusing patients in inpatient and outpatient settings. There should be an identifiable structured educational experience in neuropsychiatry relevant to the practice of addiction psychiatry that includes both didactic and clinical training methods. The curriculum should emphasize functional assessment, signs and symptoms of neuropsychiatric impairment associated with substance abuse, and the identification of physical illnesses and iatrogenic factors that can alter mental status, behavior, and management.

5. The program must provide specific experience in consultation to acute and chronic, medically ill substance-abusing patients being treated on medical, emergency, intensive care, and/or surgical services of a general hospital. Supervision of addiction psychiatry residents in their clinical evaluation of such patients, as well as in their consultative role, is essential. The program should provide residents with the opportunity to function at the level of a specialist consultant to physicians in the primary care specialties and to intensive care specialists.

6. Experience in working with multidisciplinary teams as a consultant and as a team leader.

7. Experience in working with patients who are concurrently participating in self-help programs.

B. Curriculum Content

The field of addiction psychiatry requires knowledge of neurology, pharmacology, psychiatry, general medicine, and psychology, as well as an understanding of the interaction of these disciplines. Programs must include both direct experience in clinical care and formal conferences. Instruction and experience must include the performance of the mental status examination, a neuropsychiatric evaluation instrument such as the Mini-Mental Status examination, community and environmental assessment, family and caregiver assessment, medical assessment, and physical and psychological functional assessments. These skills compose the basis for formal assessment of the addicted patient using a synthesis of clinical findings, historical and current information, and data from laboratory and other special studies. Residents must acquire knowledge and skills in the following areas:

1. Knowledge of the signs and symptoms of the use and abuse of all of the major categories of drugs enumerated in VA.2.a-g., as well as knowledge of the types of treatment required for each.
2. Knowledge of the signs of withdrawal from these major categories of drugs and knowledge and experience with the range of options for treatment of the withdrawal syndromes and the complications commonly associated with such withdrawal.
3. Knowledge of the signs and symptoms of overdose, the medical and psychiatric sequelae of overdose, and experience in providing proper treatment of overdose.
4. Management of detoxification and acute hospital treatment of the chronic user of the major categories of drugs. Experience in working collaboratively with specialists in the emergency depart-
ment and intensive care units in the diagnosis and management of acute overdose symptoms.
5. Knowledge of the signs and symptoms of the social and psychological problems as well as the medical and psychiatric disorders that often accompany the chronic use and abuse of the major categories of drugs.
6. Experience in the use of psychoactive medications in the treatment of psychiatric disorders often accompanying the major categories of substance abuse.
7. Experience in the use of elective techniques required for confrontation of and intervention with a chronic drug abuser and for dealing with the defense mechanisms that cause the patient to resist entry into treatment.
8. Experience in the use of the various psychotherapeutic modalities involved in the ongoing management of the chronic drug-abusing patient, including individual psychotherapies, couples therapy, family therapy, cognitive-behavioral therapy, and group therapy.
9. Experience in working collaboratively with other mental health providers and allied health professionals, including nurses, social workers, psychologists, nurse practitioners, counselors, pharmacists, and others who participate in the care of substance-abusing patients.
10. Knowledge and understanding of the special problems of the pregnant drug abuser and of the babies born to substance-abusing mothers.
11. Knowledge of family systems and dynamics relevant to the etiology, diagnosis, and treatment of substance abuse disorders.
13. Familiarity with the major medical journals and professional scientific organizations dealing with research on the understanding and treatment of substance abuse.
14. Critical analysis of research reports, as presented in journal clubs and seminars.
15. Experience in teaching and supervising student clinicians in the care of substance-abusing patients.
16. Understanding of the current economic aspects of providing psychiatric and other health-care services to the addicted patient.
17. Knowledge of quality assurance measures and cost effectiveness of various treatment modalities for substance-abusing patients.

C. Conferences
Conferences in addiction psychiatry, such as grand rounds, case conferences, reading seminars, and journal club, should be specifically designed to complement the clinical experiences. Regular attendance by residents and faculty should be documented.

D. Policies Regarding Residents, Supervision, and Participation
1. The program director must ensure, direct, and document proper supervision of all addiction psychiatry residents at all times by appropriately qualified faculty. The responsibility and independence allowed residents in patient contact should depend on their knowledge, skill, experience, and the complexity of the clinical problem. Residents must be provided with rapid, reliable methods for communicating with supervising physicians. Each resident must have a minimum of 2 hours of individual supervision of clinical activities weekly.
2. The program should carefully monitor and document any clinical activity outside the program that could potentially interfere with educational performance or clinical responsibility. The program must carefully monitor all on-call schedules and hours within the program to ensure a balanced and appropriate educational and clinical experience. This monitoring should ensure a. one full day out of 7 free of program-related duties.
3. On average, on-call duty no more than every third night.
4. Adequate backup if patient care needs create resident fatigue sufficient to jeopardize patient care or resident welfare during or following on-call periods.
5. Adequate faculty backup if residents encounter complex clinical situations while on call.
6. At all program facilities, residents must be afforded responsibilities commensurate with their postgraduate status and experience level in the provision of patient care.

E. Other Program Components
1. Scholarly Activity
Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility. As part of the academic environment, an active scholarly component must be included within the addiction psychiatry program. Faculty members should participate actively in basic, clinical, and/or health services research.

The program should provide each resident with a meaningful, individually supervised opportunity to participate in research or scholarly activity.

2. Presence of Other Training Programs
The addiction psychiatry program should provide peer interaction between its residents and those of other medical specialties. To achieve this goal, an ACGME-accredited training program in at least one nonpsychiatric specialty should be present within the participating institutions of the program, such as neurology, internal medicine, or family practice. Peer interaction among the programs should occur in the course of clinical and/or didactic work, but is most satisfactory when organized around joint patient evaluation and/or care.

3. Resident Teaching Experiences
The program should provide appropriate experience designed to develop the administrative and teaching skills of the addiction psychiatry residents. As the residents progress through the program, they should have the opportunity to teach personnel such as other residents, medical students, nurses, and other allied health professionals.

VI. Evaluation
A. Evaluation of Residents
There must be at least quarterly written evaluations of the residents by all supervisors and the directors of clinical components of training. These must be discussed with the residents and placed in the training record. The program director shall:
1. At least semianually evaluate the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures.
2. Communicate each evaluation to the resident in a timely manner.
3. Advise residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.
4. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.

B. Faculty Evaluation
There must be in place a mechanism for the written confidential evaluation of all supervisors by addiction psychiatry residents, as well as of the didactic and clinical elements of the educational program.
C. Program Evaluation

1. The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

2. Written evaluations by residents should be utilized in this process.

3. One measure of the quality of the program will be participation in and performance of its graduates on the Added Qualifications certifying examination conducted by the ABPN.

VII. Certification

Those individuals planning to seek Added Qualifications certification through the ABPN should communicate with the administrative officer of the ABPN prior to beginning training to ascertain its requirements.

ACGME: September 1994 Effective: July 1995

Program Requirements for Residency Education in Child and Adolescent Psychiatry

I. Introduction

Scope of Training

Child and adolescent psychiatry is a specialty of medical practice within psychiatry. The goal of residency training in child and adolescent psychiatry is to produce specialists in the delivery of skilled and comprehensive medical care of children and adolescents suffering from psychiatric disorders. The child and adolescent psychiatrist must have a thorough understanding of the development and prevention of psychopathology as it appears from infancy through adulthood. He or she should also have the skills to serve as an effective consultant to primary care physicians and to community agencies and institutions serving children and adolescents.

Approved residencies in child and adolescent psychiatry must offer well-supervised and well-balanced clinical experiences with inpatients, outpatients, and consultees and must also provide a formal educational experience. The residency must provide a combination of didactic and clinical work that is both broad enough to ensure knowledge of the full spectrum of disorders of childhood and adolescence and yet intensive enough to ensure thorough diagnostic, treatment, and consultative skills. Diagnostic and therapeutic experiences must be provided in sufficient numbers and depth with preschool, grade school, and adolescent patients of both sexes and their families for the resident to understand the disorders and situations studied.

II. Program Length and Prerequisites

A. In addition to the postgraduate first year and a minimum of 2 years of accredited training in general psychiatry, 2 years’ training in an Accreditation Council for Graduate Medical Education-accredited child and adolescent psychiatry program is required.

B. To achieve greater flexibility in the sequence of residency training and to assist in recruitment, the 2-year child and adolescent psychiatry training experience may be initiated at any point beyond the PGY-1 level in the psychiatry residency sequence. Training is best done full-time, and it must be done in no more than two blocks. If done in two blocks, the blocks must not be more than 5 years apart, and the shorter block must not be less than 6 months long. At the discretion of the program director, 1 year of training credit may be given for 2 years at half-time; 2 years of training credit may be given for 3 years at two-thirds time or 4 years at half-time.

C. In general, training in child and adolescent psychiatry obtained as part of the curriculum for general psychiatry training may not count toward residency training in child and adolescent psychiatry. However, certain clinical experiences, including but not limited to pediatric neurology, forensic consultation, and pediatric consultation/liaison, may be designed to fulfill the special requirements in general psychiatry and child and adolescent psychiatry if approved by both program directors. The program director must document areas for which credit is given in both programs. These experiences may not be used to reduce the total length of time devoted to training in either general or child and adolescent psychiatry.

D. Prior to entry into the program, each resident must be notified in writing of the required length of training for which the program is accredited. The required length of training for a particular resident may not be changed during his or her program without mutual agreement, unless there is an interruption in his or her training or the resident requires remedial training.

II. Institutional Organization

A. Institutional Support

The administration of the sponsoring institution(s) should understand the educational goals and should evidence its willingness and ability to support these goals philosophically and financially.

B. Affiliation Agreements

1. In programs where more than one clinical site is used for the training of residents, there must be affiliation agreements between the sponsor of the child and adolescent psychiatry residency and each participating institution that conform to institutional requirements I.C.1-5.

2. In addition, each training program accredited for child and adolescent psychiatry must have a formal educational affiliation agreement with a psychiatry residency program that is accredited for at least 3 years of training. The written agreement of such affiliation must be signed by the residency directors of both programs, and copies must be filed with the Residency Review Committee (RRC).

C. Participating Institutions

It is important that each affiliated institution offer significant educational opportunities to the overall program. The number and distribution of participating training sites must not preclude satisfactory participation by residents in teaching and training exercises. Geographic proximity will be one factor in evaluating program cohesion, continuity, and "critical mass." Affiliated training sites will be evaluated on the basis of whether they contribute to a well-integrated educational program with respect to both didactic and clinical experiences.

D. Appointment of Residents

1. The program should document the procedures used to select residents in accordance with institutional and departmental policies and procedures. Application records should document information from graduate medical education programs. A documented procedure should be in place for checking the credentials, the clinical training experiences, and the past performance and pro-
Program Requirements for Residency Education in Child and Adolescent Psychiatry

I. Professional integrity of residents transferring from one program to another, including from an adult to a child and adolescent psychiatry program. This procedure must include solicitation and documentation of relevant information from the training directors of the previous programs participated in by the transferring resident.

II. The residency program director must accept only those applicants whose qualifications for residency include sufficient command of English to permit accurate, unimpeded communication.

III. A program must have at least two residents in each of the 2 years of training. Peer interaction and the need for group discussion in seminars and conferences are crucial.

IV. The number of residents from other graduate medical education programs and mental health disciplines who participate in the child and adolescent psychiatry educational curriculum should not be so large as to compromise the educational resources of the child and adolescent psychiatry residency.

III. Faculty Qualifications and Responsibilities

There must be a single program director responsible for the program. The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director Qualifications

1. Qualifications of the program director include:

   a. The residency program in child and adolescent psychiatry must be under the direction of a fully trained child and adolescent psychiatrist with documented clinical, educational, and administrative abilities and experience, who is certified in child and adolescent psychiatry by the American Board of Psychiatry and Neurology (ABPN) or who possesses suitable equivalent qualifications as determined by the RRC.

   b. The program director must be licensed to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)

   c. The program director must be appointed to and in good standing with the medical staff of an institution participating in the program.

2. Responsibilities of the Program Director

   The program director is responsible for selecting residents, planning the curriculum, evaluating individual resident progress, and maintaining records of these endeavors. The program director shall provide residents with the goals of training, their responsibilities, and the evaluation procedures. Responsibilities of the program director include:

   a. Devote at least half-time to the training program, including teaching activities.

   b. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to all applicants, residents, and members of the teaching staff. It should be readily available for review.

   c. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.

   d. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program in consultation with the chair or division head.

   e. The supervision of residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff.

   f. Regular evaluation, with participation of members of the teaching staff, of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician as specified in Section VI.

   g. The provision of a written final evaluation for each resident who completes the program and maintenance of a permanent record of evaluation for each resident that is accessible to the resident and other authorized personnel.

   h. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.

   i. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.

   j. Evaluation of faculty teaching and supervision in writing.

   k. The program director is responsible for providing applicants with written descriptions of the clinical rotations and educational program. Written information must be provided regarding financial compensation, liability coverage, and the policies regarding vacations, sick leave, and family leave, as well as other special leaves.

   l. Preparation of an accurate statistical and narrative description of the program as requested by the RRC for Psychiatry.

   m. Notification requirements—the program leadership is responsible for notifying the executive secretary of the RRC within 30 days in writing of any major change in the program that may significantly alter the educational experience for the residents, including:

      1. Changes in leadership of the department or the program.

      2. Changes in administrative structure, such as an alteration in the status of the program department within the institution.

      3. Any year there is a reduction in the critical mass of residents below two for each year of training.

      4. A reduction in the number of faculty below three full-time equivalent positions in more than 1 year.

   n. Prior approval requirements—the program director must obtain prior approval for the following changes in the RRC program to determine if an adequate educational environment exists to support these changes and if the program's clinical and academic resources are adequate to support these changes:

      1. The addition or deletion of any training site to which residents are assigned half-time or more for 6 months or longer for the full-time equivalent of at least 3 months.

      2. Any increase in the approved resident complement of the program.

B. Number and Qualifications of the Faculty

1. The residency must be staffed by an appropriate number of capable, qualified psychiatrists and other mental health professionals with sufficient breadth and depth of documented qualifications to instruct and supervise adequately all the residents in the program. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities. The faculty must include a total of at least three full-time equivalent, fully trained child and adolescent psychiatrists who devote substantial time to the residency program.
2. The psychiatric faculty should be certified by the ABPN or have equivalent qualifications in psychiatry satisfactory to or determined by the RRC for Psychiatry.

3. Psychiatric faculty must participate regularly and systematically in the training program. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.

4. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

5. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

C. Other Program Personnel

Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

IV. Facilities and Resources

A. Training programs must have adequate facilities and affiliations to meet the educational objectives of the program. Adequate office space with readily accessible play materials must be available for each resident to see patients.

B. Special space for physical and neurological examinations, as well as the appropriate medical equipment, must be readily available in the training facility.

C. There must be adequate space and equipment specifically designated for seminars, lectures, and other educational activities. The program must have available such basic teaching aids as one-way mirrors and audiostreaming equipment.

D. The sponsoring institution must provide residents with ready access to a library that contains a substantial number of current basic textbooks and major journals in psychiatry, child and adolescent psychiatry, neurololgic pediatrics, and general medicine, sufficient for an excellent educational program. The library must be capable of obtaining textbooks and journals on loan from major medical libraries and of carrying out MEDLINE and other medical information searches (or accessing a library that has this capacity), and it must be reasonably available to residents on weekends and during evening hours.

V. Educational Program

A. Goals

The director and teaching staff of a program must prepare and comply with written educational goals for the program. All educational components of a residency program should be related to program goals. There must be sufficient, stable leadership, faculty, clinical facilities, and affiliations to provide a consistent educational experience. The program design and/or structure must be approved by the RRC as part of the regular review process.

B. Curriculum

An approved program must have an explicitly described and distributed educational curriculum composed of formal didactic instruction and a program of graduated learning and supervised experience through the 2 years. The latter is to be marked by graduated and increased clinical responsibility for the diagnosis and treatment of preschool and grade-school children, adolescents, and their families.

Educational quality must have the highest priority in the allotment of residents' time and energy. The clinical responsibilities of residents must not infringe unduly on didactic activities.

C. Clinical Experience

1. Each resident must have responsibility for the evaluation and treatment of a sufficient number and adequate variety of patients representing the full spectrum of psychiatric illnesses in children and adolescents. The number of patients for which residents have primary responsibility at any one time must permit them to provide each patient with appropriate treatment and to have sufficient time for other aspects of their educational program. The depth and variety of clinical experiences must be adequate.

2. Clinical records, recorded by the child and adolescent psychiatry residents, should document an adequate individual and family history, mental status, physical and neurological examinations when appropriate, supplementary medical and psychological data, and integration of these data into a formulation, differential diagnosis, and comprehensive treatment plan.

3. Opportunities for the development of both conceptual understanding of and clinical skills in the major types of therapy with children and adolescents, including short- and long-term individual psychotherapy, psychodynamic psychotherapy, family therapy, crisis intervention, and pharmacological therapies, must be provided. There must be opportunities for residents to be involved in providing continuing care for a variety of patients from different age groups, seen regularly and frequently for an extended time, in a variety of treatment modalities. Residents should have some experience with continuity of patient care across clinical programs providing different levels of care. Work with outpatients must include work with some child and adolescent patients for at least a year's duration.

4. Residents must receive training so that they have an opportunity to evaluate and to treat patients from various cultural backgrounds and socioeconomic levels.

5. Training must include supervised, active collaboration with other professional mental health personnel (i.e., psychologists, psychiatric nurses, social workers) in the evaluation and treatment of patients.

6. There must be teaching about the appropriate uses and limitations of psychological tests. Residents should have the opportunity to observe some of their patients being tested.

7. There must be teaching and clinical experience in pediatric neurology, mental retardation, and other developmental disorders.

8. Residents should have experiences in the management of psychiatric emergencies and acute disturbances in children and adolescents.

9. Experience with 24-hour responsibility in working with acutely and severely disturbed children or young adolescents is an essential part of training. This experience must occur in settings with an organized treatment program, such as inpatient units, residential treatment facilities, partial hospitalization programs, and/or day treatment programs. This experience must be the full-time equivalent of not less than 4 nor more than 10 months.

10. Residents must have experience as consultants in situations in which they do not primarily engage in treatment but use their specialized knowledge and skills to assist others to function better in their roles. Training and experience in consultation to facilities serving children, adolescents, and their families should include:

   a. Supervised consultation experience with an adequate number of pediatric patients in outpatient and/or inpatient medical facilities.
b. Supervised formal observation and/or consultation experiences in schools

c. Training and experience in legal issues relevant to child and adolescent psychiatry, including forensic consultation experience and court testimony

11. Administrative experiences, in which residents function in positions of leadership, are essential.

D. Didactic Curriculum

Didactic instruction must be well organized, thoughtfully integrated, based on sound educational principles, and carried out on a regularly scheduled basis. Systematically organized formal instruction (prepared lectures, seminars, assigned reading, etc) must be integral to the residency. Staff meetings, clinical case conferences, journal clubs, and lectures by visitors are desirable adjuncts, but must not be used as substitutes for an organized didactic curriculum.

1. Emphasis on developmental considerations is the hallmark of training in child and adolescent psychiatry. The teaching of developmental knowledge and the integration of biopsychosocial data into a comprehensive formulation of clinical problems are essential. Teaching about normal development should include observation of and interaction with normal children.

2. The didactic and clinical curriculum must be of sufficient breadth and depth to provide residents with a thorough and well-balanced presentation of the generally accepted theories; schools of thought; and major diagnostic, therapeutic, and preventive procedures in the field of child and adolescent psychiatry.

3. The curriculum must include adequate and systematic instruction in basic biological, psychological, and clinical sciences relevant to psychiatry; in psychodynamic theory; and in the application of developmental psychological theories relevant to the understanding of psychopathology. It must provide teaching about the full gamut of psychopathology in children and adolescents, including the etiologies, epidemiology, diagnosis, treatment, and prevention of all of the psychiatric conditions that affect children and adolescents.

4. There must be teaching in ethical aspects of child and adolescent psychiatric practice.

5. The opportunity for residents to be involved in research must be available.

6. The curriculum must include an adequate number of interdisciplinary clinical conferences and didactic seminars for residents, in which faculty psychiatrists collaborate in teaching with colleagues from other medical specialties and mental health disciplines.

E. Other Required Components

1. Scholarly Activity

Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:

a. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.

b. Participation in journal clubs and research conferences.

c. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.

d. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.

e. Offering of guidance and technical support (e.g., research design, statistical analysis) for residents involved in research.

f. Provision of support for resident participation in scholarly activities.

2. Teaching Opportunities

Opportunities for residents to teach community groups, medical students, and/or other residents should be available.

F. Resident Policies

1. Supervision

Each resident must have at least 2 hours of individual supervision weekly, in addition to teaching conferences and rounds. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.

2. Duty Hours

The program should carefully monitor any professional activity outside the residency and ensure that it does not interfere with education, performance, or clinical responsibility. The program should carefully monitor all on-call schedules and hours within and outside residency to prevent undue interference with education, performance, or clinical responsibility. The monitoring should ensure:

a. On average, 1 full day out of 7 free of program duties.

b. On average, on-call duty no more than every third night.

c. Adequate backup if patient care needs create resident fatigue sufficient to jeopardize patient care or resident welfare during or following on-call periods.

VI. Internal Evaluation

The program will maintain records of all evaluations required in this section and these will be made available on review of program.

A. Evaluation of Residents

1. The program must provide opportunity for and document regularly scheduled meetings between the resident and the program director or designated faculty members. These meetings should be of sufficient frequency, length, and depth to ensure that the residents are continually aware of the quality of their progress toward attainment of program goals. At least semiannually, the program director must evaluate the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures. Provision should be made for remediation in cases of unsatisfactory performance.

2. Each evaluation must be communicated to the resident in a timely manner.

3. Residents must be advanced to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.

4. In addition to periodic assessments, an annual evaluation procedure is required that must include a written examination of the knowledge base as well as a formal documented clinical skills examination.

5. Evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. At the time of the resident's graduation, the program director will affirm in the training record that there is no documented evidence of unethical behavior, unprofessional behavior, or clinical incompetence. Where there
is such evidence, it must be comprehensively recorded, along with the responses of the resident. This final evaluation should be part of the resident's permanent record maintained by the institution.
6. A written set of due-process procedures must be in place for resolving problems that occur if a resident's performance fails to meet required standards. These must include the criteria for any adverse action, such as placing a resident on probation, or for terminating a resident whose performance is unsatisfactory. The procedures should be fair to the resident, patients under care, and the training program. A copy should be provided to the residents at the beginning of training.

B. Faculty Evaluation
The program director is responsible for the evaluation of faculty teaching and supervision, which must include an annual written assessment of faculty members by the residents.

C. Program Evaluation
The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Written evaluations by residents should be utilized in this process. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

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Program Requirements for Residency Education in Geriatric Psychiatry

I. Introduction

A. Definition of the Subspecialty
Geriatric psychiatry is that area of psychiatry that focuses on prevention, diagnosis, evaluation, and treatment of mental disorders and disturbances in older adult patients. An educational program in geriatric psychiatry must be organized to provide professional knowledge and a well-supervised clinical experience.

B. Duration and Scope of Education
1. The training period in geriatric psychiatry must be 12 months. Any program that extends the length of the program beyond 12 months must present an educational rationale consistent with the program requirements and the objectives for resident education.
2. The geriatric psychiatry resident must have satisfactorily completed an Accreditation Council for Graduate Medical Education (ACGME)-accredited psychiatry residency program prior to entering the program.
3. Training in geriatric psychiatry that occurred during general residency training will not be counted toward meeting this requirement.
4. Training is best accomplished on a full-time basis. If it is undertaken on a part-time basis, the 12-month program must be completed within a 2-year period.
5. Prior to entry into the program, each geriatric psychiatry resident must be notified in writing of the required length of training for which the program is accredited. The required length of training for a particular individual may not be changed without mutual agreement during his or her program unless there is a break in his or her training or the individual requires remedial training.

C. Educational Goals and Objectives
1. Geriatric psychiatry programs must provide advanced training for the resident to function as a consultant in the subspecialty. Programs must emphasize scholarship, self-instruction, development of critical analysis of clinical problems, and the ability to make appropriate decisions.
2. Clinical experience must include opportunities to assess and manage elderly inpatients and ambulatory patients of both sexes with a wide variety of psychiatric problems. Geriatric psychiatry residents must be given the opportunity to provide both primary and consultative care for patients in both inpatient and outpatient settings to understand the interaction of normal aging and disease as well as to gain mastery in assessment, therapy, and management.
3. The program must include training in the biological and psychosocial aspects of normal aging, the psychiatric impact of acute and chronic physical illnesses, and the biological and psychosocial aspects of the pathology of primary psychiatric disturbances beginning in or continuing into older age.
4. There must be a focus on multidimensional biopsychosocial concepts of treatment and management as applied both in inpatient facilities (acute and long-term care) and in the community or home settings. There must also be emphasis on the medical and iatrogenic aspects of illness as well as on sociocultural, ethnic, economic, ethical, and legal considerations that may affect psychiatric management.

II. Institutional Organization
A. The program must be administratively attached to and sponsored by a core residency program in psychiatry that holds full accreditation from the ACGME. Ongoing general psychiatry programs that have been comprehensively reorganized and reaccredited on a provisional basis may be exempted from this requirement. The program must function as an integral part of the psychiatry residency.
B. The presence of residents in geriatric psychiatry must not dilute or otherwise detract from the didactic or clinical experience available to general psychiatry residents. The Residency Review Committee (RRC) shall approve the size of the geriatric psychiatry resident complement. Any changes in this complement will require prior approval by the RRC.
C. The training program must take place in facilities that are approved by the appropriate state licensing agencies and, where appropriate, by the Joint Commission on the Accreditation of Healthcare Organizations.
D. There shall be a clear educational rationale for the inclusion of each participating institution.
E. There must be current, written affiliation agreements between the sponsoring institution of the geriatric psychiatry program and each of its participating institutions. These agreements must comply with institutional requirements Section 1.C.1-5. There should be an additional agreement between the geriatric psychiatry program director and the individual responsible for geriatric psychiatry education in each participating institution that specifies:
1. The geriatric psychiatry program goals and objectives for each rotation in the participating institution and the means by which they will be accomplished.
2. The resources and facilities in the institution(s) that will be available to each geriatric psychiatry resident.
3. Information on professional liability insurance, fringe benefits, and vacations, to be provided by each institution.
4. The duties and responsibilities the geriatric psychiatry resident will have in each institution.
5. The relationship that will exist between geriatric psychiatry residents and the residents and faculties in other programs, as appropriate.
6. The supervision each geriatric psychiatry resident will receive by the faculty in each institution.

III. Faculty and Staff
The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director
There must be a single program director responsible for the program. The program director should be an active clinician and must devote sufficient time to the program to ensure achievement of the educational goals and objectives. The program director should be primarily based at the main program teaching site.

1. Qualifications of the Program Director
   a. Certified by the American Board of Psychiatry and Neurology (ABPN) with added Qualifications in Geriatric Psychiatry or have equivalent qualifications in geriatric psychiatry
   b. Appropriately qualified by training and experience in psychiatric education and administration to direct and supervise the program
   c. Licensed to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)
   d. Appointed in good standing to the medical staff of an institution participating in the program
   e. Participate in scholarly activities appropriate to the profession, such as local, regional, and national specialty societies; research; presentations; and publications.

2. Program Director Responsibilities
The program director will be the person who has primary responsibility for the administration of the program. The program director shall be responsible for:
   a. Preparing a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.
   b. Supervising the recruitment and appointment process for applicants, including compliance with appropriate credentialing policies and procedures in accordance with institutional and departmental policies and procedures. No applicant who has completed a general psychiatry residency in another program shall be appointed without written communication from the prior program director that verifies satisfactory completion of all educational and ethical requirements for graduation.
   c. Monitoring the progress of each geriatric psychiatry resident, including the maintenance of a training record that documents completion of all required components of the program as well as the evaluations of performance by supervisors and teachers. This record shall include a patient log for each geriatric psychiatry resident that shall document that each resident has completed all clinical experiences required by the program requirements and the educational objectives of the program.
   d. Supervising residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff.
   e. Regularly evaluating, with the participation of members of the teaching staff, the residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician.
   f. Selecting and supervising the teaching staff and other program personnel at each institution participating in the program.
   g. Monitoring the quality of all didactic and clinical experiences, including the collection and review of periodic written evaluation by the resident of all such experiences and supervision.
   h. Maintaining all other training records, including those related to appointment, the departmental processes regarding due process, sickness and other leaves, call responsibilities, and vacation time.
   i. Providing to each geriatric psychiatry resident the written goals and objectives for each component of the program at the beginning of that aspect of training.
   j. Ensuring that residents are provided written descriptions of the departmental policies regarding due process, sickness and other leaves, call responsibilities, and vacation time on appointment to the program. All residents must be provided with written descriptions of the professional liability coverage provided for each clinical assignment.
   k. Providing a written final evaluation that documents the satisfactory completion of all program requirements for each resident who completes the program. The evaluation must include a review of the resident’s performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident’s permanent record maintained by the institution.
   l. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.
   m. Implementing fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.
   n. Notifying the RRC promptly of any major changes in the program or its leadership. Participation by any institution providing more than 3 months of training must be approved by the RRC.
   o. Preparing timely, accurate program information forms and related materials in preparation for review by the RRC.
   p. Reporting to the RRC by September of each year the name of each geriatric psychiatry resident in the program.

B. Number and Qualifications of the Physician Faculty
All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.

1. There must be a sufficient number of qualified physician faculty members with documented qualifications to maintain a quality didactic and clinical educational program and to ensure the adequate instruction and supervision of all residents in the program. In addition to the program director, there must be at least one
Program Requirements for Residency Education in Geriatric Psychiatry

- other faculty member who is certified by the ABPN with Added Qualifications in Geriatric Psychiatry (or its equivalent).

2. These individuals must be additionally qualified by experience in geriatric psychiatry to provide the expertise needed to fulfill the didactic, clinical, and research goals of the program.

3. The faculty must devote sufficient time to the educational program in geriatric psychiatry to ensure fulfillment of its goals and objectives and to meet their supervisory and teaching responsibilities.

4. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:
   a. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.
   b. Participation in journal clubs and research conferences.
   c. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations’ meetings and publication in their journals.
   d. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.
   e. Offering of guidance and technical support (eg, research design, statistical analysis) for residents involved in research.
   f. Provision of support for resident participation in scholarly activities.

5. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

6. The director of geriatric training at each participating institution shall be appointed by or with the concurrence of the geriatric psychiatry program director to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

C. Geriatric Care Team
Geriatric psychiatry residents must be provided with meaningful patient care experiences as part of an interdisciplinary care team.

1. In addition to geriatric psychiatry, the geriatric care team should include representatives from related clinical disciplines such as psychology, social work, psychiatric nursing, activity or occupational therapy, physical therapy, pharmacology and nutrition.

2. A variety of individuals representing disciplines within medicine, such as family practice and internal medicine (including their geriatric subspecialties), neurology, and physical medicine and rehabilitation, should be available for participation on the geriatric care team as needed for patient care and teaching purposes.

3. It is highly desirable that geriatric psychiatry residents have access to professionals representing allied disciplines (such as ethics, law, and pastoral care) as needed for patient care and teaching purposes.

4. Geriatric psychiatry residents should be provided with opportunities to participate as members of medical geriatric teams in institutions where such teams are present.

D. Other Program Personnel
Program must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

IV. Facilities and Resources

A. Acute-Care Hospital
The psychiatry department sponsoring the program must be a part of or affiliated with at least one acute-care general hospital that has the full range of services usually ascribed to such a facility, including both medical and surgical services, intensive care units, emergency department, diagnostic laboratory and imaging services, and pathology department. If the acute-care hospital is specialized (eg, in geriatric or psychiatric care) and does not itself have the full spectrum of services described above, the program must document that it has access for training purposes to other affiliated acute-care facilities that have the remaining general services not present at the specialized facility.

B. Long-Term-Care Facility
Inclusion of at least one long-term-care facility is an essential component of the geriatric psychiatry program. Such facilities may be either discrete institutions separate from an acute-care hospital or formally designated units or services within an acute-care hospital. Suitable training sites include both nonpsychiatric facilities (such as a nursing facility or chronic care hospital) and psychiatric facilities.

C. Ambulatory-Care Service
The ambulatory-care service must be designed to render care in a multidisciplinary environment such as a geriatric clinic, psychiatric outpatient department, or community mental health center where nonpsychiatric medical specialists are also available.

D. Ancillary Support Services
At all participating facilities, there must be sufficient administrative support to ensure adequate teaching facilities, appropriate office space, support personnel, and teaching resources.

E. Library
Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.

1. Library services should include the electronic retrieval of information from medical databases.

2. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

F. Patient Population
There must be sufficient number and variety of patients in all institutions where training takes place to accomplish the educational goals. This should include not only the spectrum of psychiatric diagnoses but also experience with a diversity of patients by sex, socioeconomic, educational, and cultural backgrounds.

G. Additional Educational Environment
The program must provide opportunities for the geriatric psychiatry resident to render continuing care and to exercise leadership responsibilities in organizing recommendations from the mental health team and in integrating recommendations and input from primary care physicians, consulting medical specialists, and representatives of other allied disciplines.

V. Educational Program
The director and teaching staff of a program must prepare and comply with written educational goals for the program. All educational components of a residency program should be related to program goals. The program design and/or structure must be approved by the RRC for Psychiatry as part of the regular review process. The
training program must provide opportunities for the residents to develop advanced clinical knowledge and skills in the overall field of geriatric psychiatry. These objectives will be accomplished by a combination of supervised clinical experiences and formal didactic conferences.

The curriculum must ensure the opportunity for geriatric psychiatry residents to achieve the cognitive knowledge, interpersonal skills, professional attitudes, and practical experience required of a geriatric psychiatrist in the care of the aged. Didactic as well as clinical learning opportunities must be available to the resident. All major dimensions of the curriculum must be structured educational experiences that are guided by written goals and objectives as well as by specified teaching and evaluation methods. The goals and objectives of each major component of the curriculum should be provided to the residents in writing on entering the program.

A. Clinical Experiences

The training program must include the following clinical components:

1. Geriatric Psychiatry Consultation Experience

Attaining skills as a consultant is an essential part of training. Consultation experiences should be formally available on the nonpsychiatric services of an acute-care hospital. They should include consultation to inpatient, outpatient, and emergency services. There should also be consultative experience in long-term-care facilities. Familiarity with the organizational and administrative aspects of home health-care services should be provided. Exposure to outreach services and crisis intervention services in both community and home settings should be provided.

2. Long-Term-Care Experience

All geriatric psychiatry residents should have the opportunity to follow and treat a sufficient number of long-term-care patients at a senior level of responsibility. This experience should be of sufficient duration for the resident to understand the problems and learn the skills associated with long-term management and treatment. Emphasis during this experience should be placed on approaches to consultation, diagnosis, and treatment of the acutely and chronically ill elderly in a diversity of care settings, both medical and psychiatric, including those with less technologically sophisticated environments. Training should include instruction on the use of group and activity therapies; on the psychosocial impact of institutionalization; on teaching nonmelancholic health professionals about mental health in the aged; on the bioethical dilemmas encountered when treating illness in the very old; and on working within facilities that may have limitations, such as a decreased staff-patient ratio.

3. Other Medical Specialty Experience

There should be an identifiable, structured educational experience in neurology, physical medicine and rehabilitation, and geriatric medicine or geriatric family practice relative to the practice of psychiatry that includes both didactic and clinical training methods. The curriculum should address functional assessment, altered signs and symptoms of physical illness that occur in the elderly, and the identification of physical illnesses and iatrogenic factors that can alter mental status and behavior.

B. Specialty Content

The program curriculum must address, as a minimum, the following content and skill areas:

1. The current scientific understanding of aging and longevity, including theories of aging, epidemiology and natural history of aging, and diseases of the aged. This includes specific knowledge of the effects of biologic aging on human physiology, with emphasis on altered pharmacokinetics, pharmacodynamics, and senescent acuity in the elderly and on the differences and gradations between normal and abnormal age changes, with particular reference to such areas as memory and cognition, affective stability, personality and behavioral patterns, and sexuality. There must be an understanding of successful and maladaptive responses to stressors frequently encountered in older adults, such as retirement, widowhood, role changes, interpersonal and health status losses, financial reverses, environmental relocations, and increased dependency.

2. The relevance of cultural and ethnic differences and the special problems of disadvantaged minority groups, as these bear on distinguishing and treating abnormal and maladaptive clinical changes as well as the use of psychosocial support services.

3. The epidemiology, diagnosis, and treatment of all major psychiatric disorders seen in the elderly. Such disorders, seen alone and in combination, typically include but are not limited to affective disorders, dementia, delirium, late-onset psychoses, medical presentations of psychiatric disorders, iatrogenesis, adjustment disorders, anxiety disorders, sleep disorders, sexual disorders, substance abuse disorders, personality disorders, and continuation of psychiatric illnesses that began earlier in life.

4. The performance of mental status examination, community and environmental assessment, family and caregiver assessment, medical assessment, and physical functional assessment. Such skills form the basis for formal multidimensional geriatric assessment, using the appropriate synthesis of clinical findings and historical as well as current information acquired from the patient and/or relevant others (such as family members, caregivers, and other health-care professionals). The multidimensional assessment is essential to short-term and long-term diagnostic and treatment planning as such, training must be provided in formulating the various assessments into an appropriate and coherent treatment plan.

5. The formal and informal administrative leadership of the mental health-care team, including skills in communicating treatment plans to the patient and the family.

6. The selection and use of clinical laboratory tests; radiologic and other imaging procedures; and polysomnographic, electrophysiologic, and neuropsychologic tests, as well as making appropriate referrals to and consultations with other health-care specialists.

7. The initiation and flexible guidance of treatment, with the need for ongoing monitoring of changes in mental and physical health status and medical regimen. Residents should be taught to recognize and manage psychiatric comorbid disorders (eg, dementia and depression), as well as the management of other disturbances often seen in the elderly, such as agitation, wandering, changes in sleep patterns, and aggressiveness.

8. The recognition of the stressful impact of psychiatric illness on caregivers. Attention should be placed on the appropriate guidance of and protection of caregivers, as well as the assessment of their ability to function.

9. Recognition and assessment of direct or indirect elder abuse.

10. The appropriate use of community or home health services, despite care, and the need for institutional long-term care.

11. The management of the care of elderly persons with emotional or behavioral disorders, including the awareness of appropriate modifications in techniques and goals in applying the various psychotherapies (with individual, group, and family focuses) and behavioral strategies.

12. The indications, side effects, and therapeutic limitations of psychoactive drugs and the pharmacologic alterations associated with aging, including changes in pharmacokinetics, pharmacodynamics, drug interactions, overmedication, and problems with
compliance. Attention should be given to the psychiatric manifestations of iatrogenic influences such as the multiple medications frequently taken by the elderly.

13. The use of nonpharmacologic approaches, with particular reference to applications and limitations of behavioral therapeutic strategies, physical restraints, and the appropriate use and application of electroconvulsive therapy in the elderly.

14. The appropriate use of psychodynamic understanding of developmental problems, conflict, and adjustment difficulties in the elderly that may complicate the clinical presentation and influence the doctor-patient relationship or treatment planning.

15. The ethical and legal issues especially pertinent to geriatric psychiatry, including competence, guardianship, right to refuse treatment, wills, informed consent, patient abuse, and the withholding of medical treatments.

16. The current economic aspects of supporting services, including but not limited to Title III of the Older Americans Act, Medicare, Medicaid, and cost containment.

17. The research methodologies related to geriatric psychiatry, including biostatistics, clinical epidemiology, medical information sciences, decision analysis, critical literature review, and research design (including cross-sectional and longitudinal methods).

C. Conferences

Conferences in geriatric psychiatry, such as grand rounds, case conferences, readings seminars, and journal club should be specifically designed to augment the clinical experiences. Regular attendance by the residents and the faculty should be documented.

D. Resident Policies

1. The program director must ensure, direct, and document proper supervision of all geriatric psychiatry residents at all times by appropriately qualified faculty. The responsibility or independence given to residents in patient care should depend on their knowledge, skill, experience, and the complexity of the patient’s illness. Residents must be provided with rapid, reliable methods for communicating with supervising physicians. Each resident shall have a minimum of 2 hours of individual supervision of clinical activities weekly.

2. The program should carefully monitor any activity outside the program that interferes with education, performance, or clinical responsibility. The program should carefully monitor all on-call schedules and hours within and outside the program to prevent interference with education, performance, or clinical responsibility. The monitoring should ensure:

   a. One full day out of 7 free of program duties.
   b. On average, on-call duty no more than every third night.
   c. Adequate backup if patient care needs create resident fatigue sufficient to jeopardize patient care or resident welfare during or following on-call periods.

3. At all program facilities, the geriatric psychiatry residents must be given responsibilities commensurate with their postgraduate status and appropriate to their skill and experience in the provision of patient care. Residents must actively participate in a physician-directed geriatric team on both inpatient and outpatient services.

E. Other Program Components

1. Scholarly Activity

   Graduate medical education must take place in an environment of inquiry and scholarship, in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility. As part of the academic environment, an active scholarly component must be included within the geriatric psychiatry program. Faculty members should participate actively in basic, clinical, and/or health services research. The program should provide each resident with a meaningful, individually supervised opportunity to participate in research or scholarly activity.

2. Presence of Other Training Programs

   The program should provide peer interaction between its geriatric psychiatry residents and those of other medical specialties. To achieve this goal, there should be an ACGME-accredited training program in at least one relevant nonpsychiatric specialty, such as neurology, internal medicine, family practice, or physical medicine and rehabilitation within the participating institutions of the geriatric psychiatry program. Peer interaction among the programs should occur in the course of clinical and/or didactic work but is most satisfactory when organized around joint patient evaluation and/or care.

3. Resident Teaching Experiences

   The program should provide appropriate experiences designed to develop the administrative and teaching skills of the geriatric psychiatry residents. As the geriatric psychiatry residents progress through the program, they should have the opportunity to teach personnel such as other residents, medical students, nurses, and allied health professionals.

VI. Evaluation

A. Evaluation of Residents

   There must be at least quarterly evaluation of the geriatric psychiatry residents by all supervisors and the directors of clinical components of training. These evaluations must be discussed with the resident and placed in the training record. The program director shall:

   1. At least semiannually evaluate the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures.
   2. Communicate each evaluation to the resident in a timely manner.
   3. Advise residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.
   4. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.

B. Faculty Evaluation

   Geriatric psychiatry residents must also be provided with a mechanism for the written evaluation of all supervisors and of the didactic and clinical components of the educational program.

C. Program Evaluation

   1. The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.
   2. Written evaluations by residents should be utilized in this process.
   3. One measure of the quality of the program will be the participation in and performance of its graduates on the Added Qualifications certifying examination conducted by the ABPN.

VII. Certification

   Those individuals planning to seek Added Qualifications certification through the ABPN should communicate with the administrative officer of the ABPN prior to beginning training to ascertain the requirements.

ACGME: June 1994   Effective: July 1995
Program Requirements for Residency Education in Diagnostic Radiology

I. Objective
Diagnostic radiology encompasses a variety of diagnostic imaging techniques, including all aspects of roentgen diagnosis, nuclear radiology, diagnostic ultrasound, magnetic resonance imaging, and the use of other forms of radiant energy. The residency program in diagnostic radiology shall offer a quality graduate medical education experience of adequate scope and depth in all of these associated diagnostic disciplines.

The director and teaching staff of a program must prepare and comply with written educational goals for the program. All educational components of a residency program should be related to program goals. The program design and/or structure must be approved by the Residency Review Committee (RRC) for Diagnostic Radiology as part of the regular review process.

II. Training Period
The program shall offer a minimum of 4 years of graduate medical education (including vacation and meeting time) in diagnostic radiology, of which at least 40 months of training must be in the parent or integrated institution(s). The minimum period of training in nuclear radiology shall be 6 months.

III. Program Personnel
The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director
1. Qualifications of the Program Director
   There must be a single program director responsible for the program. She or he must be a staff member who is a diagnostic radiologist or a radiologist and must contribute sufficient time to the program to fulfill all of the responsibilities inherent in meeting the educational goals of the program. The program director must have appropriate authority to organize and fulfill administrative and teaching responsibilities to achieve the educational goals. She or he shall be certified by the American Board of Radiology or possess suitable equivalent qualifications, as determined by the RRC. The program director must be licensed to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.) She or he also must hold an appointment in good standing to the medical staff of an institution participating in the program. A complete curriculum vitae of the program director shall be filed with the executive secretary of the RRC at the time of appointment and updated with each review of the program by the RRC.

2. Responsibilities of the Program Director
   The program director shall be responsible for the total training in diagnostic radiology, which includes the instruction and supervision of residents. The program director shall be responsible for evaluation of the teaching staff in concert with and with the approval of the department chair.
   The program director is responsible for promptly notifying the executive secretary of the RRC in writing of any major changes in the program, including changes in leadership. Prior approval of the RRC is required for the addition or deletion of a major participating hospital, for an increase in the number of residents in the program, and for a major change in the format of the program. On review of a proposal for major change in a program, the RRC may determine that a site visit is necessary.
   The director is also responsible for the following:
   a. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.
   b. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.
   c. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program.
   d. The supervision of residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.
   e. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.
   f. Preparation of an accurate statistical and narrative description of the program as requested by the RRC.

B. Other Teaching Staff
All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities. There must be a sufficient number of teaching staff to instruct and supervise adequately all the residents in the program. The teaching staff must be qualified in those areas in which they are assigned to instruct and supervise residents, and they must contribute sufficient time to the program to provide adequate instruction and supervision.
   A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.
   At least one faculty member in each program must be designated to have primary responsibility for the educational content of each subspecialty area (see Section VII). No faculty member can have primary responsibility for the educational content of more than one subspecialty area, although faculty can have clinical responsibility and/or teaching responsibilities in several. Evidence for subspecialty commitment must be documented by each faculty member's clinical teaching and research in the particular area.

C. Other Program Personnel
Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

IV. Program Design
All educational components of a residency program should be related to program goals. The program design and/or structure must be approved by the RRC as part of the regular review process.
   Participation by any institution providing more than 6 months of training must be approved by the RRC. The residency program in di-
agnostic radiology must have one parent institution with primary responsibility for the entire program. When any institution other than the parent is utilized for the clinical or basic science education of a resident in diagnostic radiology, letters of agreement must be provided by the appropriate institutional authority. Institutions may participate on an affiliated or an integrated basis. An integrated relationship is one where the program director (a) appoints the members of the teaching staff and is involved in the appointment of the chief of service at the integrated institution, (b) determines all rotations and assignments at the integrated institution, and (c) is responsible for the overall conduct of the educational program in the integrated institution. Rotations to integrated institutions are not limited in duration. However, rotations to affiliated institutions may not exceed 8 months in the 4-year diagnostic radiology program.

The purpose of another institution's participation and the educational contribution to the total training program shall be defined. Service responsibility alone at a participating institution does not constitute a suitable educational experience. Affiliation shall be avoided with institutions that are at such a distance from the parent institution as to make resident attendance at rounds and conferences impractical, unless there is a comparable educational experience at the affiliated institution.

V. Facilities
The program must provide adequate space, equipment, and other pertinent facilities to ensure an effective educational experience for residents in diagnostic radiology, taking into account the modern facilities and equipment required in all of the subspecialty rotations (see Section VII).

Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions. Library services should include the electronic retrieval of information from medical databases. There must be access to an on-site library or to a collection of journals, references, and resource materials pertinent to progressive levels of education in diagnostic radiology and associated fields in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

VI. Clinical Resources
The program in diagnostic radiology must provide a sufficient volume and variety of patients, as defined in Section VII.

VII. Training Content
The clinical training must provide for progressive, supervised responsibility for patient care and must ensure that the supervised resident performs those procedures commonly accepted in all aspects of diagnostic radiology. The training, in general, must include progressive study and experience in all diagnostic radiologic subspecialties as well as in diagnostic radiologic physics, radiation biology, radiation protection, and pathology.

The training program shall be divided into periods of experience, which must include the following subspecialty areas: chest radiology (including mammography), musculoskeletal radiology, gastrointestinal radiology, genitourinary radiology, neuroradiology, pediatric radiology, cardiovascular and interventional radiology.

Additionally, each resident should have documented supervised experience in interventional procedures, such as guided biopsies, drainage procedures, noncoronary angioplasty, embolization and infusion procedures, and percutaneous introduction techniques. These requirements may be met by a cooperative program with other departments and residencies.

Each resident must have basic life-support training, and advanced cardiac life-support training is recommended. Acceptable experience in cardiovascular radiology requires, at a minimum, that the resident be present during interpretation of adult and pediatric angiographic and arteriographic evaluation of acquired and congenital conditions. Experience in cardiac echocardiography is recommended. Preferably, each resident shall have a defined rotation in cardiac catheterization as an observer or assistant and participate in the interpretation of those procedures. These requirements may be met by a cooperative program with the department of cardiology.

Computed tomography, diagnostic ultrasound, magnetic resonance imaging, and nuclear radiology must be included as separate rotations or integrated with the diagnostic radiology primary rotations. Experience in obstetrical ultrasound is required.

The program director must be able to document the experience of residents in the performance of neuroradiologic, vascular and interventional procedures; specialized procedures in musculoskeletal radiology, eg, arthrography; and image-assisted biopsy and drainage procedures. The experience of residents must not be significantly diminished by the presence of other residents such as fellows and postgraduate residents. Radiation biology, diagnostic radiologic physics, and radiation protection are required elements of the curriculum. In view of the importance of understanding pathology as a basis for radiologic diagnosis, emphasis should be placed on its study. Radiologic/pathologic conferences are required for those residents who do not participate in formal extramural pathology teaching programs.

Radiologic education in different organ systems must provide the opportunity for residents to develop adequate knowledge regarding normal and pathologic physiology, including the biologic and pharmacologic actions of materials administered to patients in diagnostic studies.

Patient service commitments must not compromise the achievement of the program's educational goals and objectives.

VIII. Resident Supervision/Duty Hours
The responsibility or independence given to residents should depend on their knowledge, manual skill, and experience. Additional personnel must be available within appropriate time intervals to perform or to supervise necessary technical procedures. Duty hours and night and weekend call for residents must reflect the concept of responsibility for adequate patient care. However, residents must not be required regularly to perform excessively difficult or prolonged duties. It is recommended that residents should be allowed to spend at least 1 full day out of 7 away from the hospital and should be assigned on-call duty in the hospital no more than, on average, every third night. It is the responsibility of the program director to monitor resident assignments to ensure adherence to this recommendation.

Resident stress should be monitored, including mental or emotional conditions inhibiting performance or learning, and drug- or alcohol-related dysfunction. The program director and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents.

Training situations that consistently produce undesirable stress on residents must be evaluated and modified.

IX. Program Research and Scholarly Activity
Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility. The responsibility for establishing and maintaining an environment
of inquiry and scholarship rests with the teaching staff. While not all members of the teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:

1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.

2. Participation in journal clubs and research conferences.

3. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.

4. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.

5. Offering of guidance and technical support (e.g., research design, statistical analysis) for residents involved in scholarly activities.

X. Educational Environment

The education in diagnostic radiology must occur in an environment that encourages the interchange of knowledge and experience among residents in the program and with residents in other major clinical specialties located in those institutions participating in the program.

XI. Training Complement

Peer contact and discussion are as important to the learning process as contact with teaching faculty. The number of diagnostic radiology residents in the program must be sufficient to provide for frequent and meaningful discussion with peers as well as to provide appropriate coverage for adequate patient care. Appointment of a minimum of eight residents with, on average, two appointed each year, is required for an efficient learning environment.

As noted above, prior approval of the RRC is required for an increase in the number of residents. The complement of residents must be commensurate with the total capacity of the program to offer an adequate educational experience in diagnostic radiology.

XII. Evaluation

A. Resident Evaluation

The program director is responsible for regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician. Evaluations of each resident's progress and competence should be conducted preferably at the end of each rotation, but not less than four times yearly. The evaluation must concern itself with intellectual abilities, attitudes and character skills, and clinical and technical competence. There must be provision for appropriate and timely feedback of the content of these evaluations to the resident. Residents should be advanced to positions of higher responsibility only on the basis of their satisfactory progressive scholarship and professional growth. The program must maintain a permanent record of the evaluation and counseling process for each resident. Such records must be accessible to the resident and other authorized personnel.

A written final evaluation for each resident who completes the program must be provided. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.

B. Program Evaluation

The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Written evaluations by residents should be utilized in this process.

The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews. The teaching staff should also periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

The RRC will consider the performance of a program's graduates on the examinations of the American Board of Radiology as one measure of the quality of the training program.

XIII. Teaching File

A teaching file of images referable to all aspects of diagnostic radiology must be available for use by residents. This file shall be indexed, coded, and currently maintained.

XIV. Conferences

Conferences and teaching rounds must be correlated and provide for progressive resident participation. There should be intradepartmental conferences as well as conferences with each major clinical department of sufficient frequency, and in which both residents and staff participate on a regular basis.

XV. Information on Certification

Residents who plan to seek certification by the American Board of Radiology should communicate with the executive director of the Board to be certain of all requirements, including duration of training, for admission to the examination process.

ACGME: February 1992 Effective: July 1995

Policies and Procedures for Residency Education in the Subspecialties of Diagnostic Radiology

Subspecialty programs must be administratively linked to an accredited core residency program in diagnostic radiology. (The only exception is pediatric radiology, as discussed below.) An application for accreditation of a new subspecialty program will be considered only if the core program has full accreditation. An application will not be accepted for review if the core program in diagnostic radiology is accredited on a provisional or a probationary basis, or if it has been accredited with a warning that adverse action will be taken if it is not in substantial compliance with the Essentials of Accredited Residencies in Graduate Medical Education at the time of the next review.

A subspecialty program in pediatric radiology may not necessarily be administratively linked to an accredited core residency program in diagnostic radiology if the pediatric radiology program is conducted in a children's hospital. In such a case, the subspecialty program may be considered free-standing and, therefore, not required to be under the sponsorship of a diagnostic radiology residency program.
Policies and Procedures for Residency Education in the Subspecialties of Diagnostic Radiology

An on-site survey of the proposed program is required for the initial review by the Residency Review Committee. Accreditation will be granted on the basis of the application and the written report from the on-site survey of the proposed program. Following the initial approval, the subspecialty program will be surveyed and reviewed in conjunction with the core diagnostic radiology program.

Subspecialty programs will be designated as "accredited" or "non-accredited." No other delineation of accreditation categories will be used. The accreditation status of the subspecialty program will be directly related to that of the core diagnostic radiology program, as follows:

Subspecialty programs may be cited for deficiencies and advised that either the deficiencies must be corrected by the specified time or accreditation will be withdrawn regardless of the accreditation status of the associated diagnostic radiology program.

If the associated diagnostic radiology program is accredited on a probationary basis, or accredited with a warning that adverse action will be taken, the subspecialty program will be informed that its accreditation status is also in jeopardy. Thereafter, accreditation of the subspecialty programs will be withdrawn if the Residency Review Committee finds that the sponsoring institution(s) is (are) not making satisfactory progress in addressing the adverse accreditation status of the core diagnostic radiology program.

Withdrawal of accreditation of the core diagnostic radiology residency program will result in simultaneous withdrawal of accreditation of the subspecialty program.

In the case of withholding of accreditation or withdrawing accreditation of subspecialty programs, the "Procedures for Appeal of Adverse Actions" apply.

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Program Requirements for Residency Education in Neuroradiology

In addition to the requirements described below, the statements in the diagnostic radiology requirements concerning program goals and objectives, program director and faculty qualifications and responsibilities, research and scholarly activity, and evaluation mechanisms also pertain to the neuroradiology subspecialty programs.

I. Definition and Objectives

The body of knowledge and practice of neuroradiology comprises both imaging and interventional procedures related to the brain, spine and spinal cord, head, neck, and organs of special sense in adults and children. Special training and skills are required to enable the neuroradiologist to function as an expert diagnostic and therapeutic consultant and practitioner. The objective of training in this subspecialty of radiology is to provide residents with an organized, comprehensive, and highly supervised full-time educational experience in the selection, interpretation, and performance of these examinations and procedures and to provide them with opportunities and skills for research in the field of neuroradiology.

A neuroradiology training program should function in direct association and/or affiliation with an Accreditation Council for Graduate Medical Education (ACGME)-accredited training program in general diagnostic radiology.

II. Duration of Training

The program shall offer a minimum of 1 year of graduate medical education in neuroradiology. This year of training must follow successful completion of an ACGME-accredited program in diagnostic radiology or its equivalent.

III. Program Director

The program director must be certified by the American Board of Radiology in diagnostic radiology or radiology or possess equivalent qualifications, and shall have had appropriate postresidency experience in neuroradiology, preferably fellowship training. The program director must be a member of the radiology staff and shall spend essentially all professional time in neuroradiology. He or she must devote sufficient time to the program to fulfill all of the responsibilities inherent in meeting the educational goals of the program. It is desirable that the program director hold a faculty position in an academic radiology department. The program director is responsible for establishing the curriculum. The program director shall select and supervise the residents and select other neuroradiology faculty members.

IV. Teaching Staff

At a minimum, the neuroradiology faculty must include, in addition to the program director, one or more neuroradiologists whose total time commitment to neuroradiology is at least one half-time equivalent and who are able to devote adequate time to the program. Their expertise may be limited to a segment of neuroradiology or a related discipline, eg, interventional neuroradiology, pediatric neuroradiology, or head and neck radiology. The faculty must provide didactic teaching and supervision of the trainees' performance and interpretations of neuroradiologic procedures. The faculty should be a stimulus to scholarly activity and should be able to direct residents in the conduct of such activities. The effectiveness of the faculty should be periodically evaluated by the program director in consultation with the various faculty members and trainees. It is desirable that as many members of the teaching staff as possible hold faculty positions in academic radiology departments.

V. Faculty/Resident Ratio

The total number of residents in the program must be commensurate with the capacity of the program to offer an adequate educational experience in neuroradiology. The minimum number of residents need not be greater than one, but two residents is desirable. To ensure adequate supervision and evaluation of a resident's academic progress, the faculty/resident ratio should not be less than one full-time faculty person for every two residents.

VI. Educational Program

A. Curriculum

The program must offer the opportunity for residents to perform, consult, conduct, and interpret, under close supervision, invasive as well as noninvasive procedures in neuroradiology. The procedures shall include cerebral angiography; myelography; computed tomography (CT); magnetic resonance imaging (MRI); ultrasound of the central nervous system and vessels; and plain film radiography related to the brain, head, neck, and spine. It is also desirable that there be exposure to positron emission tomography and magnetic resonance (MR) spectroscopy. With regard to invasive procedures, residents must be given graduated responsibility in the performance of the procedures as competence increases. Responsibility for these procedures should include preprocedural and postprocedural patient care.

Clinical and educational experience in the basic clinical neurosciences (eg, neurosurgery, neurolology, neuropathology, otorhinolaryngology, and ophthalmology) and in the basic radiological sciences (eg, radiation and MRI physics, radiation biology, and the pharmacology of radiographic contrast materials) must be provided. It is expected that there will be strong clinical services in neurological surgery and neurology in the institution sponsoring the neuroradiol-
ogy program. The majority of the time in the program should be spent in clinical training in neuroradiology.

B. Conferences and Didactic Training

There shall be intradepartmental conferences as well as conferences with related clinical departments in which residents and trainees participate on a regular basis. These should include one or more weekly departmental conferences in neuroradiology, as well as institutional conferences in clinical neurosciences that are held at least monthly. Residents should be encouraged to attend and participate in local extramural conferences and should attend at least one national meeting or postgraduate course in neuroradiology while in training.

Residents should be encouraged to present the radiologic aspects of cases that are discussed in clinical conferences related to allied disciplines such as neurosurgery and the neurological sciences. They should also prepare clinically or pathologically proved cases for inclusion in the teaching file.

There should be daily “film reading” conferences that should require trainees to reach their own diagnostic conclusions, which should then be reviewed and critiqued by faculty/staff. These conferences need not be limited to clinically current cases but may be based on cases that are already within the teaching file. Diagnostic reports generated by residents should be closely reviewed for content, level of confidence, grammar, and style.

VII. Clinical Resources

The program in neuroradiology must provide a sufficient volume and variety of patients with neurological, neurosurgical, ophthalmologic, otolaryngologic, spinal, and other pertinent disorders so that trainees gain adequate experience in the full gamut of neuroradiologic examinations, procedures, and interpretations. The program must provide an adequate volume and variety of invasive cases (eg, neuroangiography, myelography, digital subtraction angiography [DSA], and therapeutic embolization) and noninvasive neuroradiologic examinations (eg, CT, MR, and plain film studies). The program director should require residents to maintain documentation of the invasive cases in which they have been the performing radiologist and should review the logs with them at least once in the course of the training year. Clinical experience may be supplemented by training through affiliations with other institutions.

The subspecialty program in neuroradiology must not have an adverse impact, such as by dilution of the available clinical material, on the education of the diagnostic radiology residents in the same institution.

VIII. Supervision/Duty Hours

The responsibility or independence given to residents should depend on their knowledge, manual skill, and experience. Additional personnel must be available within appropriate time intervals to perform or supervise necessary technical procedures. Duty hours and right and weekend call for residents must reflect the concept of responsibility for patients and provide for adequate patient care. However, residents must not be required regularly to perform excessively difficult or prolonged duties. It is the responsibility of the program director to ensure assignment of reasonable in-hospital duty hours.

IX. Equipment and Space

The following equipment, which should be “state of the art,” should be available: MR imager, CT scanner, film-screen and DSA equipment, a radiographic-fluoroscopic room(s) with tilt table suitable for performing myelography, and conventional radiographic and tomographic equipment. The examination rooms should be equipped for monitoring so that examinations may be performed in high-risk patients. Adjacent to or within examination rooms there should be facilities for storing the catheters, gowns, embolic materials, contrast material, and other supplies needed for the conduct of neuroradiologic procedures. A room should be available near the angiographic room for sterilization and preparation of catheters, instrument trays, and other reusable supplies. There must be adequate space within the department to house these facilities.

Additional areas for film display, interpretation of films, and consultation with clinicians must be available. There must be adequate office space and support space for neuroradiology faculty/staff and trainees.

The program should provide office space, office supplies, and secretarial help for the conduct of research projects. Assistance with literature searches, editing, statistical tabulation, and photography should be provided.

X. Laboratory

The institution should provide laboratory facilities to support research projects. It is highly desirable to have an animal facility with radiographic-fluoroscopic equipment, particularly that which might be used for invasive diagnostic and therapeutic neuroradiologic procedures.

XI. Library

There should be ready access to a library of general medical texts and periodicals. In particular, there should be periodicals and texts in the fields of neuroradiology, diagnostic radiology, head and neck radiology, neurology, neurosurgery, neuroradiology, and orthopedic surgery. It is desirable that computerized literature search facilities also be available.

XII. Evaluation of Residents

The evaluation of residents must be documented at frequent intervals through appropriate techniques, which include faculty appraisal, examination, quality assurance techniques, or a combination of these. Documented evaluation of performance and progress must be made available to the trainee, not less than four times during the training year.

XIII. Resident Participation in Research

Residents should be encouraged to undertake investigative study of either a clinical or basic science nature. At least one project of such merit that it could be submitted for publication should be encouraged.

XIV. Interchange With Residents in Other Specialties and With Students

Residents should be encouraged to participate in the research projects of residents and staff persons in other specialties. They should attend clinical conferences in other specialties and serve as consultants to these conferences. It is desirable that they participate in the clinical teaching of medical students and also in the preclinical curriculum in subjects such as anatomy and physiology.

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Program Requirements for Residency Education in Nuclear Radiology

In addition to the requirements described below, the statements in the diagnostic radiology requirements concerning program goals and objectives, program director and faculty qualifications and re-
Program Requirements for Residency Education in Nuclear Radiology

sponsibilities, research and scholarly activity, and evaluation mechanisms also pertain to the nuclear radiology subspecialty programs.

I. Objective
Residency training programs in nuclear radiology must provide advanced training in the medical uses of radionuclides for in vivo imaging.

II. Definition
Nuclear radiology is defined as a clinical subspecialty of radiology involving imaging by external detection of radionuclides and/or biodistribution by external detection of radionuclides in the body for diagnosis of disease.

A training program in nuclear radiology will be accredited only in those institutions that have an accredited training program in diagnostic radiology.

Programs in nuclear radiology will be reviewed and accredited in conjunction with review and accreditation of training programs in diagnostic radiology.

III. Training Period
The training period in nuclear radiology shall be a minimum of 1 year in length. The resident must be full-time in nuclear radiology in each of the 12 months required for nuclear radiology training.

IV. Direction and Supervision
The program director is responsible for the instructional program and for supervision of residents. The program director shall be certified by the American Board of Radiology with Special Competence in Nuclear Radiology, by the American Board of Nuclear Medicine, or possess suitable equivalent qualifications. It is desirable that faculty members be certified in boards appropriate to these areas in which they are assigned to instruct and supervise residents. They must contribute sufficient time to the program to provide adequate instruction and supervision.

V. Institutional Support
Those aspects of institutional support that pertain to residencies in diagnostic radiology shall also apply to programs in nuclear radiology, eg, administrative support, facilities, and clinical resources.

VI. Educational Requirements
1. The training program shall include graduated study, experience, and responsibility in all facets of nuclear radiologic diagnosis, medical nuclear and diagnostic radiological physics, radiobiology, health physics and protection, nuclear medical instrumentation, radiopharmaceutical chemistry and instrumentation, clinical applications of nuclear radiology, and pathology.
2. The program must provide adequate opportunity for a resident to participate in and personally perform a broad range of nuclear radiologic procedures.
3. Formal instruction in diagnostic radiologic and medical nuclear physics, radiobiology, and radiopharmaceutical chemistry is required.
4. Appropriate emphasis must be placed on the educational value of teaching rounds and conferences. In addition, there should be frequent interdepartmental teaching conferences.
5. A faculty (nuclear medicine physician)-to-resident ratio of 1:2 should adequately provide for teaching and supervisory responsibilities.
6. State-of-the-art nuclear imaging equipment should be available for instructional purposes.
7. The educational program must provide for well-balanced and progressive resident participation through examination of a diverse patient population, with continuous teaching and an active research effort in nuclear radiology.

VII. Research
The program should provide an environment in which a resident is encouraged to engage in investigative work with appropriate faculty supervision. Documentation of this environment should be made in the application and indicated by papers published by residents and/or clinical faculty.

VIII. Literature Resources
The program shall provide a sufficient variety of journals, references, and resource materials pertinent to the study of nuclear radiology. In addition, residents must have access to a general medical library.

IX. Teaching File
A teaching file of images referable to all aspects of nuclear radiology must be available for use by residents. This file should be indexed, coded, and currently maintained.

Residents who plan to seek certification by the American Board of Radiology should communicate with the executive director of the board to ascertain the full requirements for this category of certification.

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Program Requirements for Residency Education in Pediatric Radiology

In addition to the requirements described below, the statements in the diagnostic radiology requirements concerning program goals and objectives, program director and faculty qualifications and responsibilities, research and scholarly activity, and evaluation mechanisms also pertain to the vascular/interventional radiology subspecialty programs.

I. Definition and Objectives
The training program in the subspecialty of pediatric radiology constitutes a supervised experience in the pediatric application and interpretation of roentgenography, computed tomography, ultrasonography, angiography, radionuclide scintigraphy, magnetic resonance imaging, and any other imaging modality customarily included within the specialty of diagnostic radiology. The program should be structured to enhance substantially the trainee's knowledge of the application of all forms of diagnostic imaging to the unique clinical/pathophysiologic problems of the newborn, infant, child, and adolescent. The fundamentals of radiobiology, radiologic physics, and radiation protection as they relate to the infant, child, and adolescent should be reviewed during the pediatric radiology training experience.

II. Organizational Considerations
A program of pediatric radiology training should function whenever feasible in direct association and/or affiliation with an Accreditation Council for Graduate Medical Education (ACGME)-accredited program in diagnostic radiology. Pediatric radiology programs may be conducted in either a children's hospital or a general hospital.

III. Duration of Training
The program shall offer 1 year of graduate medical education in pediatric radiology. Completion of an ACGME-accredited program in diagnostic radiology or its equivalent must precede advanced training in pediatric radiology.

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Program Requirements for Residency Education in Pediatric Radiology

IV. Program Director
The director of a pediatric radiology program should be a qualified educator and supervisor of trainees in pediatric radiology. He or she must be certified by the American Board of Radiology in radiology or diagnostic radiology or possess equivalent qualifications. The director must devote sufficient time to the program to fulfill all of the responsibilities inherent in meeting the educational goals of the program. The program director is responsible for establishing the curriculum as well as procedures for the evaluation of the resident's competency. The program director shall select and supervise the trainees and shall select other pediatric radiology faculty members. The director must be responsible for the adequacy of the facilities, including support resources necessary for ensuring the provision of an education of high quality.

V. Teaching Staff
There should be sufficient qualified professional personnel to constitute a teaching faculty. The faculty should comprise no less than two experienced pediatric radiologists, including the program director, who work full-time in clinical pediatric radiology and are able to devote adequate time to the program. The minimum faculty requirement may be met by the program director and one other full-time (ie, two or more individuals) equivalent faculty member. Although it is desirable that pediatric radiologists supervise special imaging (as, for example, angiography, nuclear medicine, computed tomography, and/or magnetic resonance imaging), in instances where they are not expert in a special imaging technique, other radiologists who are specialists in that imaging method should be part-time on the pediatric radiology faculty. Because such radiologists are usually not broadly experienced in the discipline and practice of pediatric radiology, pediatric radiologists should participate in the interpretation and correlation of the findings of these special imaging examinations.

There should be an ACGME-accredited residency in pediatrics to provide an appropriate patient population and educational resources in the institution. In addition to full-time pediatricians, there should be one or more pediatric surgeons, one or more pediatric cardiologists, and one or more pediatric pathologists. These pediatric specialists may serve as additional faculty.

VI. Faculty-to-Resident Ratio
A ratio of one pediatric radiologist for every two residents is recommended to provide adequate opportunity for teaching and supervision.

VII. Resident-to-Patient Ratio
The institution's pediatric population must include patients with a diversity of pediatric illnesses from which broad experience can be gained. The number of pediatric radiology residents in a program at any given time should reflect the patient census to assure each trainee of an adequate experience. The program must have sufficient volume and variety of patients to ensure that residents gain experience in the full range of pediatric radiologic examinations, procedures, and interpretations. A reasonable experience would be approximately 10,000 pediatric radiologic examinations per year per resident. The number of radiologic examinations available for the pediatric radiology resident should not be unduly diluted by the presence and rotation of diagnostic radiology residents and/or other trainees and fellows.

VIII. Curriculum
The training should consist of didactic and clinical experiences that encompass the scope of pediatric radiology, from the neonate to the adolescent. Every organ system should be studied in the contexts of growth and development, congenital malformations, diseases peculiar to infants and children, and diseases beginning in childhood but causing substantial residual impairment in adulthood. The didactic component should promote scholarship, self-instruction, teaching, and research activity. It should foster the development of analytic skills and judgment. The clinical component should facilitate skillful technical performance of low-radiation-dose procedures on all organ systems that are examined in the practice of pediatric radiology. There should be experience with pediatric imaging in both inpatient and outpatient settings.

Residents must have graded responsibility and supervision in the performance of procedures and the perfection of technical skills. It is essential that the pediatric radiology trainee be instructed in common pediatric imaging technical procedures and their indications, limitations, judicious utilization, and risks, especially radiation dose considerations. Where the program is conducted in a general hospital, the pediatric radiology trainee must have training in special imaging examinations of pediatric patients. The scope of a 1-year training program in pediatric radiology shall include all diagnostic imaging applicable to the pediatric patient. Allowing for no more than 4 weeks’ vacation, the clinical and didactic curriculum must include musculoskeletal, cardiopulmonary, gastrointestinal, and genitourinary pediatric radiology. In each organ system, there are indications for the use of ultrasound, computed tomography, and magnetic resonance imaging. The resident is responsible for following the imaging workup of the patient and must be substantially involved in the performance and interpretation of examinations that utilize each of these modalities. Correlation of radiologic findings with the clinical management aspects of pediatrics is essential.

The pediatric radiology resident should have at least 2 weeks of experience in each of the specialized areas of pediatric neuroradiology, pediatric vascular/interventional radiology, and pediatric nuclear medicine. This experience may be obtained through a combination of lectures, conferences, seminars, and involvement as the primary or secondary operator and by observing procedures. Supervised instruction should be provided by physicians with special expertise in those disciplines. It may be necessary to supplement the pediatric experience with experience in adult patients in vascular and interventional procedures owing to limited volume of pediatric studies in some institutions. The program must require residents to document training in vascular/interventional, neuroradiology, and nuclear medicine in a logbook.

Residents in pediatric radiology should serve as pediatric radiologic consultants under the supervision of staff pediatric radiologists. The teaching experience should include pediatric- and radiologic-oriented conferences with medical students, graduate medical staff, and allied health personnel.

IX. Supervision/Duty Hours
The responsibility or independence given to residents should depend on their knowledge, manual skill, and experience. Additional personnel must be available within appropriate time intervals to perform or to supervise necessary technical procedures. Duty hours and night and weekend call for trainees must reflect the concept of responsibility for patients and provide for adequate patient care. However, residents must not be required regularly to perform excessively difficult or prolonged duties. It is the responsibility of the program director to ensure assignment of reasonable in-hospital duty hours.

X. Didactic Teaching/Conferences
Study of clinical and basic sciences as they relate to radiology and pediatrics shall be a part of the didactic program. In addition to conferences, such studies are most effectively integrated with the per-
formance and interpretation of roentgenographic and other imaging examinations.

Subspecialty conferences, seminars, and academic review activities in pediatric radiology must be regularly scheduled. It is essential that the resident participate in the planning and presenting of these conferences. Attendance at multidisciplinary medical conferences is required.

**XI. Experience in Inpatient and Outpatient Services**

The hospital must have sufficient inpatient and outpatient services, both generally and specifically, in the subspecialty areas of pediatrics. These services must be part of the teaching program and should require diagnostic imaging input for most of their patients.

**XII. Resident Evaluation**

Evaluation on a regular basis of the competency of the residents should involve assessment of intellectual abilities, manual skills, attitudes, and interpersonal relationships, as well as decision-making skills and facility for critical analysis of clinical problems from an imaging perspective. There must be provision for appropriate confidential feedback of evaluation information to the resident. There should also be a regular opportunity for the resident to evaluate the training program and the faculty.

**XIII. Resident Participation in Research**

The training program in pediatric radiology should have a research component that will offer the resident an opportunity to learn the fundamentals of design, performance, and interpretation of research studies, as well as how to evaluate investigative methods. Trainees should develop competence in critical assessment of new imaging modalities and of the radiologic literature and should be encouraged to participate actively in research projects.

**XIV. Interchange With Residents in Other Specialties and With Students**

The training program should have close interaction with a diagnostic radiology residency. Shared experience with the residents in general pediatrics and in the pediatric subspecialties, i.e., surgery, pathology, and cardiology, is strongly encouraged; where appropriate, supervision and teaching by expert faculty in these disciplines should occur.

**XV. Facilities and Space**

Modern facilities and equipment in adequate space must be available and functioning to accomplish the overall educational program of pediatric radiology in a children's hospital. Diagnostic imaging modalities shall include roentgenography, computed tomography, ultrasound, radionuclide scintigraphy, angiography, and magnetic resonance imaging. In general hospitals that treat patients of all ages, pediatric radiology often is a section of the radiology department; similarly, special imaging services of such departments are separate sections. In such cases, there should be recognition within the special imaging sections of the particular needs of the pediatric radiology program. There should be low-dose roentgenographic/fluoroscopic facilities specifically for children. The availability of all special imaging services for pediatric radiology residents is essential.

Laboratory and pathology services must be adequate to permit residents to enhance their educational experience during the diagnostic imaging and care of patients. The services should be available each day throughout the entire 24 hours.

**XVI. Library**

Ancillary teaching resources should include access to a medical library with a variety of textbooks and journals in pediatrics, radiology, and related fields. A coded pediatric radiology teaching file that is continuously and actively enhanced with new in-house cases must be available for use by pediatric radiology residents. The American College of Radiology teaching file will only partially meet this requirement.

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**Program Requirements for Residency Education in Vascular and Interventional Radiology**

In addition to the requirements described below, the statements in the diagnostic radiology requirements concerning program goals and objectives, program director and faculty qualifications and responsibilities, research and scholarly activity, and evaluation mechanisms also pertain to the vascular/interventional radiology subspecialty programs.

**I. Definition and Objectives of Training**

Vascular and interventional radiology is a branch of medicine that diagnoses and treats diseases using percutaneous methods guided by radiologic imaging. The unique clinical and invasive nature of practice in vascular and interventional radiology requires special training and skills. The vascular and interventional radiologist must be familiar with the signs and symptoms of disorders amenable to diagnosis and/or treatment by these techniques. The significance of the symptoms must be understood, as well as the pathophysiology and natural history of the disorders. He or she must know the indications for and contraindications to vascular and interventional procedures and must be skilled in the clinical and technical aspects of their implementation. He or she must be familiar with the medical and surgical alternatives in these various disorders. The vascular and interventional radiologist must have a complete understanding of imaging methods, including percutaneous imaging-guided procedures, and the fundamentals of radiation physics, radiation biology, and radiation protection.

The objective of training in this subspecialty of radiology is to provide residents with an organized, comprehensive, supervised, full-time educational experience in vascular and interventional radiology, including the performance of vascular and interventional procedures and the integration of these procedures into the clinical management of patients. In addition, training should provide residents with opportunities and skills for research.

A program in vascular and interventional radiology must function in direct association and/or affiliation with an Accreditation Council for Graduate Medical Education (ACGME)-accredited training program in diagnostic radiology.

**II. Duration of Training**

The program shall offer a minimum of 1 year of graduate medical education in vascular and interventional radiology. Training in vascular and interventional radiology must follow completion of an ACGME-accredited residency in diagnostic radiology or its equivalent.

**III. Program Director**

The program director must be certified by the American Board of Radiology in diagnostic radiology or radiology, or possess equivalent qualifications, and shall have had appropriate postresidency experi-
ence in vascular and interventional radiology, preferably fellowship training. The program director must be a member of the radiology staff and shall spend essentially all professional time in vascular and interventional radiology. If or she must devote sufficient time to the program to fulfill all of the responsibilities inherent in meeting the educational goals of the program. It is desirable that the program director hold a faculty position in an academic radiology department. The program director is responsible for establishing the curriculum. The program director shall select and supervise the residents and select other vascular and interventional radiology faculty members.

IV. Faculty
The program faculty must include at least two full-time vascular and interventional radiologists, including the program director. While the expertise of any one faculty member may be limited to a particular aspect of vascular and interventional radiology, the training program must provide a broad experience, to include all aspects of vascular and nonvascular interventional radiology. The faculty must provide didactic teaching and direct supervision of residents' performance in the clinical patient management, procedural, interpretive, and consultative aspects of vascular and interventional radiology. The faculty also should be a stimulus to scholarly activities and should be able to direct residents in the conduct of such activities. The effectiveness of the faculty should be periodically evaluated by the program director in consultation with the various faculty members and residents. It is desirable that the faculty hold appointments in academic radiology departments.

V. Faculty-to-Resident Ratio
The total number of residents in the program must be commensurate with the capacity of the program to offer an adequate educational experience in vascular and interventional radiology. The minimum number of residents need not be greater than one. To ensure an adequate educational experience, as well as adequate supervision and evaluation of a resident's academic progress, the faculty-to-resident ratio must not be less than one full-time faculty person for every two residents.

VI. Educational Program
A. Curriculum
The training program must offer didactic and clinical experiences that encompass the full clinical spectrum of vascular and interventional radiology. Residents must have the opportunity to carry out all of the following under close supervision: perform clinical preprocedure evaluation of patients, interpret preliminary diagnostic studies, consult with clinicians on other services, perform diagnostic and therapeutic vascular and interventional procedures, generate procedural reports, and administer both short- and long-term postprocedure follow-up care. The continuity of care must be of sufficient duration to ensure that the resident is familiar with the outcome of all interventional procedures.

- Both vascular and nonvascular interventional procedures, excluding the central nervous system (internal carotid, vertebral, and spinal arteries), must be included in the training program. Examples of vascular procedures include but are not limited to arteriography, venography, lymphography, angioplasty and related percutaneous revascularization procedures, embolotherapy, transcatheter infusion therapy, intravascular foreign body removal, and percutaneous placement of endovascular prostheses such as a stents and inferior vena cava filters. Examples of nonvascular procedures include but are not limited to percutaneous imaging-guided biopsy, percutaneous gastrostomy, percutaneous nephrostomy, ureteral stenting, and other transcatheter genitourinary procedures for diagnosis and for treatment of lithiasis, obstruction and fistula, percutaneous transhepatic and transcholecystic biliary procedures, percutaneous drainage for diagnosis and treatment of infections and other fluid collections, and miscellaneous percutaneous imaging-guided procedures such as ablation of neoplasms and cysts.

- In supervising residents during vascular and interventional procedures, faculty members should reinforce the understanding gained during the diagnostic radiology residency training of x-ray generators, image intensifiers, film, screen-film combinations, film changers, film processing, ultrasonography, computed tomography, and other imaging modalities. Residents must be provided with instruction in the use of needles, catheters, and guide wires, then directly supervised and given graduated responsibility in the performance of procedures as competence increases. A thorough understanding of the clinical indications, risks, and limitations of vascular and interventional procedures is essential to the practice of vascular and interventional radiology. Residents must be instructed in these areas.

- Residents also should be instructed in proper use and interpretation of laboratory tests and in methods that are adjunctive to vascular and interventional procedures, such as use of physiologic monitoring devices, noninvasive vascular testing, and noninvasive imaging. There should be specific instruction in the clinical aspects of patient assessment, treatment, planning, and patient management related to vascular and interventional radiology. There also should be instruction in the use of analgesics, antibiotics, and other drugs commonly employed in conjunction with these procedures.

- Residents should serve as consultants under the supervision of staff vascular and interventional radiologists. Direct interactions of residents with patients must be closely observed to ensure that appropriate standards of care and concern for patient welfare are strictly maintained. Communication, consultation, and coordination of care with the referring clinical staff and clinical services must be maintained and documented with appropriate notes in the medical record. Reports for the medical record generated by residents should be closely reviewed for accuracy of content, grammar, style, and level of confidence. Residents should also assist and train diagnostic radiology residents in the performance of procedures.

B. Conferences and Didactic Training
There shall be intradepartmental conferences as well as conferences with related clinical departments in which residents participate on a regular basis. These should include one or more weekly departmental conferences and at least one interdisciplinary conference per week at which attendance is required. In particular, interdepartmental conferences with the surgical specialties should be an important teaching component.

- There must be documented regular review of all mortality and morbidity related to the performance of interventional procedures. Residents must participate actively in this review, which should be held not less than monthly. Residents should be encouraged to attend and participate in local extramural conferences and should attend at least one national meeting or postgraduate course in interventional radiology while in training.

- Residents should be encouraged to present the radiologic aspects of cases that are discussed in multidisciplinary conferences. They also should prepare clinically or pathologically proven cases for inclusion in the teaching file.

VII. Patient Population
The institution's patient population must have a diversity of illness, from which a broad experience in vascular and interventional radiology can be obtained. There also must be an adequate variety and number of interventional procedures for each trainee. Each trainee must document his or her direct participation in a minimum of ap-
proximately 500 vascular and interventional procedures. The procedures should be recorded in a personal case log, which should be reviewed periodically with the program director. Clinical experience may be supplemented by training affiliations with other institutions. The subspecialty program in vascular and interventional radiology must not have an adverse impact on the educational experience of diagnostic radiology residents in the same institution.

VIII. Supervision/Duty Hours
The responsibility or independence given to residents must depend on an assessment of their knowledge, manual skill, and experience. Additional personnel must be readily available to perform or to supervise necessary technical procedures. Duty hours and night and weekend call for residents must reflect the concept of responsibility for patients and provide for adequate patient care. However, residents must not be required regularly to perform excessively difficult or prolonged duties. Residents must have at least 1 full day out of 7 away from the hospital and should be assigned on-call duty in the hospital no more than 7 nights out of 14. It is the responsibility of the program director to ensure assignment of reasonable in-hospital duty hours.

IX. Equipment and Space
Modern imaging/procedure rooms and equipment must be available and must permit the performance of all vascular and interventional radiologic procedures. Rooms in which vascular and interventional procedures are performed should be equipped with physiologic monitoring and resuscitative equipment. Adjacent to or within procedure rooms, there should be facilities for storing catheters, guidewires, contrast materials, embolic agents, and other supplies. There must be adequate space and facilities for film display, film interpretation, and consultation with other clinicians. There must be adequate office space and support space for vascular and interventional radiology faculty/staff and residents.
Pathology and medical laboratory services and consultation must be regularly and conveniently available to meet the needs of patients, as determined by the medical staff. At least one qualified medical technologist must be on duty or available at all times.

X. Research Facilities
The institution should provide laboratory and ancillary facilities to support research projects. These laboratory facilities and research opportunities may be made available to vascular and interventional radiology residents through cooperative arrangements with other departments or institutions.

XI. Library
Teaching resources must include a medical library with access to a variety of textbooks and journals in radiology, vascular and interventional radiology, and related fields. A coded vascular and interventional radiology teaching film file is desirable. The trainee should have access to computerized literature search facilities.

XII. Evaluation of Residents
Evaluation of the competence and progress of each trainee must be made on a regular basis through appropriate techniques, including faculty appraisal, examination, quality assurance techniques, or a combination of these. This evaluation should include an assessment of intellectual abilities, technical skills, attitudes, and interpersonal relationships, as well as decision-making skills and clinical management skills. Documented evaluation of performance and progress must be made available to the trainee not less than four times during the training year.

XIII. Trainee Participation in Research
Residents should be encouraged to undertake investigative study of either a clinical or basic science nature. In doing so, they may participate in research projects conducted by the faculty or other residents and should be encouraged to undertake at least one project as principal investigator. They should learn the fundamentals of experimental design, performance, and interpretation of results. Residents must be given the opportunity to develop their competence in clinical research and to participate in scientific research in the clinical and experimental areas of interest. They should be encouraged to submit their work for presentation at national and for publication in scientific journals.

XIV. Interchange With Residents in Other Specialties and With Students
Residents should be encouraged to participate in research activities with residents and staff persons in other related specialties. They also should be encouraged to attend and participate in clinical conferences in other specialties and to serve as consultants at these conferences. It is desirable that they participate in the clinical teaching of radiology residents and medical students.

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Program Requirements for Residency Education in Radiation Oncology

I. Introduction
Radiation oncology is that branch of clinical medicine that utilizes ionizing radiation to treat patients with cancer and, occasionally, diseases other than cancer. The radiation oncologist is an integral part of the multidisciplinary management of the cancer patient and must collaborate closely with physicians in related disciplines and be familiar with their role in the management of the patient.

II. Program Goals and Objectives
The objective of the residency training program is to educate and train physicians to be skillful in the practice of radiation oncology. To accomplish this goal, adequate structure, facilities, faculty, patient resources, and educational environment must be provided. The director and teaching staff of a program must prepare and comply with written educational goals for the residency program. All educational components of the program should be related to program goals. The program design and structure must be approved by the Residency Review Committee (RRC) for Radiation Oncology as part of the regular review process.

III. Length of Training
Programs shall offer at least 3 years of graduate medical education in radiation oncology; while the program may extend the duration of training beyond 3 years, the RRC will accredit 3 years as a maximum. Residents shall have completed a suitable first year of postgraduate training before entering a residency program in radiation oncology.

No less than 30 months of the radiation oncology program must be spent in clinical radiation therapy, and it is recommended that the remaining 6 months include 2 to 3 months of medical oncology and a 2- to 3-month rotation in pathology or an equivalent lecture experience in pathology. No more than 6 months may occur in rota-
tions to affiliated institutions outside the institution in which the program resides or outside those participating institutions united to form an integrated program. For those who plan an academic career, an additional year of clinical or laboratory research is encouraged.

IV. Program Personnel
The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director
1. Qualifications
There must be a single program director responsible for the program. The program director must be a practicing radiation oncologist with the requisite and documented clinical, educational, and administrative abilities and experience. She or he must be certified by the American Board of Radiology or possess equivalent qualifications. The program director must be licensed to practice medicine in the state where the institution that sponsors the program is located (certain federal programs are exempted), and also must hold an appointment in good standing to the medical staff of an institution participating in the program. A complete curriculum vitae of the program director shall be filed with the executive secretary of the RRC at the time of appointment and updated with each review of the program by the RRC.

2. Responsibilities of the Director
The program director is responsible for promptly notifying the executive secretary of the RRC, in writing, of any major changes in the program, including changes in leadership. Prior approval of the RRC is required for the addition or deletion of a major participating hospital, for an increase in the number of residents in the program, and for a major change in the format of the program.

The director is also responsible for the following:

a. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.

b. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.

c. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program.

d. The supervision of residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.

e. Regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician.

f. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.

g. Preparation of an accurate statistical and narrative description of the program as requested by the RRC.

B. Teaching Staff
The program must provide a minimum of three full-time radiation oncologists, one full-time radiation biologist or basic scientist, and one full-time medical physicist for the teaching of clinical radiation oncology, radiation biology, and physics. By full-time, the RRC intends that the individual devote essentially all professional time to the program. The radiation oncologists and the medical physicist should be certified by the American Board of Radiology or possess equivalent qualifications.

All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities. The teaching staff must supervise the residents and provide the opportunity for the residents to gradually accept more responsibility for patient care as they progress. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities.

A member of the teaching staff of each participating institution must be designated as responsible for the day-to-day activities of the program at that institution, with overall coordination by the program director.

The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

C. Other Program Personnel
Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

V. Program Research and Scholarly Activity
Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:

A. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.

B. Participation in journal clubs and research conferences.

C. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.

D. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.

E. Offering of guidance and technical support (e.g., research design, statistical analysis) for residents involved in scholarly activities.

1. An institution is considered "integrated" when there is a written agreement between the parent institution and its program and the integrated institution specifying that the program director (a) appoints the members of the faculty and is involved in the appointment of the chief of service at the integrated institution, (b) determines all rotations and assignments at the integrated institution, and (c) is responsible for the overall conduct of the educational program in the integrated institution.
VI. Training Content
A. The program director is responsible for the structure and content of the educational program and must document that the resident has been trained in clinical radiation oncology, treatment planning, radiation physics, and radiobiology. The clinical curriculum must provide the resident with an in-depth knowledge of clinical radiation oncology, including the indications for irradiation and special therapeutic considerations unique to each site and stage of disease. The program must train the resident in standard radiation techniques, as well as the use of treatment aids and treatment planning to optimize the distribution of radiation dose. The resident must also gain a knowledge of normal tissue tolerance to radiation and tumor dose-response. The use of combined modality therapy and unusual fractionation schemes should also be part of the clinical curriculum.

The resident must be trained in the use of external beam modalities, including superficial irradiation, megavoltage irradiation (cobalt 60, low- and high-energy x-rays), electron beam, simulation to localize anatomy, and computerized treatment planning. The faculty must ensure that the resident personally performs all technical procedures such as intraoperative and interstitial placement of radiation sources and that the resident keeps a detailed list of these procedures. The program director should be prepared to submit at the RRC's request the logs of patients irradiated, procedures performed, and modalities used for 3 years of clinical experience for all residents who completed training in the previous year. It is recommended that a resident perform or assist in no fewer than 10 interstitial implants and 10 intracavitary insertions during the course of training.

Programs that include the therapeutic use of hyperthermia, radiolabeled antibodies, intraoperative radiotherapy, and neutron beam and other heavy particle radiotherapy must provide instruction in physics and biology as they apply to these areas of clinical treatment.

B. Residents must have the opportunity to be educated in the clinical and basic sciences through regularly scheduled lectures, case presentations, conferences, and discussions relevant to the practice of radiation oncology. The training program must provide curricula for the teaching of basic sciences essential to training in radiation oncology, including radiation biology and medical physics. The curriculum in medical physics should include laboratory demonstrations of radiation safety procedures, calibration of radiation therapy machines, the use of the computer for treatment planning, the construction of treatment aids, and the safe handling of sealed and unsealed radiation sources. It is recommended that the program also familiarize the resident with medical statistics and with pathology, with special emphasis on neoplasia and radiation effects.

C. The training program should provide the resident with the educational opportunity for exposure to the potential value and limitations of other oncologic disciplines, such as medical oncology, surgical oncology, gynecologic oncology, and the various surgical subspecialties that play a role in the management of the patient. This will be accomplished by attendance at multidisciplinary and departmental conferences.

During their training, residents will be expected to engage in an investigative project under faculty supervision. This may take the form of laboratory research, clinical research, or the retrospective analysis of data from treated patients.

VII. Training Complement
The RRC will accredit a program for a maximum number of residents commensurate with the total capacity of the program to offer an appropriate educational experience in radiation oncology. There should not be more than 1.5 residents for every staff radiation oncologist during any resident's 3 months of training in clinical radiation therapy. If a program director wants to increase the number of residents in a program beyond the authorized number, prior approval must be obtained from the RRC.

VIII. Duty Hours
While the actual number of hours worked by residents may vary, residents should have sufficient off-duty time to avoid undue fatigue and stress. It is recommended that residents should be allowed to spend, on average, at least 1 full day out of 7 away from the hospital, and should be assigned on-call duty in the hospital no more frequently than every third night. The program director is responsible for monitoring on-duty assignments for residents to ensure adherence to this recommendation.

Resident stress should be monitored, including mental or emotional conditions inhibiting performance or learning and drug or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.

IX. Evaluation
A. Resident Evaluation
Evaluations of each resident's progress and competence must be conducted not less than four times during the training year. The evaluations must include an assessment of intellectual abilities, attitudes, and interpersonal relationships, as well as clinical competence and decision-making and clinical management skills. There must be provision for appropriate and timely feedback of the content of these evaluations to the resident. Residents should be advanced to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth. The program must maintain a permanent record of the evaluation and counseling process for each resident. Such records must be accessible to the resident and other authorized personnel.

The program director must provide a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.

B. Program Evaluation
The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Resident should have the opportunity at least annually to evaluate the faculty and the program. Written evaluations by residents should be utilized in the program evaluation process.

The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

One measure of the quality of a program is the performance of its graduates on the examinations given by the American Board of Radi-
ology. The RRC may consider this information as part of the overall evaluation of the program.

X. Facilities
A training program in radiation oncology must have adequate space and equipment to train residents in state-of-the-art radiation therapy. There must be access to two or more megavoltage machines, kilovoltage and/or electron beam capabilities, a dedicated therapy simulator, computerized treatment planning, a mold room and/or machine shop for the construction of treatment aids, and equipment to do interstitial and intracavitary brachytherapy. Compensation for the absence of any of this equipment in the parent program must be provided by training the resident in the missing technology through a rotation to another institution.

XI. Clinical Resources
The training program in radiation oncology must provide a sufficient volume and variety of cancer patients, including those with pediatric, gastrointestinal, gynecologic, genitourinary tract, reticuloendothelial system, upper respiratory tract (including the head, neck, and lung), breast (both primary and metastatic), central nervous system, skin, bone, and soft tissue tumors. Sufficient numbers of these patients should be treated by interstitial implants and intracavitary insertions to provide the resident with an adequate brachytherapy experience. Follow-up of the irradiated patient on an inpatient or outpatient basis is an essential part of resident training and must be demonstrated by the program to ensure that residents have the opportunity to learn about the problems of recurrent and disseminated tumors, late aftereffects, and complications of radiation therapy. To ensure adequate numbers and variety of patients for resident training, it is recommended that the parent institution or integrated program treat approximately 600 patients yearly and that the number of patients irradiated by the resident each year be no fewer than 125.

The residents’ experience must not be significantly diminished by the presence of other trainees, such as fellows and postgraduate trainees or residents rotating from another accredited residency program.

Adequate medical support must be available in the specialties of medical oncology, surgical oncology and its subspecialties, gynecologic oncology, and pediatric oncology. There must be access to diagnostic radiology, nuclear medicine, pathology, a clinical laboratory, and a tumor registry.

XII. Institutional Support
The administration of the institution(s) sponsoring the program in radiation oncology must provide funding for space, equipment, staff, nonprofessional personnel, and residents. It must assist the program director in teaching and recruiting faculty, as well as in selecting, evaluating, and dismissing residents whose performance is unsatisfactory. Assurances of due process for faculty and residents must be demonstrated.

XIII. Affiliation Agreements
Extramural educational experience may be used to complement the training program, but the preponderance of the educational experience must take place in the parent institution. If residents are sent to an affiliated institution to obtain experience lacking in the parent institution, the program director should specify to the RRC the reason for the rotation and should document the number and types of patients available to the residents. Participation by any institution providing more than 3 months of training must be approved by the RRC. When resources of two or more institutions are utilized for the clinical or basic science education of a resident in radiation oncology, a letter of agreement must be approved by the institutional governing boards. Affiliations with institutions that do not add to the educational value of the program or that are at such a distance from the parent institution as to make resident attendance at rounds and conferences difficult should be avoided. Clinical responsibility alone does not constitute a suitable educational experience.

XIV. Educational Environment
The education in radiation oncology must occur in an environment that encourages exchange of knowledge and experience among residents in the program and with residents in other oncology specialties located in the same institution. Other residency training programs, including medicine and surgery, must be ongoing in the institution.

XV. Conferences
Conferences and teaching rounds must provide for progressive resident participation. Adequate frequency of conferences and attendance by residents, radiation oncologists, and other staff should be documented. Adequate conference room and audiovisual facilities must be provided.

There must be intradepartmental clinical oncology conferences, including new patient conferences, weekly chart reviews, and problem case conferences; other conferences should include morbidity and mortality, physics, dosimetry, radiation biology, and journal review.

Interdepartmental clinical oncology conferences should include medical oncology, hematologic oncology, gynecologic oncology, pediatric oncology, general surgical oncology, and the oncologic surgical subspecialties.

XVI. Library Resources
A sufficient variety of journals, reference books, and resource materials pertinent to radiation oncology and associated fields in oncology and basic sciences must be provided and be immediately accessible for resident study in a radiation oncology library. In addition, residents must have access to a general medical library. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends. Library services should include the electronic retrieval of information from medical databases.

Residents who plan to seek certification by the American Board of Radiology should communicate with the executive director of the board to ascertain the full requirements for certification.

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Program Requirements for Residency Education in General Surgery

I. General Characteristics of Accredited Programs
The training of surgeons for the practice of general surgery encompasses education in basic sciences, training in cognitive and technical skills, development of clinical knowledge and maturity, and acquisition of surgical judgment.

A. The program must provide the opportunity for residents to learn in depth the fundamentals of basic science as applied to clinical surgery. These include but are not limited to the elements of wound healing, hemostasis, hemolytic disorders, oncology,
Program Requirements for Residency Education in General Surgery

1. Consist of at least 5 years, of which
   a. not more than 12 months may be devoted to education in a single surgical discipline other than the principal components of surgery;
   b. not more than 6 months in total may be allocated to nonsurgical clinical disciplines such as internal medicine, pediatrics, gastroenterology, anesthesiology, or surgical pathology;
   c. at least 3½ years must be clinical surgery, with experience in endoscopy, surgical intensive care, and emergency room included under this category; and
   d. 3 of the clinical surgery years must be concerned with the principal components of general surgery, as listed in 1B.
2. Commit the chief or final clinical year to the principal components of general surgery at the parent or integrated institution(s).
   a. In the chief year, not more than 4 months may be devoted exclusively to any one principal component of general surgery.
   b. In the chief year, residents must rotate only on services devoted to the principal components of general surgery, but they may have primary responsibility for surgical specialty cases if the patients are on a general surgical service.
   c. In the chief year, with prior approval of the RRC, a rotation on a pediatric surgical service may be acceptable under the following conditions:
      1. That the resident's experience in the principal components of general surgery is adequate;
      2. That the resident is responsible for the preoperative, operative, and postoperative care of the pediatric surgical patient;
      3. That the personnel and facilities of the program are adequate for the specialty.
3. Provide personal experience to each resident in performing a variety of rigid and flexible endoscopic techniques, including laryngoscopy, bronchoscopy, esophagoscopy, gastroscopy, colonoscopy, diagnostic and therapeutic laparoscopy, and intraoperative cholecystoscopy, as well as new and evolving endoscopic techniques.
4. Provide sufficient experience in an emergency room and in intensive care units to manage patients with severe and complex illnesses and with major injuries requiring critical care.
5. Enable the resident to acquire an understanding of the principles of and to have a personal clinical experience in the surgical specialties, including:
   a. preoperative, operative, and postoperative care in cardiothoracic surgery, pediatric surgery, plastic surgery, burns, and transplant surgery and
   b. participation in the overall management of patients with common problems in urology, gynecology, neurosurgical surgery, orthopedics, and anesthesiology.

   These experiences may be provided either by rotation through that specialty or through patient care activities, which must be documented by means of an operative log, record, or registry. At the time of program review, a listing of the goals and objectives that each program maintains for each surgical specialty should be available, as well as a description of the process through which these goals are to be achieved for each resident.
6. Provide the opportunity for surgical residents to manage on the surgical services patients who may or may not require surgical intervention (eg, patients with pancreatitis, portal hypertension, multiple trauma, immunosuppression) and to acquire skill in such nonoperative management.
7. Provide teaching in critical thinking, design of experiments, and evaluation of data, as well as in technological advances that relate to surgery and the care of patients with surgical diseases.

II. Training Program
A. Program Goals and Design
1. The director and teaching staff of a program must prepare and comply with written educational goals for the program. All educational components of a residency program should be related to these goals.
2. The program design and/or structure must be approved by the Residency Review Committee (RRC) as part of the regular review process.
B. Duration and Scope
 Five years of graduate training in surgery after graduation from medical school is the minimum amount of time required for acquisition of necessary knowledge, technical skill, and judgment. Any program that extends training beyond these minimum requirements must present a clear educational rationale consonant with the program requirements and objectives for residency training. The program director must obtain approval of the RRC prior to implementation and at each subsequent review of the program. Prior to entry in the program, each resident must be notified in writing of the required length of training. All years must be in an accredited program under the guidance of the program director in surgery, regardless of rotations to other disciplines.
   To be acceptable, a program must meet the following requirements:
8. Encourage participation by the residents in clinical and/or laboratory research.

C. Volume and Complexity
Operative skill is essential for the surgeon and can be acquired only through personal experience and training. The program must provide for sufficient operative experience to train qualified surgeons, taking into account individual capability and rate of progress.

1. The volume and variety of the operative experience of each resident for the entire training program must be such as to ensure:
   a. a balanced experience in each of the principal components of general surgery, namely, head and neck; breast; skin and soft tissues; alimentary tract; abdomen; vascular system; endocrine system; the comprehensive management of trauma, burns, and emergency surgery; and surgical critical care.
   b. a sufficient number and distribution of complex cases, as determined by the RRC, for the achievement of adequate operative skill and surgical judgment.

2. The program director must ensure that the operative experience of residents in the same program is comparable. While the overall number of major operations to be performed by each resident is not specified, an acceptable range is from 500 to 1000 major cases in all years and from 150 to 300 major cases in the chief year.

   Operative experience of any one resident in excess of 450 cases for the chief year or 1500 cases for all years must be justified by the program director.

3. When previous personal operative experience justifies a teaching role, residents should act as teaching assistants and list such cases for the fourth and fifth years only.

D. Responsibility
A resident is considered to be the surgeon when he or she can document a significant role in the following aspects of management: determination or confirmation of the diagnosis, provision of preoperative care, selection and accomplishment of the appropriate operative procedure, direction of the postoperative care, and accomplishment of sufficient follow-up to be acquainted with both the course of the disease and the outcome of its treatment. Participation in the operation only, without pre- and postoperative care, is inadequate.

E. Educational Conferences
Educational conferences must be adequate in quality and quantity to provide a review of clinical surgery as well as of advances in surgery.

   The conferences should be scheduled to permit the residents to attend on a regular basis. Participation by both residents and teaching staff must be documented.

   The following types of conferences must exist within a program:
   1. Weekly review of all current complications and deaths, including radiological and pathological correlation of surgical specimens and autopsies
   2. A course or structured series of conferences to ensure coverage of the basic and clinical sciences fundamental to surgery in general; sole reliance on textbook review is inadequate
   3. Regular organized clinical teaching, such as ward rounds and clinical conferences

F. Library
1. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.
2. Library services should include the electronic retrieval of information from medical databases.

3. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

G. Working Environment and Hours
Graduate education in surgery requires a commitment to continuity of patient care. This continuity of care must take precedence without regard to the time of day, day of the week, number of hours already worked, or on-call schedules. At the same time, patients have a right to expect a healthy, alert, responsible, and responsive physician dedicated to delivering effective and appropriate care.

   The program director must establish an environment that is optimal both for resident education and for patient care, while ensuring that undue stress and fatigue among residents are avoided. It is his or her responsibility to ensure assignment of appropriate in-hospital duty hours so that residents are not required to perform excessively difficult or prolonged duties regularly. It is desirable that residents' work schedules be designed so that on average, excluding exceptional patient care needs, residents have at least 1 day out of 7 free of routine responsibilities and be on call in the hospital no more often than every third night. During these on-call hours, residents should be provided with adequate sleeping, lounge, and food facilities. There must be adequate backup so that patient care is not jeopardized during or following assigned periods of duty. Support services must be such that residents do not spend an inordinate amount of time in noneducational activities that can be discharged properly by other personnel.

   Different specialties and different rotations may require different working hours and patterns. A distinction must be made between on-call time in the hospital and on-call availability at home vis-a-vis actual hours worked. The ratio of hours worked to on-call time will vary, particularly at the senior levels, and therefore necessitates flexibility.

   Residency training in surgery is a full-time responsibility; activities outside the educational program must not interfere with the resident's performance in the educational process, as determined by the program director, nor must they interfere with the residents' opportunities for rest, relaxation, and study.

III. Teaching Staff
The establishment of an inquiring and scholarly environment in the parent and integrated institution(s) is the primary responsibility of the teaching staff in a general surgery training program. Only in such a milieu can residents develop the facility for critical analysis and the further growth potential requisite for a lifetime of self-education after the completion of formal residency training. The teaching staff that is responsible for the direction and execution of the program must be well qualified to create and maintain such an environment and be of sufficient diversity of interest that the many facets of surgery are represented.

A. Program Director
There must be a single program director responsible for the program.

   i. Qualifications of the Program Director
   a. Requisite clinical, educational, and administrative abilities and experience, as well as adequate scholarly activity as documented in his or her curriculum vitae.
   b. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)
   c. Certification by the American Board of Surgery or equivalent qualifications, as determined by the RRC.
d. Appointment in good standing to the medical staff of the parent or one of the integrated institutions participating in the program.
e. Appointment, as a normal rule, for at least the duration of the program plus 1 year; that is, a minimum of 6 years. Persons appointed or elected for short durations or in an honorary capacity cannot serve as program directors.

2. Responsibilities of the Program Director
The program director's responsibility is to support the residency training program by devoting his or her principal effort to its management and administration, as well as to teaching, research, and clinical care limited to the parent or integrated institution(s). Therefore, the program director shall:

a. Prepare a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.
b. Designate other well-qualified surgeons to assist in the supervision of the resident staff so that for each approved chief residency position there is at least one geographic full-time teaching staff member, in addition to the program director, whose major function is to support the residency program. These key staff members must be appointed for a period long enough to ensure adequate continuity in the supervision of the resident staff.
c. Be responsible for rotations and staff appointments of attending surgeons on the teaching services in the parent and in all integrated institutions.
d. Select residents for appointment to the program in accordance with institutional and departmental policies and procedures. The program director shall also make resident assignments and be responsible for the proper conduct of the educational activities; namely, for residents' supervision, direction, and administration in all participating institutions.
e. Provide residents with explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.
f. Implement fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.
g. Monitor resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.
h. Provide complete and accurate program information forms and resident operative records to the RRC, so that an appropriate assessment of the program can be made.

B. Other Teaching Staff
1. There must be a sufficient number of teaching staff with documented qualifications to instruct and supervise adequately all the residents in the program. Surgeons with teaching responsibilities should be certified by the American Board of Surgery or possess suitable equivalent qualifications, as determined by the RRC. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities.

2. The teaching staff must include members with diverse expertise to meet the needs of the training program. All members of the staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.

3. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

4. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

5. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

C. Other Program Personnel
Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

D. Scholarly Environment
The quality of the educational environment of the parent and integrated institutions is of paramount importance to the program. Staff activity at affiliated institutions cannot account for or substitute for the educational environment of the parent and integrated institutions. Adequate documentation of scholarly activity on the part of the program director and the teaching staff at the parent and integrated institutions must be submitted at the time of the program reviews. Documentation of scholarly activity is based on:

1. Participation in continuing surgical education
2. Participation in regional or national surgical scientific societies
3. Presentation and publication of scientific studies
4. Demonstration of an active interest in research as it pertains to their own special surgical interests. The RRC will consider documented involvement in the following as indications of the commitment of the staff to research:
   a. Projects that are funded following peer review
   b. Publications in peer-reviewed journals
   c. Presentations at national and regional scientific meetings
   d. Research protocols that have been approved by appropriate institutional committees or other organizations

While not all members of a teaching staff can be investigators, clinical and/or basic science research must be ongoing in the department of surgery of the parent and integrated institution(s). Research on the part of residents is not a substitute for the involvement of the program director and teaching staff. The staff as a whole must document active involvement in all phases of scholarly activity as defined above to be considered adequate to conduct a program of graduate education in surgery.

E. Supervision
The attending physician has both an ethical and a legal responsibility for the overall care of the individual patient and for the supervision of the resident involved in the care of that patient. Although they require less direction than junior residents, even the most senior residents must be supervised. A chain of command that emphasizes graded authority and increasing responsibility as experi-
ence is gained must be established. Judgments on this delegation of responsibility must be made by the attending surgeon, who is ultimately responsible for a patient's care, based on his or her direct observation and knowledge of each resident's skills and ability.

To ensure the fulfillment of these responsibilities, the following principles of supervision must be operative within a training program:

1. Supervision of residents must be specified in the bylaws, policies, procedures, rules, and/or regulations of the department.
2. Evidence that adequate supervision exists within a program must be provided to the site visitor at the time of program review in the form of signed notes in the patient charts and/or other such records, as well as through personal interviews of residents.
3. Proper supervision must not conflict with progressively more independent decision making on the part of the resident; thus, the degree of supervision may vary with the clinical circumstances and the training level of the resident. However, members of the teaching staff must always be immediately available for consultation and support to exercise their responsibilities properly.

IV. Outpatient Responsibilities

To be adequate, a program must document both inpatient and outpatient activities. Outpatient activities constitute an essential component for providing adequate experience in continuity of patient care. These activities should be conducted in such a way that the resident has an opportunity to examine patients preoperatively, has ample opportunity to consult with the attending surgeon regarding operative care, and has an opportunity to participate in the operation and in the immediate postoperative care until release from the facility. To participate in posthospital care, the resident has the responsibility for seeing patients personally in an outpatient setting and consulting with the attending surgeon regarding follow-up care.

V. Special Trainees

At the time of each program survey, or at other times on request of the RRC, the program must provide to the RRC a report on all special trainees of any training programs, both approved and unapproved, in the parent and integrated institutions that might affect the experience of the residents in the core program in general surgery. Examples of such programs include fellowships or residencies in vascular surgery, oncologic surgery, head and neck surgery, critical care, trauma, endoscopy, gastroenterology, transplantation, pediatric surgery, and endocrine surgery that provide clinical experience to trainees outside the general surgery residency program. The report must describe in detail the relationship of the special trainee(s) to the residents in the general surgery program. A program in which the experience of general surgery residents is adversely affected by the presence of other trainees will be subject to adverse action by the RRC.

In particular, the following are noted:
A. A special trainee may not supervise chief residents.
B. A chief resident and a special trainee may not have primary responsibility for the same patients.

VI. Affiliated and Integrated Institutions

An institution that cannot provide sufficient resources and clinical experience within its own facilities may make arrangements with other institutions through formal written agreements to provide additional resources and experience. All such agreements are subject to approval by the RRC, either as indicated below in item VI.C or at the time of program review.

A. Institutions may be affiliated with the parent institution through an affiliation agreement, which must cover the areas specified in the institutional requirements. Affiliated institutions must provide the educational goals of the program, rather than simply enrolling the program, and must not be added primarily for the purpose of meeting service needs.

B. Institutions may be integrated with the parent institution through an integration agreement that must specify, in addition to the institutional requirements, that the program director of the parent institution (1) appoint the members of the teaching staff at the integrated institution, (2) appoint the chief or director of the teaching service in the integrated institution, (3) appoint all residents in the program, and (4) determine all rotations and assignments of both residents and members of the teaching staff. As a general rule, institutions integrated with parent hospitals must be in such close geographic proximity as to allow all residents to attend joint conferences, basic science lectures, and morbidity and mortality reviews in a regularly documented basis in a central location. If the institutions are geographically so remote that joint conferences cannot be held, an equivalent educational program of lectures and conferences in the integrated institution must be fully documented.

C. Prior approval must be obtained from the RRC (1) for a portion of the final year to be spent at an affiliated institution (2) for affiliations with rotations of 6 months or more as well as for all integrations and (3) for more than 1 year total to be spent away from the integrated institution(s).

VII. Number of Approved Residency Positions

A. The number of positions in the training program must be approved by the RRC; this number will include all residents who are appointed for a full academic year in the training program. Any request for changes in the resident complement must be justified in terms of the educational goals of the program.

B. The number of PGY1, PGY2, and PGY3 positions should be consistent with the number of chief residency positions as well as with the number of positions for providing subspecialty training to identifiable subspecialties. The RRC permits modest variations from the approved number of PGY1, PGY2, and PGY3 positions on a temporary (1-year) basis only. A modest variation is understood by the RRC as being within a 10% variation in the total number of PGY1, PGY2, and PGY3 residents.

VIII. Evaluation

A. Programs of graduate education in surgery must be so constructed that there is a clear demonstration by the resident of acquisition of a solid foundation of fundamental surgical knowledge prior to progression in the program to the level of independent but supervised patient management and operative care. An objective test mechanism is required as a component of the process of demonstration of this cognitive capability. While each program may utilize its own test instruments, the American Board of Surgery In-Training Examination (ABITE) is considered a most desirable example. However, results of the in-training examination should not be used as the only criterion of resident performance.

In addition to measuring the cognitive capability of the resident, the program must also have a system by which to measure the level of the resident's clinical qualifications as he or she progresses through the program. Any program that does not establish such a system of trainee evaluation that clearly documents the progress of each resident in meeting the cognitive and clinical goals of the program will not be considered acceptable.

B. Including the evaluation processes indicated in the previous paragraph (VII.A), the overall performance of each resident must be evaluated by the teaching staff at least every 6 months.

1. A documented record of that evaluation must be prepared and maintained for subsequent review. This permanent record of
evaluation for each resident is to be accessible to the resident and other authorized personnel.

2. All evaluations must be reviewed regularly with trainees.

C. A written final evaluation for each resident who completes the program must be provided. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.

D. The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Written evaluations by residents of the teaching staff and the program should be utilized in this process.

E. A program must strive for the highest possible quality of educational experience for the residents; it will be judged on this basis. One measure of the quality of a program is the performance of its graduates with respect to the American Board of Surgery certification process. Graduates of Accreditation Council for Graduate Medical Education-approved programs are expected to complete this process successfully. A program will be judged deficient if during the most recent 5-year period more than 50% of its graduates fail either the qualifying or the certifying examination on the first try.

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Program Requirements for Residency Education in the Subspecialties of General Surgery

I. General Information

A. A graduate training program in a subspecialty of general surgery is an educational experience of at least 1 year, designed to develop advanced knowledge and skills in a specific clinical area. All educational components of the program should be related to program goals. The program design and/or structure must be approved by the Residency Review Committee (RRC) as part of the regular review process. Subspecialty training is a component in the continuum of the education process and must be in addition to the requirements for complete residency training in general surgery. Ordinarily, the subspecialty training will follow completion of an accredited general surgery residency program.

B. Graduate training programs in the subspecialties of general surgery may be accredited only in institutions that either sponsor a residency training program in general surgery or pediatric surgery accredited by the Accreditation Council for Graduate Medical Education or are integrated by formal agreement into such programs. The subspeciality programs will be approved only as an administratively integrated part of the approved core program in general surgery. Relotions to affiliated institutions can be approved for a period not exceeding 25% percent of the total program; adequate educational justification for such rotations must be provided to the RRC prior to implementation.

The description and regulations governing affiliated and integrated institutions in the Program Requirements for Residency Education in General Surgery also apply to the subspecialty programs of surgery.

C. Subspecialty programs will not be approved if they have substantial negative impact on the training of the general surgery residents in the core program.

II. Program Director and Teaching Staff

Subspecialty training programs must provide a scholarly environment for acquiring the necessary cognitive and procedural clinical skills essential to the practice of a specific subspecialty. This objective can be achieved only when the program director, the supporting faculty and staff, and the administration are fully committed to the educational program. It is also imperative that appropriate resources and facilities be present. Service obligations must not compromise educational goals and objectives.

A. Program Director

There must be a single program director responsible for the program.

1. Qualifications of the Program Director

   The subspecialty program director must be a surgeon who is qualified to supervise and to educate residents appropriately in the specific subspecialty.
   a. The director must either be certified in the subspecialty by the American Board of Surgery or possess equivalent qualifications.
   b. The director must have an appointment in good standing to the medical staff of an institution participating in the program.
   c. The director must be licensed to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)

2. Responsibilities of the Program Director

   It is the responsibility of the subspecialty program director to support the residency training program by devoting his or her principal effort to its management and administration, as well as to teaching, research, and clinical care limited to the integrated institutions. This general responsibility includes the following specifics:
   a. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.
   b. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.
   c. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program.
   d. The supervision of residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.
   e. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.
   f. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.
g. Preparation of an accurate statistical and narrative description of the program.

B. Teaching Staff
1. There must be a sufficient number of teaching staff with documented qualifications to instruct and supervise adequately all the residents in the program. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities.

2. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.

3. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

4. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

5. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, and the financial and administrative support of the program. The volume and variety of patient care available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

C. Other Program Personnel
Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

III. Educational Principles
The principles of education enumerated in the Program Requirements for Residency Education in General Surgery are also applicable to the subspecialty programs.

A. The program directors for both the subspecialty and the core programs, as well as the institution itself, are responsible for ensuring that adequate facilities and resources are available to achieve the educational objectives.

B. A postgraduate residency must provide advanced education so that the residents can acquire special skill and knowledge in a specific subspecialty. This education should consist of a cognitive and a technical component. The cognitive component should emphasize the scholarly attributes of self-instruction, teaching, skilled clinical analysis, sound surgical judgment, and research creativity. The technical component must provide appropriate opportunities for the residents to acquire the operative skills required for the practice of the subspecialty.

C. The program director must establish an environment that is optimal both for resident education and for patient care, including the responsibility for continuity of care, while ensuring that undue stress and fatigue among residents are avoided. It is the program director’s responsibility to ensure assignment of appropriate in-hospital duty hours so that residents are not subjected to excessively difficult or prolonged working hours. It is desirable that residents’ work schedules be designed so that on average, excluding exceptional patient care needs, residents have at least 1 day out of 7 free of routine responsibilities and be on call in the hospital no more often than every third night. Different specialties and different rotations may require different working hours and patterns. A distinction must be made between on-call time in the hospital and on-call availability at home vis-à-vis actual hours worked. The ratio of hours worked to on-call time will vary, particularly at the senior levels, and therefore necessitates flexibility.

D. During the on-call hours residents should be provided with adequate sleeping, lounge, and food facilities. There must be adequate backup so that patient care is not jeopardized during or following assigned periods of duty. Support services and systems must be such that the resident does not spend an inordinate amount of time in noneducational activities that can be discharged properly by other personnel.

IV. Educational Components
Subspecialty programs must include the following educational components:

A. A sufficient number of patients must be available to ensure appropriate inpatient and outpatient experience for each subspecialty resident, without adversely affecting the experience of residents in the general surgery core program. There must be adequate responsibility for continuity of care, to include prehospital and posthospital experience.

B. Subspecialty conferences, including review of all current complications and deaths; seminars; and clinical and basic science instruction must be regularly scheduled. Active participation of the subspecialty resident in the planning and the production of these meetings is essential.

C. A resident must have the opportunity to provide consultation with faculty supervision. He or she should have clearly defined educational responsibilities for other residents, medical students, and professional personnel. These teaching experiences should correlate basic biomedical knowledge with the clinical aspects of the subspecialty.

D. There must be close interaction between the core residency program in general surgery and the subspecialty program. Lines of responsibility for the general surgery residents and the subspecialty resident must be clearly defined. It is imperative that the educational program for the subspecialty resident not adversely affect the training of the general surgery residents, in terms of either operative experience or patient responsibility. In particular, the following are noted:

1. A subspecialty resident may be a teaching assistant for residents other than general surgery chief residents.

2. A chief resident in general surgery and a subspecialty resident may not have primary responsibility for the same patients.

The subspecialty resident should maintain a close working relationship with residents and fellows in general surgery and in other disciplines such as radiology, pathology, medicine, and pediatrics.

E. A subspecialty program must offer supervised training to ensure the acquisition of the necessary preoperative, operative, and postoperative skills integral to the subspecialty discipline. Instruction and experience must be sufficient for the residents to acquire an understanding of the common procedures of the subspecialty and their indications, risks, and limitations.

F. Adequate and appropriate supervision of subspecialty residents must be provided at all times in accord with their level of experience and expertise.

V. Program Research and Scholarly Activity
Graduate medical education must take place in an environment of inquiry and scholarship, in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility.
Program Requirements for Residency Education in the Subspecialties of General Surgery

A. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the teaching staff. While not all members of a teaching staff must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity. This activity should include:
1. Active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.
2. Participation in journal clubs and research conferences.
3. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.
4. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.
5. Offering of guidance and technical support (eg, research design, statistical analysis) for residents involved in research.
6. Provision of support for resident participation in scholarly activities.

B. A subspecialty program should have an investigational component such that the residents may become familiar with the design, implementation, and interpretation of clinical research studies. Facilities should be made available for research activity.

VI. Library
1. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.
2. Library services should include the electronic retrieval of information from medical databases.
3. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

VII. Evaluation
A. Residents
There must be regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician.

The program director, with participation of members of the teaching staff, shall:
1. At least semiannually evaluate the knowledge, skills and professional growth of the residents, using appropriate criteria and procedures.
2. Communicate each evaluation to the resident in a timely manner.
3. Advise residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.
4. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.
5. The provision of a written final evaluation is required for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.

B. Program Director
The subspecialty program director should be evaluated annually by the director of the core general surgery program regarding teaching, scholarly research productivity, patient care activities, and administrative capabilities.

C. Program
The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed by the program director, the core general surgery program director, and the Institutional Review Committee on a regular basis. Written evaluations by residents should be utilized in this process.

D. Efficacy of Program
An important measure of the efficacy of the program is the performance of its graduates on the certification examinations offered by the American Board of Surgery. It is expected that 50% or more of the graduates of the program will become certified on their first attempt.

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Program Requirements for Residency Education in Surgical Critical Care

I. General Characteristics
A. Surgical critical care deals with complex surgical and medical problems in critically ill surgical patients. Institutions sponsoring graduate educational programs in surgical critical care must provide the educational resources to allow residents to develop advanced proficiency in the management of critically ill surgical patients and to develop the qualifications necessary to supervise surgical critical care units. The educational program must be an integral part of and enhance an accredited core program in general surgery.

B. Completion of at least 3 clinical years in an accredited graduate educational program in the disciplines of general surgery, neurosurgery, urology, or obstetrics and gynecology is a prerequisite. A subspecialty educational program in surgical critical care is in addition to the requirements for critical care education set forth in the program requirements for these core programs. There should be an institutional policy governing the educational resources committed to critical care programs and ensuring cooperation of all involved disciplines. When more than one critical care program exists in an institution, it will be the responsibility of the institution to coordinate interdisciplinary requirements.

II. Duration and Scope of Training
A. Graduate education in surgical critical care shall be 12 months, of which 9 months must be spent in a surgical intensive care unit (ICU). The 12 months must be devoted to advanced educational activities related to the care of critically ill patients and to the administration of critical care units.

B. A surgical critical care program must include primary educational activities in a surgical critical care unit with pediatric and/or adult patients, located in an institution that has been approved by the Residency Review Committee (RRC) for Surgery as an integrated institution (as defined in the Program Requirements for Residency Education in General Surgery) with a core general surgery or pediatric surgery residency program.

Training may take place in various settings, such as a general surgical ICU, a cardiothoracic ICU, a trauma care unit, a burn
III. Objectives

A. The completion of an accredited surgical residency training program qualifies the surgeon to care for the basic problems of critically ill surgical patients. Therefore, the surgical critical care program must enable the resident to acquire an advanced body of knowledge and level of skill in the management of critically ill surgical patients in order to assume a leadership role in teaching and in research in surgical critical care. This advanced body of knowledge and level of skill must include the mastery of (1) the use of advanced technology and instrumentation to monitor the physiologic status of patients in the neonatal, pediatric, childbearing, or advanced years; (2) organizational and administrative aspects of a critical care unit; (3) ethical, economic, and legal issues as they pertain to critical care.

B. In addition, individuals completing a training program in surgical critical care will be expected to be able to:
   1. Teach the specialty of surgical critical care.
   2. Conduct research in the various areas of surgical critical care, such as new instrumentation, identification of important physiologic parameters, or evaluation of pharmacologic agents in critically ill patients.
   3. Administer a surgical critical care unit and appoint, train, and supervise specialized personnel; establish policy and procedures for the unit; and coordinate the activities of the unit with other administrative units within the hospital.

IV. Organization of the Staff

A. The critical care training program must be under the direction of a surgeon certified in surgical critical care by the American Board of Surgery or who has equivalent surgical training as well as the appropriate qualifications and documented experience in surgical critical care.

B. The program director of the critical care program must be the director or codirector of one or more of the critical care units in which the clinical aspects of the critical care program take place and must be personally involved in clinical supervision and teaching of general surgery and surgical critical care residents in that unit.

C. The program director shall have administrative responsibility for the surgical critical care educational program and shall appoint all residents and teaching staff to the program and determine their duties.

D. In the teaching environment of the surgical critical care unit, it is recognized that the teaching staff in surgery, medicine, pediatrics, obstetrics and gynecology, anesthesiology, and other disciplines may all be involved in the care of specific patients; therefore, a collegial relationship must exist between the surgical director of the critical care educational program and the teaching staff to enhance the educational opportunities for all residents and trainees.

E. The teaching staff must be specifically qualified in the care of critically ill surgical patients and must provide the program director with regular evaluations of the trainees. At least one surgeon qualified in surgical critical care must be appointed to the teaching staff for every surgical critical care resident enrolled in the program.

F. The teaching staff must have real and demonstrated interest in teaching and set an example for trainees by documented engagement in scholarly pursuits, to include (1) participation in their own continuing education in surgical critical care, (2) participation in regional and national surgical scientific societies, and (3) demonstration of an active interest in research as it pertains to critical care problems.

V. Clinical and Educational Facilities and Resources

A. The surgical critical care program must function in a unit that has sufficient numbers of knowledgeable personnel and the necessary equipment to care for critically ill surgical patients.

B. Personnel should include specially trained nurses and technicians who are skilled in critical care instrumentation, respiratory function, and laboratory medicine.

C. The critical care unit must be located in a designated area within the hospital, constructed and designed specifically for the care of critically ill patients.

D. Equipment and personnel in the critical care unit should be centrally concentrated to provide efficient and expeditious operation.

E. There should be a supporting laboratory available to provide complete and prompt laboratory evaluation.

F. The objectives of a surgical critical care program can be achieved only when the program is based within an institution that has an accredited residency program in general surgery. It is desirable for the institution to have accredited residencies in the surgical specialties and in disciplines that particularly relate to surgery, such as internal medicine, radiology, pathology, and anesthesiology.

G. An adequate hospital library must be readily available to provide easy access to information for patient care or scholarly pursuits.

H. Conveniently located and adequate space for conferences and study are essential.

I. The average daily census for the surgical critical care unit to which the resident is assigned shall permit a resident/patient ratio of one resident to five patients. The qualified surgical faculty-to-critical care resident ratio shall be at least one to one. These ratios are sufficient to provide an adequate clinical and supervisory base.

J. To provide sufficient breadth in patient exposure, a critical care program that averages a daily census of at least 10 patients is required.

K. The record-keeping system must maintain the records of patients in the critical care unit as retrievable parts of the hospital chart, so they can be available for evaluation.

VI. Educational Program

A. Curriculum Overview

The program must provide the opportunity for residents to acquire advanced knowledge of the following aspects of critical care, particularly as they relate to the management of patients with hemodynamic instability, multiple system organ failure, and complex coexisting medical problems:

1. Cardiorespiratory resuscitation
2. Physiology, pathophysiology, diagnosis, and therapy of disorders of the cardiovascular, respiratory, gastrointestinal, genitourinary, neurologic, endocrine, musculoskeletal, and immune systems, as well as of infectious diseases
3. Metabolic, nutritional, and endocrine effects of critical illness
4. Hematologic and coagulation disorders
5. Critical obstetric and gynecologic disorders
6. Trauma, thermal, electrical, and radiation injuries
7. Monitoring and medical instrumentation
8. Critical pediatric surgical conditions
9. Pharmacokinetics and dynamics of drug metabolism and excretion in critical illness
10. Ethical and legal aspects of surgical critical care
11. Principles and techniques of administration and management
12. Biostatistics and experimental design

B. Critical Care Skills
The program must provide supervised training that will enable the resident to gain competence in the application of the following critical care skills:
1. Respiratory: airway management, including endoscopy and management of respiratory systems
2. Circulatory: invasive and noninvasive monitoring techniques, including transesophageal and precordial cardiac ultrasound and application of transvenous pacemakers; computations of cardiac output and of systemic and pulmonary vascular resistance; monitoring and interpretation of electrocardiograms and management of cardiac assist devices
3. Neurological: the performance of complete neurological examinations; use of intracranial pressure monitoring techniques and of the electroencephalogram to evaluate cerebral function and application of hypothermia in the management of cerebral trauma
4. Renal: the evaluation of renal function; peritoneal dialysis and hemofiltration; knowledge of the indications and complications of hemodialysis
5. Gastrointestinal: utilization of gastrointestinal intubation and endoscopic techniques in the management of the critically ill patient; application of enteral feedings; and management of stomas, fistulas, and percutaneous catheter devices
6. Hematologic: application of autotransfusion, assessment of coagulation status, and appropriate use of component therapy
7. Infectious disease: classification of infections and application of isolation techniques, pharmacokinetics, drug interactions, and management of antibiotic therapy during organ failure; nosocomial infections; indications for applications of hyperbaric oxygen therapy
8. Nutritional: application of parenteral and enteral nutrition; monitoring and assessment of metabolism and nutrition
9. Monitoring/bioengineering: use and calibration of transducers, amplifiers, and recorders
10. Miscellaneous: use of special beds for specific injuries; employment of pneumatic antishock garments, traction, and fixation devices

VII. Documentation of Experience
The program must document to the site visitor that residents in the surgical critical care program have had direct involvement in the management of a broad spectrum of critically ill surgical patients.

VIII. Other Information
In addition to these requirements specific to surgical critical care, the Program Requirements for Residency Education in the Subspecialties of General Surgery also apply to all surgical critical care programs.

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Program Requirements for Residency Education in Hand Surgery Related to General Surgery

I. Educational Program
A. Surgery of the hand includes the investigation, preservation, and restoration of all structures of the upper extremity that directly affect the form and function of the limb, wrist, and hand.

B. Subspecialty education in hand surgery must be organized to provide experience for the trainee to acquire the competency of a specialist; it should not be less than 1 continuous year and should ordinarily follow completion of full training in one of the parent disciplines, i.e., general surgery, orthopedic surgery, or plastic surgery.

C. Clinical experience should include opportunities to observe and manage patients of all ages with a wide variety of disorders of the upper extremity as well as to learn the effectiveness of therapeutic programs. The program should be structured to permit the trainee to develop diagnostic, procedural, and technical skills essential to the performance of hand surgery. It should provide basic and advanced training as well as personal operative experience to ensure the production of qualified surgeons within this specialized field.

D. It is imperative that the educational program for the trainee not adversely affect the training in hand surgery of the general surgery residents, either in terms of operative experience or patient responsibility.

II. Facilities and Resources
A. Modern facilities to accomplish the overall educational program must be available and functioning. These include inpatient care, ambulatory care, and laboratory resources for adult and pediatric patients and, specifically, support services in the diagnostic field of pathology, radiology, physical and occupational therapy, orthotics, and prosthetics. This must include the opportunity for continuing personal posthospital follow-up of patients cared for by the trainee.

B. A training program should be conducted in a facility in which there is accredited training in surgery, plastic surgery, and orthopedic surgery, as well as in other medical and surgical specialties and subspecialties.

III. Specific Knowledge and Skills
The training program should provide opportunities for trainees to develop clinical knowledge and skill in the field of hand surgery. Examples of the knowledge and skills that are desirable include but are not limited to trauma and its sequelae, congenital and developmental disorders, infections and metabolic disorders, neoplasia, vascular disorders, and degenerative and rheumatologic diseases. The trainee will be expected in the course of training to acquire the capability of diagnosing, interpreting the laboratory data relative to, and executing a treatment plan with the appropriate technical skills for managing the above disorders. The trainee must obtain experience in microsurgery and other special technology relative to the management of hand problems. The trainee must acquire knowledge in interpretation of the special diagnostic skills, such as electrodagnosis and radiology, relative to treating problems of the hand. The trainee will be expected to obtain a fundamental understanding of these problems as they relate to the patient's initial management, including full rehabilitation services, aftercare, and final evaluation.

IV. Special Features
Special features will include but are not necessarily limited to re- plantation, biology, histology, prosthesis, prosthetics, rehabilitation, microsurgery (neurological and vascular), tendon transfer, and grafts.

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Program Requirements for Residency Education in Pediatric Surgery

I. General Characteristics of Accredited Programs

A residency program in pediatric surgery must provide a structured curriculum and adequate clinical experience in the fundamental areas of surgery related to infants and children. The goal is to prepare residents to function as qualified practitioners of pediatric surgery at the high level of performance expected of board-certified specialists. The educational components of the program, therefore, must be of the highest priority. Residents must be provided adequate time and sufficient facilities for study. While every program carries a commitment of service to patients, the service responsibilities must support and not detract from the educational activities.

II. Teaching Staff

The staff responsible for the organization and performance of the pediatric surgical program must be well qualified and diversified, so as to represent the many facets of pediatric surgery.

A. Program Director

The program director must be dedicated to and actively engaged in surgical education and must be responsible for the proper conduct of the educational activities of the program. The program director must:

1. Be institutionally based and be appointed for at least the duration of the program plus 1 year
2. Be qualified in surgery, certified by the American Board of Surgery, and hold a current Certificate of Special Qualifications in Pediatric Surgery or have equivalent qualifications
3. Be responsible for rotations and staff appointments of attending surgeons on the teaching services
4. Make resident appointments and assignments and be responsible for the proper conduct of the educational activities, particularly for the supervision and direction of the residents
5. Provide complete and accurate program information forms and resident operative records to the Residency Review Committee (RRC) so that an appropriate assessment of the program can be made.

B. Other Teaching Staff

1. The teaching staff must include, at a minimum, one other pediatric surgeon who possesses the qualifications listed for the program director in II.A.2.
2. The key staff members must be appointed for a period long enough to ensure continuity in the supervision of the program. They must be formally organized and meet regularly.
3. It is essential that the members of the teaching staff provide exemplary models to the trainees by their dedication to patient care and education. Participation and productivity in scholarly pursuits by the teaching staff is a required attribute of an accredited program.

III. Institution

In addition to the essentials outlined in the institutional requirements, institutions with an approved training program in pediatric surgery must have the following characteristics:

A. There shall be inpatient pediatric surgical admissions adequate to provide educational experience for the program. Intensive care units for both infants and older children are essential.
B. Pediatric surgical outpatient care sessions must meet on a regular basis. They shall include initial evaluation of ambulatory patients with surgical conditions as well as both short-term and ongoing follow-up management of these patients.

C. An emergency department in which infants and children can be efficiently managed 24 hours a day is essential. The pediatric surgical staff will ordinarily serve as consultants for this department. The pediatric surgical service must direct the care of all patients with traumatic or thermal injuries involving multiple organ systems.

D. To provide the necessary breadth of experience, an accredited residency training program in pediatrics is required within the primary institution. Residency programs or other equivalent clinical expertise in other specialties, particularly radiology and pathology, are highly desirable.

E. The department of radiology must have one or more staff with training, interest, competence, and experience in the radiologic evaluation of infants and children. The department should be staffed and organized to permit efficient and complete evaluation of patients 24 hours a day. The department should be furnished and equipped to provide up-to-date imaging capability, including such procedures as ultrasonography and computerized scanning. Facilities for nuclear medicine, magnetic resonance imaging, and interventional radiology should be available within the institution.

F. The department of pathology should have one or more staff with special training, interest, competence, and experience in pediatric pathology. The department should provide efficient and expert surgical pathology service, and surgical pathology consultation must be available at all times. The department of pathology must participate in the pediatric surgical educational program, including the conduct of appropriate conferences at which the current surgical pathology material is presented and discussed. These conferences must be attended by both staff and residents of the pediatric surgical service.

G. Within the department of anesthesiology there must be anesthesiologists with special training, interest, competence, and experience in the anesthesia of infants and children. The number of such anesthesiologists must be consistent with the volume of surgical cases in the pediatric age group.

H. The institutional library must contain a representative and authoritative collection of books and journals on pediatric surgery, pediatrics, general surgery, other surgical specialties, radiology, and the basic sciences. The library shall be managed and supervised by a well-qualified medical librarian. The Index Medicus must be part of the library, and access to computerized literature search facilities is highly desirable.

IV. Duration of Training

A. Before beginning a residency in pediatric surgery, each resident must have satisfactorily completed a program in general surgery accredited by the Accreditation Council for Graduate Medical Education (ACGME) or the Royal College of Physicians and Surgeons of Canada. He or she must be admissible to examination by the American Board of Surgery (or its equivalent) be certified by that board.

E. The residency program in pediatric surgery must be accredited for 2 years, 18 months of which must be devoted to clinical pediatric surgery. The remaining required 6 months may be devoted to related clinical disciplines designed to enhance the educational experience or may be devoted to scholarly activities. The last 12 months of the clinical training must be at the chief pediatric surgical resident level with a high degree of responsibility for patient management, including semi-independent operative experience under appropriate supervision.
V. Scope and Content of Program

A. The program must provide both clinical experience and education in the fundamental areas of surgery related to infants and children.

1. Residents must be given responsibility for surgical management so that they may attain detailed knowledge of congenital, neoplastic, infectious, and other acquired conditions of the gastrointestinal system and other abdominal organs; of the blood and vascular system; of the integument; of the diaphragm and thorax, exclusive of the heart; of the endocrine glands; of the gonads and reproductive organs, and of the head and neck.

2. In addition, an opportunity for similar experience in traumatic conditions of the abdomen, chest, head and neck, and extremities must be provided. Particularly, the resident must have sufficient experience to become expert in the management of children who have sustained injuries to multiple organs. The resident also must have sufficient opportunity to manage on the surgical service patients who may or may not require surgical intervention and to acquire skill in such nonoperative management.

3. The resident also should have sufficient exposure in endoscopy to become competent in endoscopy of the airway and gastrointestinal tract, including laryngoscopy, bronchoscopy, esophagoscopy, and gastroendoscopy. Experience in lower intestinal endoscopy, laparoscopy, and cystoscopy are desirable.

4. The resident must gain adequate understanding of the principles and operative experience in the management of the more common problems in urologic surgery.

5. The resident must have the opportunity to gain adequate knowledge of the basic principles of cardiothoracic surgery, gynecology, neurologic surgery, orthopedics, otolaryngology, anesthesia, vascular surgery, transplant surgery, and the management of burns. While rotations on these services are highly desirable, the program may enable the resident to acquire an understanding of the principles of these subspecialties by a structured curriculum that adequately deals with these surgical areas.

6. The resident must gain experience and competence in the complete care of the critically ill infant or child, including the following: (a) cardiopulmonary resuscitation, (b) management of patients on respirators, (c) invasive monitoring techniques and interpretation, (d) nutritional assessment and management, and (e) competence in the recognition and management of clotting and coagulation disorders.

B. The program must provide a course or structured series of conferences to ensure coverage of the basic and clinical sciences fundamental to pediatric surgery, to include but not be limited to embryology; genetics; wound healing; hemostasis and blood disorders; immunology; transplantation; and physiology and pathology of the circulatory, respiratory, gastrointestinal, gastrostomy, and endocrine systems. Similarly, the program must provide appropriate education in fluid and electrolyte balance, nutrition, infection, metabolic response to injury, and anesthesiology.

C. The program must incorporate structured educational activities on a regular basis, to include:

1. Teaching rounds with bedside teaching conducted by the surgical staff.
2. Staff supervision of surgical procedures performed by the resident.
3. Regular teaching conferences, held at least twice monthly, to include pediatric surgical grand rounds, morbidity and mortality conferences, and radiology conferences.

4. Other relevant multidisciplinary conferences, including surgical pathology and tumor conferences.

5. During the senior year, the residents are to be given the opportunity for personally organizing the more formal of the pediatric surgical conferences, including pediatric surgical grand rounds and the morbidity and mortality conferences. They also shall be directly responsible for a significant share of the presentations and discussions at these conferences.

D. The residents must participate in outpatient activities as an integral component of the program. In the surgical outpatient facility, the residents must have the opportunity to evaluate patients, make appropriate provisional diagnoses, initiate diagnostic procedures, and form preliminary treatment plans. In addition and of particular importance, the residents must have the opportunity for outpatient follow-up care of surgical patients. This care shall include not only the short-term evaluation and progress of patients who have had recent surgical problems or procedures but also the opportunity to see patients on a long-term basis, particularly those who have had operations for major congenital anomalies or neoplasms. An effective mechanism for follow-up must be provided for all patients, whether seen in clinics or private office settings. The program must document a satisfactory mechanism for follow-up care by the residents.

E. To meet the requirements of direct and responsible patient management, it is essential that those patients whose primary problem is surgical be on the pediatric surgical service and be directly managed by the surgical staff. Appropriate consultation with specialists such as neonatologists and intensivists is strongly encouraged. It is emphasized, however, that newborns with surgical conditions, as well as surgical patients requiring intensive care, must be on the pediatric surgical service where the care is the responsibility of the surgical staff.

F. Residents should have significant teaching responsibilities for more junior house officers and medical students assigned to the service and should also share in the development and the presentation of the formal teaching conferences. The resident's effectiveness as a teacher shall be a part of his or her overall evaluation.

G. Residents may be given the opportunity to engage in scholarly activities.

H. Rotations not to exceed 3 months may be spent at outside institutions at the discretion of the program director during the first year of training. Rotations outside the parent institution exceeding 3 months may be made only with prior approval of the RRC for Surgery. In no circumstance may outside rotations exceed a total of 6 months of the 24-month training period.

VI. Patient Volume

To be approved for training in pediatric surgery, an institution must provide an adequate number and variety of pediatric surgical patients.

A. The general pediatric surgical service should perform a minimum of 900 operations per year.

B. The chief resident must be provided with a broad and varied experience; each is expected to be responsible for at least 250 pediatric surgical operations under supervision during this year.

C. The operative experience of the residents must include a sufficient number of neonatal cases to ensure the opportunity to acquire adequate experience, knowledge, and competence in the conditions falling under this category; there also should be an adequate number of major solid tumor procedures.

D. When previous personal operative experience justifies a teaching role, residents may act as teaching assistants and list such cases in the appropriate manner.
VII. Evaluation

A. The performance of each house officer must be evaluated by the teaching staff at least every 6 months; it is required that input from other departments or services involved in the training of the residents be included in this evaluation. Records documenting the 6-month evaluations must be maintained.

B. Prior to advancement to the senior or chief resident level of supervised and semi-independent patient management and operative experience, a resident must clearly demonstrate acquisition of basic knowledge in pediatric surgery. An objective test for this purpose is required. While each program may utilize its own testing mechanism, an excellent instrument is the annual In-training Examination in Pediatric Surgery. In addition to measuring the cognitive capability of the resident, the program also must have a system by which to measure the level of the resident's clinical qualifications as he or she progresses through the program. The program must establish a system of evaluation that clearly documents the progress of each resident in meeting the cognitive and clinical goals of the program.

C. A program will be judged on the quality of educational experience provided to the residents. One measure of the quality of a program is the performance of its graduates with respect to the American Board of Surgery examinations for Certification of Special Qualification in Pediatric Surgery. Graduates of ACGME-approved programs are expected to complete this process successfully. A program will be judged deficient unless during the most recent 5-year period at least 50% of its graduates pass the qualifying and certifying examinations on the first try.

VIII. Special Information

In addition to these requirements specific to pediatric surgery, the Program Requirements for Residency Education in the Subspecialties of General Surgery also apply to all pediatric surgery programs. All questions concerning the examination for Certification of Special Qualifications in Pediatric Surgery should be addressed to the Secretary, American Board of Surgery, Inc.

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Program Requirements for Residency Education in General Vascular Surgery

I. General Characteristics of Approved Programs

Graduate training programs in general vascular surgery should be designed to provide the educational resources appropriate for the development of proficiency in the diagnosis and treatment of diseases of the arterial, venous, and lymphatic circulatory systems, exclusive of those components intrinsic to the heart, thoracic aorta, and intracranial vessels. The foregoing definition describes what is hereinafter referred to as the vascular system. The training objectives are most appropriately achieved through a structured program that is properly supervised and accredited.

II. Types of Programs

A. Appropriate education and training in general vascular surgery may be attained through two types of programs. Provision should be made, however, to ensure that in either type of program the general surgery residents' experience in vascular surgery, which is one of the principal components of general surgery, is not adversely affected, in terms of either operative experience or patient responsibility. The two types of programs are:

1. A general vascular surgery residency that follows the completion of an accredited residency program in general surgery and/or thoracic surgery.

2. A general vascular surgery residency that is a component of an accredited cardiothoracic surgery program in which patient material is adequate to fulfill the requirements of both areas of training. This specialized training in general vascular surgery is in addition to the requirement of 7 years for completion of the programs in general surgery and thoracic surgery.

B. An application for a general vascular surgery residency will not be accepted if the core program in either general surgery or thoracic surgery is not provisionally or fully approved. There should be only one general vascular surgery program per sponsoring institution.

III. Duration and Scope of Training

A. The general vascular surgery program must be of sufficient duration to allow the resident to acquire an advanced level of skill in the diagnosis and treatment of vascular diseases. The program shall not be less than 12 months in duration and shall be exclusively devoted to general vascular surgery. It shall be in addition to the training required for certification in either general surgery or thoracic surgery. Any program that extends clinical training beyond these minimum requirements must present a clear educational rationale consonant with the program requirements and objectives for residency training. The program director must obtain approval of the Residency Review Committee prior to implementation and at each subsequent review of the program. Prior to entry into the program, each resident must be notified in writing of the required length of training.

B. The program must provide instruction and require the resident to become knowledgeable in the fundamental sciences, including anatomy, embryology, physiology, and pathology, as they relate to the diagnosis and treatment of vascular lesions.

C. Familiarity with special diagnostic techniques is of great importance in the management of vascular lesions. It is essential that the resident have an acquaintance with the methods and techniques of angiography and competence in the interpretation of angiographic findings. The resident should have experience in the application, interpretation, and limitations of noninvasive vascular diagnostic techniques.

D. The resident must be provided with progressive senior surgical responsibilities in the four phases of total patient care, consisting of patient evaluation, therapeutic decisions, operative experience, and postoperative management. The focus of the program is clinical education; research, laboratory, and nonvascular clinical assignments should be related to this focus.

IV. Organization and Staff

A. To provide an effective training program, a general vascular surgery service must be organized as an identifiable unit, even though it is within the framework of a larger administrative entity such as a department of surgery or general surgery or thoracic surgery. It is highly desirable that all patients with vascular disease who are available for teaching purposes be admitted to this unit so that the patients may be centralized and utilized most efficiently for teaching.

The general vascular surgery program must be under the direction of a vascular or cardiothoracic surgeon certified by the American Board of Surgery and/or Thoracic Surgery, or possessing equivalent qualifications, and dedicated to the teaching of general vascular surgery. The director of the general vascular surgery program must have continuous responsibility and authority for administrative and teaching policies of the service.
B. Privileges on the general vascular surgery teaching service should be granted to surgeons only with the understanding that their patients are to be available for coordinated graduate education of residents. All members of the staff of the general vascular surgery unit must be highly qualified in general vascular surgery, dedicated to teaching, and must devote the necessary time and effort to the educational program. They should also engage in scholarly activities.

V. Patient Population
The institution, department, or service accredited to conduct a program of graduate education in general vascular surgery must be able to provide a sufficient number and variety of vascular surgery patients to ensure that residents have an adequate exposure to a wide spectrum of lesions of the vascular system so that they may acquire a high level of skill in their diagnosis and management. There must be a regularly scheduled conference, at least twice monthly, to review current morbidity and mortality.

VI. Operative Experience
The resident must be afforded the opportunity to have chief or senior resident responsibility in the operative management of a wide range of patients who require the commonly employed reconstructive and nonreconstructive vascular procedures within the scope of general vascular surgery. Chief or senior resident operative experience is defined as activity in which the resident functions as the operating surgeon or performs the critical technical portion of the operation. The resident should perform a minimum of 70 major vascular reconstructive procedures that reflect an adequate representation of current trends in the spectrum of surgical care of vascular diseases.

It is the responsibility of the program directors in both general surgery and general vascular surgery to ensure that the allocation of patients to the vascular surgery resident(s) does not have substantial negative impact on the training of the general surgery residents.

VII. Other Requirements
In addition to these requirements specific to vascular surgery, the Program Requirements for Residency Education in the Subspecialties of General Surgery also apply to all vascular surgery programs.

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Program Requirements for Residency Education in Thoracic Surgery

I. Introduction

A. Definition of Thoracic Surgery
Thoracic surgery encompasses the operative and perioperative care as well as critical care of patients with pathologic conditions within the chest. Included is the surgical care of coronary artery disease; cancers of the lung, esophagus, and chest wall; abnormalities of the great vessels and heart valves; congenital anomalies of the chest and heart; tumors of the mediastinum; and diseases of the diaphragm. The management of the airway and injuries of the chest is within the scope of the specialty.

B. Program Goals and Design
1. The director and teaching staff of a program must prepare and comply with written educational goals for the program. All educational components of a residency program should be related to these goals.
2. The program design and/or structure must be approved by the Residency Review Committee (RRC) as part of the regular review process.

C. Objective of Thoracic Surgery Training
The objective of a residency training program in thoracic surgery is to provide the trainee with factual knowledge and technical skills in the preoperative evaluation, operative management, and postoperative care of patients with pathologic conditions involving thoracic structures to prepare the trainee to function as a qualified practitioner of thoracic and cardiovascular surgery at the high level of performance expected of a certified specialist.

D. Compliance With the Institutional and Program Requirements
For a residency program in thoracic surgery to be accredited, compliance is required with both the institutional requirements and the program requirements, as stated in the Essentials of Accredited Residencies.

II. General Characteristics of Accredited Programs

A. Core Knowledge and Skills
A thoracic surgery residency is a graduate education program designed to give the resident a broad clinical experience in pulmonary, esophageal, mediastinal, chest wall, diaphragmatic, and cardiovascular disorders in all age groups. On completion of the program, the residents are expected to be clinically proficient in these areas as well as knowledgeable in the use of cardiac and respiratory support devices.

B. Additional Required Skills
Although operative experience constitutes the most important aspect of the program, the training should include the opportunity to correlate the pathologic and diagnostic aspects of cardiothoracic disorders. The resident is required to be skilled in important diagnostic procedures such as bronchoscopy and esophagoscopy and to be able to interpret all appropriate imaging studies (ultrasound, computed tomography, roentgenographic, radionucleide), cardiac catheterization, pulmonary function, and esophageal function studies. The resident must have the opportunity under supervision to:
1. Provide preoperative management, including the selection and timing of operative intervention and the selection of appropriate operative procedures.
2. Provide and be responsible for the postoperative management of thoracic and cardiovascular patients.
3. Provide and be responsible for the critical care of patients with thoracic and cardiovascular surgical disorders, including trauma patients, whether or not operative intervention is required.

C. Duration and Scope of Training
1. Duration of Training
a. Two years of clinical experience on clearly defined thoracic surgical services is the minimum amount of time required in thoracic surgery for the acquisition of the necessary knowledge, judgment, and technical skills. Laboratory investigation is not permitted as a portion of this minimum time. An interruption of the required years of clinical experience should not exceed 2 years.

b. Any program that extends training beyond these minimum requirements must present a clear educational rationale consonant with the program requirements and objectives for residency training. The program director must obtain approval of
the RRC prior to implementation and at each subsequent review of the program. Prior to entry into the program, each resident must be notified in writing of the required length of training.
c. Specific rotations in nonsurgical areas such as cardiac catheterization and/or esophageal or pulmonary function may not exceed a total of 3 months during the clinical program and may not occur in the final year.

2. Scope of Training
a. The resident must complete a general surgery residency program accredited by either the Accreditation Council for Graduate Medical Education (ACGME) or the Royal College of Physicians and Surgeons of Canada before beginning training in thoracic surgery.
b. Residents must be provided with progressively increasing responsibility. The final year of thoracic surgical training must be served in the integrated institutions of the program, except with prior approval of the RRC. During the final year the resident must assume senior responsibility for the preoperative, intraoperative, and postoperative care of patients with thoracic and cardiovascular disease.
c. The RRC recognizes the importance of interaction among trainees themselves, as well as between teaching staff and trainees in the conduct of conferences and patient care. A number of residents is essential to provide an opportunity for meaningful interaction throughout the training period. Each program must be structured to have a minimum of two thoracic surgery residents in training.

III. Institutional Responsibilities

A. Institutional Commitment

1. The Sponsoring Institution
An educational program in thoracic surgery must have one sponsoring institution with primary responsibility for the entire program. The sponsoring institution must provide evidence of commitment to graduate medical education, including thoracic surgery, and must assume responsibility for the educational validity of all components of the program.

2. The Participating Institutions
When there is a cooperative residency program involving multiple institutions, the commitment of each institution to the program must be made explicit and should be embodied in current letters of affiliation or integration.

a. Affiliated Institutions
The formal written agreement must cover:
1. The scope of the affiliation
2. The resources and facilities in all participating institutions that will be available to the residents
3. The duties and responsibilities the resident will have in the participating institutions
4. The relationship that will exist between the thoracic surgery residents and the residents and faculty in other programs in the participating institutions
5. The supervision the residents will receive by faculty in each institution

b. Integrated Institutions
The formal written agreement must specify, in addition to the points under III.A.2.a, that the program director of the parent institution:
1. Appoints the members of the teaching staff at the integrated institution
2. Appoints the chief or director of the teaching service of the integrated institution
3. Appoints all residents in the program

4. Determines all rotations and assignments of both residents and members of the teaching staff
Participating institutions and their teaching staffs must ensure that all educational experiences and resources offered are consistent with the goals of the program and meet the standards set forth herein. When several institutions participate in sponsoring a program, the program director has the primary responsibility for developing mechanisms to coordinate the overall educational mission to facilitate the accomplishment of the program's goals and be in substantial compliance with the requirements. A program in which any participating institution does not allow appropriate supervision or coordination of educational experiences is not acceptable.

B. Institutional Resources and Facilities

1. Institutional Resources
Institutions must assume responsibility for ensuring an administrative and academic structure that provides for management of educational and financial resources dedicated to the needs of the program, such as appointment of teaching faculty and residents, and for adequate program planning and evaluation.

2. Facilities
Facilities must be appropriate and sufficient for the effective accomplishment of the educational mission of each program. In every institution used as a training site for thoracic surgery, there must be adequate space for patient care, program support, and research; trained medical and paramedical personnel; laboratory and imaging support; and medical library resources.

3. Supporting Disciplines
a. Recognizing the nature of the specialty of thoracic surgery, it is important that thoracic surgery residents have the opportunity to interact with residents in other related specialties in all of the participating institutions.

b. To ensure a cohesive educational environment, the program director must cooperate with the leadership of related disciplines and actively foster the training of thoracic surgery residents in those disciplines. Program directors, teaching staff, and residents in thoracic surgery must work together to provide an operating system whereby the goals and requirements of the training programs can be met.

IV. Teaching and Resident Staff

The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director
There must be a single program director responsible for the program.

1. Qualifications of the Program Director
a. Requisite and documented clinical, educational, and administrative abilities and experience.
b. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)
c. Certification by the American Board of Thoracic Surgery (ABTS) or suitable equivalent qualifications, as determined by the RRC.
d. Appointment in good standing to the medical staff of an institution participating in the program.

2. Responsibilities of the Program Director
The program director must have appropriate authority and adequate stability as well as give sufficient time to organize and to
fulfill administrative and teaching responsibilities. A stable educational environment cannot be maintained without continuity in program leadership. The responsibilities include:

a. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.

b. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures. In selecting from among qualified applicants for first-year thoracic surgery resident positions, the thoracic surgery program should participate in the Thoracic Surgery Matching Program.

c. Selection and supervision of the teaching staff and other program personnel at each institution participating in the program. Opportunities for development of the teaching staff should be made available to each member of the staff and should include development of skills in teaching, research, and scientific writing.

d. The supervision of residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.

e. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.

f. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.

g. Ensuring assignment of reasonable in-hospital duty hours so that residents are not required regularly to perform excessively prolonged periods of duty. It is desirable that residents' work schedules be designed so that on average, excluding exceptional patient care needs, residents have at least 1 day out of 7 free of routine responsibilities and be on call in the hospital no more often than every third night. Since training in thoracic surgery is at senior levels, the ratio of hours worked and on-call time varies considerably and necessitates flexibility.

h. Notification of the executive secretary of the RRC in writing of any program change that may significantly alter the educational experience for the residents. This will include a change in 1. program director and/or department chairman and/or 2. formal affiliation with another institution.

i. Requesting prior approval from the RRC for the following changes so that the committee may determine that there is adequate educational justification and that an adequate educational environment exists to support these changes: 1. Formal integration with another institution 2. A required rotation to any institution other than those already participating in the program in which the duration is 4 months or longer or a foreign rotation of any duration 3. The number of resident positions offered 4. The number of years of training required in the program.

j. It is essential that the program director provide complete and accurate program information forms to the RRC so that an adequate assessment of the program can be made. A comprehensive and accurate evaluation of the program is not possible without the detailed information requested. The program director is also responsible for the accuracy of the residents' records of their surgical experience and for making these records available to the RRC on request. Program directors should pay particular attention to consistency in the reporting of "Operative Experience Reports" for the institutions, the residents, and any other fellows/special trainees appointed to the program. In the evaluation of the program, it is essential that the statistics in all reports cover the same period of time for comparison purposes, i.e., the institution's report must be consistent with the residents' reports and those of fellows/special trainees. Failure to furnish the required information in the program information forms may jeopardize the accreditation of the program.

B. Teaching Staff

1. There must be a sufficient number of teaching staff with documented qualifications to instruct and supervise adequately all the residents in the program. Physicians with teaching responsibilities should be board certified in thoracic surgery or possess suitable equivalent qualifications, as determined by the RRC. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities.

2. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.

3. There should be at least one designated cardiothoracic faculty member responsible for coordinating multidisciplinary clinical conferences and organizing instruction and research in general thoracic surgery.

4. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

5. The teaching staff must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

6. The teaching staff should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the teaching staff, and the quality of supervision of residents.

C. Other Program Personnel

Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

D. Scholarly Environment

Graduate medical education must take place in an environment of inquiry and scholarship in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility. Adequate documentation of scholarly activity on the part of the program director and the teaching staff at the sponsoring and integrated institutions must be submitted at the time of the program review. Documentation of scholarly activity is based on:
1. Participation in continuing surgical education;
2. Participation in regional or national surgical scientific societies;
3. Presentation and publication of scientific studies;
4. Demonstration of an active interest in research as it pertains to their own special surgical interests. The RRC will consider documented involvement in the following as indications of the commitment of the staff to research:
   a. Projects that are funded following peer review
   b. Publications in peer-reviewed journals
   c. Presentations at national and regional scientific meetings
   d. Research protocols that have been approved by appropriate institutional committees or other organizations

E. Residents
1. Resident Selection
   Residents who are eligible to enter graduate medical education programs accredited by the ACGME must meet the qualifications stipulated in the institutional requirements.
2. Resident Responsibilities
   The hallmark of surgical care has long been the commitment of surgeons to be available for their patients throughout the surgical experience. In residency training a commitment to continuity of care involves the development of a keen sense of personal responsibility for patient care that is not automatically discharged at any given hour. Duty hours and night and weekend call for residents must reflect this concept of longitudinal responsibility for patients by providing for adequate continuity of patient care. At the same time, duty assignments must not regularly be of such excessive length and frequency that they cause undue fatigue and sleep deprivation.

V. Educational Program

A. Surgical Volume
1. Minimum Standards
   Guidelines for the minimum operative experience of each resident are as follows:
   a. An annual average of 125 major operations from those listed on the program information forms.
   b. An adequate distribution of categories and complexity of procedures such that each resident is ensured a balanced and equivalent operative experience.
   c. The categories of procedures must include but are not limited to the following: lungs, pleura, chest wall, esophagus, mediastinum, diaphragm, thoracic aorta and great vessels, congenital heart anomalies, valvular heart diseases, and myocardial revascularization. Residents should also have experience in cardiac pacemaker implantation, mediastinoscopy, pneumoscopy, and flexible and rigid esophagoscopy and bronchoscopy.
2. Resident Credit for Operative Experience
   Operative experience should meet the following criteria:
   a. The resident participated in the diagnosis, preoperative planning, and selection of the operation for the patient.
   b. The resident performed those technical manipulations that constituted the essential parts of the patient’s operation.
   c. The resident was substantially involved in postoperative care.
   d. The resident was supervised by responsible teaching staff.

B. Supervision
   Programs in thoracic surgery require that residents be directly involved in providing care under supervision in all institutions that accept responsibility for the quality of the educational program. There must be procedures established by the program director that ensure that all residents are supervised during their operative and clinical training.

Program directors and residents should note that the ABTS may have its own specific guidelines for adequate operative experience.

C. Rotations
1. Rotation Plan
   The program director is responsible for providing an organized written plan and a block diagram for the rotations of residents among the various services and institutions in the program so that continuity in the care of patients can be achieved. The residents’ rotations should be carefully structured so that graded levels of responsibilities can be maintained, all residents receive a balanced training and experience in the program, and the requirements stipulated under Section II.C.2, Scope of Training, can be met.
2. Rotation Objectives
   The objectives of each rotation should be well defined in the curriculum. A number of abbreviated rotations among several participating institutions to meet minimum requirements is discouraged. Simultaneous assignment to more than one institution must be avoided.

D. Number of Residents and Other Trainees
1. Evaluation of Resident Complement
   As part of its review process, the RRC evaluates the number of residents participating in each program. The program director must ensure that there are adequate facilities, qualified teaching staff, and an adequate clinical volume and distribution of surgical cases for the number of residents participating in a given program.
2. Appointment of Other Trainees
   The appointment of other trainees to the program and their operative experience must be reported to the RRC so that the committee can determine whether the educational experience of the residents already in training is compromised. Dilution of the residents’ experience by other appointees may be deemed substantial noncompliance with this requirement.

E. Conferences
   The program director is responsible for providing separate and regularly scheduled teaching conferences, mortality and morbidity conferences, rounds, and other educational activities in which both the thoracic surgery teaching staff and the residents attend and participate. Such experiences should be under the direction of qualified thoracic surgeons and other teaching staff in related disciplines. Records of attendance must be kept and be available for review by the site visitor.

F. Patient Care Responsibilities
   The educational mission of each program must not be compromised by an excessive reliance on residents to fulfill institutional service obligations. In addition, excellence in patient care must not be compromised or jeopardized by needs of the educational program.

G. Outpatient Responsibilities
   Outpatient activities constitute an essential component for providing adequate experience in continuity of patient care. These activities should be conducted in such a way that the resident has an opportunity to examine the patient preoperatively, has ample opportunity to consult with the attending surgeon regarding operative care, and has an opportunity to participate in the operation and in the postoperative care. To participate in posthospital care, the resident has the responsibility for seeing the patient personally in an outpatient setting and/or as a minimum in some cases, consulting with the attending surgeon regarding the follow-up care rendered to the patient in the doctor’s office.
   The policies and procedures governing prehospital and posthospital involvement of the residents must be documented. Evidence of
the elements of this process, in the form of notes on the patient's chart as well as other records, must be available to the site visitor at the time of program review.

H. Library
1. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.
2. Library services should include the electronic retrieval of information from medical databases.
3. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

I. Autopsies
Permission for performing an autopsy should be sought in all deaths. Autopsy material must be appropriately reviewed by teaching staff and residents.

VI. Evaluation
A. The educational effectiveness of a program must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Written evaluations by residents of the teaching staff and the program should be utilized in this process.
B. Regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a thoracic surgeon, should be documented. The program director, with participation of members of the teaching staff, shall:
1. At least semiannually evaluate the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures.
2. Communicate each evaluation to the resident in a timely manner.
3. Advise residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.
4. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.
C. A written final evaluation for each resident who completes the program must be provided. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.
D. One measure of the quality of a program may be the percentage of program graduates who take the certification examination of the ABTS and their performance on that examination.
Application forms may be obtained by writing to Executive Secretary, Residency Review Committee for Thoracic Surgery, 515 N State St/Ste 2000, Chicago, IL 60610

ACGME: September 1992 Effective: July 1995

Program Requirements for Residency Education in Urology

I. Introduction
A. Definition of the Specialty
Urology is the medical and surgical specialty that deals with disorders of the genitourinary tract and the adrenal gland. Specialists in this discipline must have core knowledge, skills, and understanding of the basic medical sciences relevant to the genitourinary tract and adrenal gland, including the clinical aspects of diagnosis and the medical and surgical therapy, prevention, and reconstruction for diseases, neoplasms, deformities, disorders, and injuries.

B. Purpose
Residency programs in urology must provide balanced education in the cognition, attitudes, and skills necessary for current urologic practice. At the conclusion of such education, residents should be qualified to provide high-quality care to patients with urologic disorders.

C. Objective
Each urology residency must specify the methods of training that will ensure mastery of the educational program specified in Section V of this document. This shall be accomplished through the implementation of a fully developed curriculum that most effectively utilizes the skills of a highly qualified and experienced faculty, the available patient population, and the participating institutions' facilities and resources.

D. Duration of Training
Five years of postgraduate education are required, of which 12 months must be spent in general surgery in an Accreditation Council for Graduate Medical Education (ACGME)-accredited program and 36 months must be spent in clinical urology. Of the remaining 12 months, 6 months must be spent in general surgery, urology, or in other clinical disciplines relevant to urology. Irrespective of the training format provided, the final 12 months of training must be spent as a senior/chief resident in urology in institutions that are an approved part of the program with appropriate clinical responsibility under supervision.
1. Any program that extends training beyond these minimum requirements must present a clear educational rationale consonant with the program requirements and objectives for residency training. The program director must obtain approval of the Residency Review Committee (RRC) prior to implementation and at each subsequent review of the program.
2. Accreditation by the ACGME is required for all years of the training program. To be considered a graduate of the program, residents must complete the full length of training for which the program is accredited.
3. Prior to entry into the program, each resident must be notified in writing of the required length of training. The required length of training for a particular resident may not be changed without mutual agreement during his or her program, unless there is a significant break in his or her training or the resident requires remedial training. All such changes must have prior approval of the RRC.

II. Institutional Organization
Institutions involved in training urology residents must be able to provide broad-based opportunities for resident education, including
serving in medical training. Residents must participate in various aspects of medical training, including clinical rotations, research, and teaching. The program must ensure that residents have access to a variety of clinical experiences and educational resources.

A. Sponsoring Institution

An educational program in urology must have one sponsoring institution responsible for the entire program. Appropriate institutions include medical schools, hospitals, and medical foundations. The institution must demonstrate commitment to the program in terms of financial and academic support.

B. Participating Institutions

Participating institutions include the sponsoring institution and other participating institutions. There must be an appropriately executed affiliation agreement between the sponsoring institution and each institution participating in the program that conforms to the institutional requirements. The primary teaching staff should be geographically located within their respective institutions, although alternate arrangements may be acceptable if it can be demonstrated that rapid access to faculty is available to residents at all times.

C. Appointment of Residents

1. The RRC will approve a total number of residents to be trained in the program by training year. That number will be based primarily on the number, qualifications, and commitment of the faculty; the volume and variety of the patient population available for educational purposes; and the totality of institutional resources committed to resident education.

2. Programs may not graduate more residents in any given year than the number of residents approved by the RRC for that year. Any change in the number of residents at any level of training or change in the total number of residents must receive prior approval of the RRC. Requests for changes in the approved resident complement of a program must include a strong educational rationale. Requests based primarily on service considerations will not be approved.

3. A vacancy in a resident complement, if filled, must be at the same level in which the vacancy occurs, unless otherwise approved by the RRC.

III. Faculty Qualifications and Responsibilities

The program director and the teaching staff are responsible for the general administration of a program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and maintenance of records related to program accreditation.

A. Program Director

There must be a single program director responsible for the program.

1. Qualifications of the Program Director

a. Requisite and documented clinical, educational, scholarly, and administrative abilities and experience.

b. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted.)

c. Certification by the American Board of Urology or suitable equivalent qualifications.

d. Appointment in good standing to the medical staff of an institution participating in the program.

e. Must be based at the sponsoring institution unless otherwise approved by the RRC.

2. Responsibilities of the Program Director

a. Devoting sufficient time and effort to the program to provide day-to-day continuity of leadership and to fulfill all of the responsibilities inherent in meeting the educational goals of the program.

b. Developing a sound organizational framework and an effective teaching staff as essential elements of an approved residency program. Continuity of leadership is important to the stability of a residency program. Frequent changes in leadership or long periods of temporary leadership usually have an adverse effect on an educational program and will be cause for serious concern.

c. Engaging in scholarly pursuits such as (1) active involvement in continuing medical education in urology, (2) active participation in regional or national scientific societies, (3) presentations and publications, and (4) active interest in research.

d. Ensuring that residents have access to a balanced and comprehensive surgical experience and that the progress of each resident is regularly evaluated.

e. Preparing a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and members of the teaching staff. It should be readily available for review.

f. Maintaining an annual log of cases performed by the urology service within each participating institution to which residents rotate for clinical experience in the form and format provided by the RRC.

g. Compiling, on an annual basis, an accurate statistical and narrative description of the program. This will include a comprehensive record of the number and type of operative procedures performed by each resident completing the training in the program, including all of the procedures in which the resident was either primary surgeon or assistant surgeon, to be signed by both the resident and the program director as a statement of its accuracy. This information must be provided in the format and form specified by the RRC. These records must be maintained by the program director.

h. Supervising residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the program staff. Residents must be provided with prompts, reliable systems for communication and interaction with supervisory physicians.

i. Evaluating regularly residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician.

j. Implementing fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.

k. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alco-
hol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.

1. Having appropriate authority to oversee and to organize the activities of the educational program. The responsibilities of this position should include but not be limited to the following:

   1. Resident selection, appointments, and assignments in accordance with institutional and departmental policies and procedures.
   2. Supervision, direction, and administration of the educational activities at all participating institutions.
   3. Evaluation of the house staff, faculty, and residency program.
   4. Appointment of local training directors and other personnel in participating institutions.

2. Notifying the executive secretary of the RRC in writing of any major change in the program that may significantly alter the educational experience or environment for the residents, including:

   1. Changes in leadership of the department, such as his or her appointment as a permanent or acting program director and/or departmental chair.
   2. Changes in administrative structure, such as an alteration in the hierarchical status of the program within the institution.
   3. Changes in the approved resident complement of the program.
   4. Any change in the length or format of the training program.

3. Upon review of a proposal for a major change in the program, the RRC may determine that a site visit is necessary.

B. Number and Qualifications of the Faculty

1. There must be a minimum of two urology faculty members committed fully to the educational objectives of the residency program who devote sufficient time to the supervision and teaching of the residents. An instructor-to-trainee ratio of at least 1:3 is desirable, one of whom can be the program director. The program director must notify the RRC if the minimum number of fully committed faculty drops below two or if the ratio falls below 1:3 and remains below that level longer than 1 year.

2. Urologists with teaching responsibilities must be certified or in the process of certification by the American Board of Urology or have equivalent qualifications.

3. All members of the faculty must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.

4. A member of the faculty of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.

5. The faculty must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.

6. The faculty should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of patients available to the program for educational purposes, the performance of members of the faculty, and the quality of supervision of residents.

7. It is highly desirable that faculty members possess special expertise in several of the different urological disciplines such as pediatric urology, female urology, renal transplant; renal vascular disease; oncology; infertility, impotence, and endocrinology; stone disease; and urodynamics to provide the greatest depth of knowledge in a variety of subjects.

C. Faculty Responsibilities

1. The faculty must demonstrate dedication to the motivation, instruction, and education of residents. Faculty must actively participate in and devote sufficient time to the educational program and pursue scholarly activities, including:

   a. Participation in regional and national professional associations.
   b. Participation in their own continuing medical education.
   c. Demonstration of an active interest in research as it pertains to the specialty.
   d. Production of scientific presentations and publications.

2. One measure of adequate faculty commitment to the residency program is the extent to which they permit residents to participate in the management of patients under faculty members' care.

3. Refereed publications and significant participation in research are well-recognized evidence of the quality of the faculty. While not all members of a teaching staff can be investigators, the majority of the faculty should be engaged routinely in such scholarly activities.

4. Faculty involved in teaching should have clearly defined responsibilities, including but not limited to supervision of residents, teaching, administration, and research. The amount of time dedicated to the educational program should be specified.

D. Training Directors at Participating Institutions

1. There shall be a qualified urologist appointed by and responsible to the program director in each geographically separate institution. This individual must be responsible for the education of the residents and also will supervise the educational activities of the other urologists relating to resident education in that institution.

2. These appointments will be generally for a 1-year period and can be renewed to ensure continuity of leadership.

3. The training director in urology at each participating institution must have major clinical responsibilities at that institution.

E. Other Program Personnel

Programs must be provided with the additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

IV. Facilities and Resources

There must be adequate space and equipment for the educational program, including meeting rooms; classrooms with audiovisual and other educational aids; office space for staff; pertinent library materials; and diagnostic, therapeutic, and research facilities.

A. Within each institution, bed space sufficient for the needs of the urology service must be provided, preferably within a single area under the direction of the urology service.

B. Technologically current diagnostic facilities providing cystoscopy, imaging with biopsy, imaging with percutaneous access to the kidney, and urodynamic equipment must be present.
C. An extracorporeal shock wave lithotripsy facility should be available for resident education in the treatment of urinary calculi.

D. Residents must have access to outpatient facilities, clinic, and office space for training purposes in the regular preoperative evaluation and postoperative follow-up for cases for which the resident has responsibility.

E. A medical records department that facilitates both quality patient care and education must be available.
   1. It should be supervised by a qualified medical records librarian.
   2. Clinical records must be maintained to ensure easy and prompt access at all times.
   3. The records system must be organized to permit the collection and evaluation of selected material from clinical records for investigative and review purposes.

F. Residents must be provided with adequate office, sleeping, lounge, and food facilities during assigned duty hours. Adequate clerical support services must also be provided.

G. Institutions should provide adequate resources for research, such as statistical consultation and computer services. Research laboratories, while not mandatory for accreditation, should be available. Institutions offering training programs in urology should encourage and support the development and use of such facilities.

V. Educational Program

Programs in urology must be dedicated to the educational goals of residency training rather than to the utilization of residents primarily for the service requirements of patient care. A close working relationship must exist between the faculty and the residents. All patients on the urology service must be reviewed by the faculty on regular teaching rounds with the residents according to a predetermined schedule, and all major surgery performed on the service by the residents should be done under the direct supervision of the faculty. Throughout the training period, the faculty must continuously assess the competence of the residents through personal observation.

A. Program Goals and Objectives

The program director and faculty must prepare and comply with written educational goals for the program.

1. Program Design
   a. All educational components of a residency program should be related to program goals.
   b. Participation by any institution providing more than 3 months of training must be approved by the RRC.

2. Program Evaluation
   a. The program design and/or structure must be approved by the RRC as part of the regular review process.
   b. Written evaluations by residents should be utilized in this process.

B. Conferences

1. There must be well-defined, documented, regularly scheduled conferences, including a combined morbidity and mortality conference for all participating hospitals, urological imaging, urological pathology, journal review, and other subjects having educational value in the basic and clinical domains of urology. The domains of urology are defined as andrology, infertility, impotence, calculus disease, endourology, extracorporeal shock wave lithotripsy, neurourology, urodynamics, female urology, pediatric urology, surgery of the adrenal, infectious disease, obstructive disease, psychic disorders, renovascular disease, transplantation, sexuality, trauma, and oncology.

2. Conferences must be planned, well-organized, and offered with advance notification of the topics to be presented. The conference schedule should not conflict with other organized activities of the residency.

3. Conferences should be well attended by both residents and faculty, and such attendance must be documented.

4. Each conference should be supervised by a faculty member to ensure that a worthwhile educational experience will be provided.

A list of the conferences held should be maintained and available for examination at the time of review. The list should include the names of those attending, the subjects discussed, the moderator, and the principal speaker.

C. Patient Population and Clinical Experience

1. A sufficient number and variety of adult and pediatric patients with urologic disease must be available within the program for resident education. Resident experience with medical and surgical patients must extend beyond common urological problems to include other areas such as pediatric urology, urological oncology, urodynamics, trauma, endocrinology as it relates to urology, renal transplantation, female urology, infertility, renal vascular disease, and other areas pertinent to urology as a medical discipline.

2. Generally equivalent and adequate distribution of cases among the residents must be demonstrated. Significantly unequal experience in volume and/or complexity of cases managed by the residents will be considered serious noncompliance with these requirements.

3. During training, the resident should have responsibility under supervision for the total care of the patient, including initial evaluation, establishment of diagnosis, selection of appropriate therapy, implementation of therapy, and management of complications. The resident must participate in the continuity of patient care through preoperative and postoperative clinics as well as inpatient contact.

D. Graded Responsibility

1. The program must provide the residents with experience in direct and progressively responsible patient management as they advance through training. This training must culminate in sufficiently independent responsibility for clinical decision making to ensure that the graduating resident has achieved the ability to execute sound clinical judgment.

2. With each year of training, the degree of responsibility accorded to a resident, both professional and administrative, should be progressively increased, consonant with skill and experience. This includes responsibility in such areas as patient care, leadership, teaching, organization, and administration. Appropriately qualified senior residents may supervise or act as consultants to junior residents.

3. When residents participate in preoperative and postoperative care in a clinic or private office setting, the program director must ensure that the resident functions with an appropriate degree of responsibility under adequate supervision.

E. Supervision

1. A supervising/attending surgeon must be responsible for each patient during hospitalization. The supervising/attending surgeon must be a urologist.

2. The supervising/attending surgeon should see the patient, discuss the case with the resident, and write or countersign a preoperative note.

3. All cases must be adequately supervised by appropriately qualified faculty. The program director must ensure, direct, and docu-
Program Requirements for Residency Education in Urology

ment proper supervision of residents at all times. Residents must be provided with rapid, reliable systems for communicating with supervising residents and attending. Attending physicians or supervising residents with experience appropriate to the severity and complexity of the patient's condition must be available at all times on site. The responsibility or independence given to residents in patient care should depend on their knowledge, manual skill, and experience and the complexity of the patient's illness and risk of the operation.

F. Duty Hours and Conditions of Work
Physicians must have a keen sense of personal responsibility for continuing patient care and must recognize that their obligation to patients is not automatically discharged at any given hour of the day or any particular day of the week. Duty hours and night and weekend call for residents must reflect the concept of responsibility for patients and provide for adequate patient care. However, residents must not be required regularly to perform excessively difficult or prolonged duties. It is the responsibility of the program director to ensure assignment of reasonable in hospital duty hours.

1. Residents at all levels should, on average, have the opportunity to spend at least 1 full day out of 7 free of scheduled hospital duties and should be on call in the hospital no more often than every third night.

2. There should be adequate opportunity to rest and to sleep when on call for 24 hours or more. On-call rooms arranged to permit adequate rest and privacy must be available for each resident on night duty in the hospital.

3. There should be adequate backup support if the volume of patient care required jeopardizes the quality of patient care during or following assigned periods of duty.

4. Residency is a full-time responsibility. Activities outside the educational program must not interfere with the resident's performance in the educational process as defined in the agreement between the institution and the resident.

G. Scholarly Activity
1. The faculty and residents should be involved in activities that keep them abreast of current developments in medicine and that enable them to explore new directions in the science of urology. Because research also offers an important opportunity for the application of the basic sciences to clinical problems, it is an essential part of the preparation of the resident for a lifetime of self-education after the completion of formal residency training. The responsibility for establishing and maintaining an environment of inquiry and scholarship rests with the faculty. While not all members of the faculty must be investigators, the staff as a whole must demonstrate broad involvement in scholarly activity.

2. The program must provide exposure to research for the residents sufficient to result in understanding of the basic principles of study design, performance, analysis, and reporting (including statistics and epidemiology). Such research exposure may be clinical or basic in nature and should reflect careful advice and planning with the faculty.

3. Resources
   a. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.
   b. Library services should include the electronic retrieval of information from medical databases.
   c. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

H. Related Disciplines
Because clinical problems often involve multidisciplinary care beyond the ordinary competence of the urologist, teaching, medical, and consultative support from other major medical fields must be readily available within the participating institutions. The activities of these disciplines should be supported by residency training programs, particularly in the areas of internal medicine, general surgery, pediatrics, obstetrics and gynecology, pathology, and radiology to facilitate the rapid interchange of up-to-date information so essential to a proper educational environment.

I. Appointment of Fellows
1. The appointment of other individuals for special training or education, such as fellows, must not dilute or detract from the educational opportunities of regularly appointed residents.

2. Addition of such individuals by a program director and/or institution requires a clear statement of the areas of training, clinical responsibilities, and duration of the training. This statement is to be supplied to the RRC at the time the program is site-visited.

3. If such individuals so appointed, in the judgment of the RRC, detract from the education of the regularly appointed residents, the accreditation status of the program may be adversely affected.

VI. Internal Evaluation

A. Evaluation of Residents
1. Appointment of residents or promotion within programs occurs when their medical knowledge, attitudes, and clinical performance meet minimum standards necessary for all trainees at their level.

2. Regular evaluations of resident performance are required at least semiannually and must be reviewed formally and in a timely manner with the resident. Items to be evaluated should include basic medical knowledge, clinical judgment, attitudes, and where applicable, technical competence. Each program must develop and use specific performance measures (in service examinations, resident evaluation forms, residency standards developed by other urology education organizations, etc). Subsequent analysis of these evaluations should guide the faculty in regard to the strengths and weaknesses of individual residents.
3. Residents must be advanced to positions of higher responsibility based on evidence of their satisfactory progressive scholarship and professional growth.
4. A permanent record of evaluation for each resident must be maintained and accessible to the resident and other authorized personnel.
5. A written final evaluation for each resident who completes the program must be provided. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation should be part of the resident's permanent record maintained by the institution.
6. Based on the above evaluations, the program director and faculty must certify that residents completing the program have fulfilled all criteria established above.

B. Faculty Evaluation
1. Teaching ability, commitment, clinical knowledge, and scholarly activities of faculty require periodic review at least annually.
2. Such reviews may be conducted by self-evaluation, peer evaluation, or any acceptable method of the host institution. Resident commentary must be a part of this review, and a summary of the review must be communicated directly to the faculty member by the program director.

C. Program Evaluation
1. Programs must conduct and document evidence of periodic evaluations of the entire program at all training sites, including:
   a. Evidence of satisfactory completion of educational goals
   b. Attention to the needs of the residents, especially regarding the balance between educational and service components of the program
   c. Adequate performance of teaching responsibilities by the faculty
   d. Performance of residents on examinations such as the in-service examination and the American Board of Urology Qualifying (Part I) and Certifying (Part II) Examinations.
2. One measure of the quality of a program is the performance of its graduates on the examinations given by the American Board of Urology. The RBC may consider this information as part of the overall evaluation of the program.

VII. Board Certification
Residents who plan to seek certification by the American Board of Urology should communicate with the secretary of that board to be certain of the requirements for acceptance as a candidate for certification.

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Program Requirements for Residency Education in Pediatric Urology

I. Scope of Training
Specialized training in pediatric urology should cover all aspects of congenital anomalies, childhood-acquired urologic problems such as tumors and trauma, and overlapping problems of adolescence. The subspecialty training in pediatric urology must provide an experience of sufficient level for the trainee to acquire advanced skills in the management of congenital anomalies and pediatric urologic problems.

II. Duration of Training
To be accredited, pediatric urology programs must contain a continuous clinical year taken subsequent to the completion of an accredited residency in urology.

III. Institutional Requirements
A. A residency training program in pediatric urology can be provided only in conjunction with an Accreditation Council for Graduate Medical Education-accredited urology residency. The institution sponsoring the pediatric urology program must have sufficient volume and variety of pediatric urology experience to meet the needs of the trainee without compromising the quality of resident training in general urology. The pediatric urology program must be centered at a children's hospital or a medical center with major pediatric medical and surgical subspecialties. The sponsoring institution of the pediatric urology program may seek a complementary affiliation with other institutions that offer significant educational opportunities to the residency program.
B. To be considered for accreditation, the institution should have a minimum of 600 major pediatric urology surgical procedures per year and more than 2000 pediatric urological outpatient visits per year.
C. Diagnostic facilities should include state-of-the-art radiographic, ultrasonographic, and urodynamic equipment suitable for the care of patients.
D. Program Research and Scholarly Activity
Graduate medical education must take place in an environment of inquiry and scholarship, in which residents participate in the development of new knowledge, learn to evaluate research findings, and develop habits of inquiry as a continuing professional responsibility.
1. Scholarly Activity
   a. Active participation of the faculty in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.
   b. Participation in journal clubs and research conferences.
   c. Active participation in regional or national professional and scientific societies, particularly through presentations at the organizations' meetings and publication in their journals.
   d. Participation in research, particularly in projects that are funded following peer review and/or result in publications or presentations at regional and national scientific meetings.
   e. Offering of guidance and technical support (eg, research design, statistical analysis) for residents involved in research.
   f. Provision of support for resident participation in scholarly activities.
2. Library
   a. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions.
   b. Library services should include the electronic retrieval of information from medical databases.
   c. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution partici-
pating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

IV. Educational Program
The director and faculty of a program must prepare and comply with written educational goals for the program.

A. Program Design
All educational components of the program should be related to program goals.
1. The program design and/or structure must be approved by the Residency Review Committee (RRC) as part of the regular review process.
2. Participation by any institution providing more than 2 months of education in the program must be approved by the RRC.

B. Program Course of Study
The educational program must provide clinical experience to develop clinical competence in pediatric urology. The clinical component of the program must provide the following areas:
1. Experience in surgical aspects of pediatric urology must be documented in an accurate, comprehensive, operative log maintained by the resident and reviewed by the program director at least quarterly.
2. Experience in outpatient management of pediatric urologic disease, with graded responsibility for patient care, must be documented and similarly maintained.
3. Familiarity with all state-of-the-art modalities of imaging.
5. Management of patients with urologic tumors.
6. Management of patients with urologic trauma.
7. Experience with the multidisciplinary management of nephrologic disease.
8. Exposure to the neonatal units and intensive care units for all pediatric ages.
9. Participation in a multidisciplinary setting of neonatal and other neuromuscular bladder entities.
10. Experience with the multidisciplinary management of patients with problems relating to sexual development and medical aspects of intersex states.

C. Pediatric Urology Resident Duty Hours
The same resident duty hours and supervision requirements apply to pediatric urology residents as provided in the Program Requirements for Residency Education in Urology.

V. Faculty
The program director and faculty are responsible for the general administration of the program, including those activities related to the recruitment, selection, instruction, supervision, counseling, evaluation, and advancement of residents and the maintenance of records related to program accreditation.

A. Program Director
There must be a single program director responsible for the program. The program director should be based at the institution where the education occurs and must be dedicated to and actively engaged in pediatric urology education.
1. Qualifications of the Program Director
   a. Requisite and documented clinical, educational, and administrative abilities and experience in all aspects of pediatric urology.

b. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempted).
c. Certification by the American Board of Urology or suitable equivalent qualifications and qualifications and experience in the practice of pediatric urology.
d. Appointment in good standing to the medical staff of an institution participating in the program.

2. Responsibilities of the Program Director
   a. Preparation of a written statement outlining the educational goals of the program with respect to knowledge, skills, and other attributes of residents at each level of training and for each major rotation or other program assignment. This statement must be distributed to residents and faculty members. It should be readily available for review.
b. Selection of residents for appointment to the program in accordance with institutional and departmental policies and procedures.
c. Selection and supervision of the faculty and other program personnel at each institution participating in the program.
d. The supervision of residents through explicit written descriptions of supervisory lines of responsibility for the care of patients. Such guidelines must be communicated to all members of the departmental staff. Residents must be provided with prompt, reliable systems for communication and interaction with supervisory physicians.
e. Regular evaluation of residents' knowledge, skills, and overall performance, including the development of professional attitudes consistent with being a physician.
f. Implementation of fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.
g. Monitoring resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and faculty should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Educational situations that consistently produce undesirable stress on residents must be evaluated and modified.
h. Preparation of an accurate statistical and narrative description of the program as requested by the RRC.

B. Faculty
1. There must be a sufficient number of faculty with documented qualifications to instruct and supervise adequately all pediatric urology residents in the program. Members of the faculty must be able to devote sufficient time to meet their supervisory and teaching responsibilities.
2. All members of the faculty must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.
3. A member of the faculty of each participating institution must be designated to assume responsibility for the day-to-day activities of the program at that institution, with overall coordination by the program director.
4. The faculty must be organized and have regular documented meetings to review program goals and objectives as well as program effectiveness in achieving them. At least one resident representative should participate in these reviews.
5. The faculty should periodically evaluate the utilization of the resources available to the program, the contribution of each institution participating in the program, the financial and administrative support of the program, the volume and variety of
patients available to the program for educational purposes, the performance of members of the faculty, and the quality of supervision of residents.

C. Other Program Personnel
Programs must be provided with additional professional, technical, and clerical personnel needed to support the administration and educational conduct of the program.

VI. Evaluation
The pediatric urology program must have ongoing assessment of the following components of the educational program: resident performance, faculty performance, patient care, and program objectives.

A. Pediatric Urology Resident Evaluation
The program director, with participation of members of the faculty, shall:
1. At least semiannually evaluate the knowledge, skills, and professional growth of the residents, using appropriate criteria and procedures.
2. Communicate each evaluation to the resident in a timely manner.
3. Advise residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.
4. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel.
5. Provide a written final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation shall be part of the resident's permanent record maintained by the institution.

B. Program and Faculty Evaluation
The educational effectiveness of the program and faculty must be evaluated in a systematic manner. In particular, the quality of the curriculum and the extent to which the educational goals have been met by residents must be assessed. Confidential, written evaluations by residents should be utilized in this process.

VII. Board Certification
Individuals should communicate with the secretary of the American Board of Urology as to the status of requirements for certification.

ACGME: February 1990  Effective: July 1995

Program Requirements for the Transitional Year

I. Purpose of a Transitional Year
The transitional year must be designed to fulfill the educational needs of medical school graduates who:
A. Have chosen a career specialty for which the respective program in graduate medical education has, as a prerequisite, 1 year of fundamental clinical education, which may also contain certain specific experiences for development of desired skills; or
B. Have not yet made a career choice or specialty selection and desire a broad-based year to assist them in making that decision; or
C. Are planning to serve in organizations such as the public health service or on active duty in the military as general medical officers or primary flight/undersea medicine physicians prior to completing a program in graduate medical education; or
D. Have at least 1 year of fundamental clinical education prior to entering a career path that does not require broad clinical skill, such as administrative medicine or nonclinical research.

The objective of the transitional year is to provide a well-balanced program of graduate medical education in multiple clinical disciplines designed to facilitate the choice of and/or preparation for a specific specialty. The transitional year is not meant to be a complete graduate medical program in preparation for the practice of medicine.

The sponsoring institution and the transitional year program must demonstrate substantial compliance with both the institutional requirements of the Essentials of Accredited Residencies and the program requirements that follow.

II. Administration

A. Sponsorship
1. The transitional year program must be offered by an institution and its affiliate(s) conducting two or more Accreditation Council for Graduate Medical Education (ACGME)-accredited residency programs, which must participate in the education of transitional year residents. One of these accredited residency programs must be identified as the sponsoring program. Other disciplines may serve as participants in the transitional year.
2. Each of the accredited sponsors must exist in the parent institution and its affiliate(s) offering the transitional year. The sponsors and participating disciplines must represent a component of the transitional year program.
3. Programs that do not regularly provide educational experiences for the transitional year residents should not be designated as participating disciplines.
4. One of the accredited sponsors must provide experiences for the transitional year residents to develop fundamental clinical skills. Those disciplines considered to provide these experiences are family practice, internal medicine, obstetrics/gynecology, pediatrics, and general surgery.
5. The sponsoring programs and participating disciplines must provide written goals and objectives for the areas of knowledge and skills to be developed by the transitional year resident and demonstrate a commitment to meeting those goals and objectives through the provision of quality teaching and allocation of adequate educational resources. These goals and objectives must be distributed to the residents and be readily available for review.

B. Program Director
1. There must be a single program director responsible for the program. The process by which the program director of the transitional year program is appointed must be consistent with the policies for the appointment of other program directors in the sponsoring institution.
2. The program director's tenure should be of sufficient duration to assure continuity of the educational program. The program director should be appointed for a minimum of 3 years.
3. The program director must be a physician with demonstrated and documented clinical, educational, and administrative abilities and experience in graduate medical education. The qualifications of the program director must include:
   a. The ability to devote the time required for program development, implementation, administration, and supervision
   b. Certification by a specialty board or suitable equivalent qualifications
   c. Licensure to practice medicine in the state where the institution that sponsors the program is located. (Certain federal programs are exempt.)
d. Appointment in good standing to the medical staff of an institution participating in the program.

4. The program director must coordinate the educational experiences within the separate categorical programs and participating disciplines. Sufficient authority must be delegated to the program director by the sponsoring institution to facilitate effective organization and management.

5. The responsibilities of the program director must include the following:

a. To select the residents for appointment to the program in accordance with institutional policies and procedures.

b. To select and supervise the teaching staff and other program personnel at each institution participating in the program.

c. To arrange and implement educational programs in fundamental clinical skills.

d. To counsel transitional year residents in the development of a curriculum appropriate to their individual learning needs and career goals.

e. To apply to the transitional year residents those institutional policies that apply to all other residents in the institution.

f. To develop and implement systems for periodic evaluation of (1) the quality of the educational experience and program performance, (2) resident performance, (3) resident assessment of the program’s educational components including the faculty, and (4) faculty performance.

h. To advance residents to positions of higher responsibility only on the basis of evidence of their satisfactory progressive scholarship and professional growth.

i. To maintain records of (1) all residents appointed to the transitional year program; (2) the transitional year objectives, curriculum content offered by the program, and the curriculum undertaken by each resident; (3) the performance evaluations; (4) the residents’ subsequent training or other professional activities until they enter a categorical program or determine a career path. Tracking of residents must be done for at least 1 year and need not exceed 5 consecutive years.

l. To implement fair procedures, as established by the sponsoring institution, regarding academic discipline and resident complaints or grievances.

j. To monitor resident stress, including mental or emotional conditions inhibiting performance or learning and drug- or alcohol-related dysfunction. Program directors and teaching staff should be sensitive to the need for timely provision of confidential counseling and psychological support services to residents. Training situations that consistently produce undesirable stress on residents must be evaluated and modified.

k. To prepare statistical, narrative, and progress reports, as requested by the Transitional Year Review Committee.

l. To prepare for and participate in Transitional Year Review Committee surveys and to participate in Residency Review Committee surveys of the sponsoring programs.

m. To inform the Transitional Year Review Committee of the appointment of a new program director when such changes occur.

C. Institutional Coordination Committee

1. An institutional coordination committee must be appointed and have major responsibility for conducting and monitoring the activities of the transitional year program. It should be convened by the parent institution at least four times a year. This committee should be composed of but not limited to the transitional year program director, the program directors (or designees) of disciplines regularly included in the curriculum, and the chief executive officer(s) (or designee[s] in hospital administration) of the parent institution.

2. The responsibilities of the committee must include the following:

a. To recommend to the governing body of the sponsoring institution policies that establish the educational content of the transitional year and the allocation of resources for the effective conduct of the program.

b. To ensure that the quality of medical care provided by transitional year residents is equivalent to that expected of first-year residents in other ACGME-accredited programs within the institution.

c. To monitor the impact of the transitional year program on the categorical residents’ programs to ensure that there is no compromise of the educational resources. This includes monitoring the adequacy of the number of patients, variety of illnesses, educational materials, teaching/attending physicians, and financial support.

d. To review at least twice a year the transitional year residents’ performance evaluations and their assessment of the components of the transitional year, to include the faculty.

e. To ensure within acceptable standards of medical care that the educational opportunities provided transitional year residents are equivalent to those provided first-year residents in the categorical programs in which the transitional year residents participate.

f. To ensure that the quality of education provided by the nonaccredited components of the program is reasonably comparable to that provided to the first-year residents in accredited programs.

g. To approve the curriculum of each transitional year resident, which has been planned with the transitional year program director in accordance with the individual needs of the residents and the Program Requirements of the Transitional Year.

h. To ensure that the transitional year program undergoes a periodic internal review in accordance with the general institutional requirements.

i. To maintain records documenting the committee’s activities for each of the above requirements and to have copies of these records available for transmission to the Transitional Year Review Committee.

III. Faculty

Qualifications/Responsibilities

1. The faculty of the transitional year program must be the same persons or have qualifications equivalent to those of the faculty of the participating categorical programs.

2. There must be a sufficient number of teaching staff with documented qualifications to instruct and supervise adequately all the residents in the program. Members of the teaching staff must be able to devote sufficient time to meet their supervisory and teaching responsibilities.

3. All members of the teaching staff must demonstrate a strong interest in the education of residents, sound clinical and teaching abilities, support of the goals and objectives of the program, a commitment to their own continuing medical education, and participation in scholarly activities.

4. A member of the teaching staff of each participating institution must be designated to assume responsibility for the day-to-day activities of the rotation at that institution, with overall coordination by the program director.

5. There must be active participation of the teaching staff in clinical discussions, rounds, and conferences in a manner that promotes a spirit of inquiry and scholarship. Scholarship implies an in-depth understanding of basic mechanisms of normal and abnormal states and the application of current knowledge to practice.
6. The faculty providing educational experiences in the disciplines not accredited by ACGME must have credentials within their respective specialties similar in professional status to the other transitional year faculty.
7. The teaching and supervision of transitional year residents must be the same as that provided residents in categorical programs.

IV. Curriculum

A. Duration and Content
1. The duration of the transitional year program must be 1 year (12 calendar months).
2. At least 6 months of each resident's curriculum must be provided by disciplines offering fundamental clinical skills as defined above.
3. Other rotations should be a minimum of 1 month or 4 weeks in duration to ensure a reasonable continuity of education and patient care.
4. The curriculum should include emphasis not only on clinical problems but also on discussion of moral, ethical, legal, social, and economic issues.

B. Skill Development
1. During the rotations in disciplines offering fundamental clinical skills, the transitional year residents should develop the skills necessary to obtain a medical history; perform a complete physical examination; define a patient's problems; develop a rational plan for diagnosis; and implement therapy based on the etiology, pathogenesis, and clinical manifestations of various diseases.
2. Educational experiences must ensure development not only of cognitive and procedural/technical skills, but also of humane qualities that enhance interactions between the physician, the patients, and the patients' families.

C. Electives
The transitional year residents should have no fewer than 2 months of electives. Elective rotations should be determined by the needs of the individual resident and/or the requirements of the future residency program chosen.

D. Emergency Medicine
1. The transitional year residents must have a 1-month rotation in emergency medicine under the supervision of qualified teaching staff within the sponsoring or an affiliated institution.
2. The transitional year residents should have experience in the diagnosis and management of all types of patients treated in an institution's emergency department.

E. Ambulatory Care
1. The transitional year residents should have at least 1 month of experience in ambulatory care other than that acquired in the emergency department. This experience may consist of a 1-month block of time or be divided into lesser periods of time on different services to approximate 1 month.
2. Outpatient experience must be obtained within the ambulatory programs of the sponsoring or affiliated institutions.

F. Conferences/Rounds
All disciplines participating in the transitional year program must involve the transitional year residents in their departmental programs, such as seminars, conferences, and grand rounds.

G. Service vs Educational Objectives
The transitional year program must be designed to meet the educational needs of the residents. Service obligations of the sponsoring institution must be secondary to the transitional year educational objectives.

H. Number of Residents
1. Program applications will be reviewed for assurance that there is an appropriate balance between the number of transitional year residents in training and the educational resources available to them.
2. Any proposed change in the number of transitional year residents must receive prior approval by the Transitional Year Review Committee. Programs that fail consistently to fill the designated number of approved positions may be asked to reduce the number offered.

I. Support Facilities/Departments
1. Pathology, radiology, and nuclear medicine facilities must exist in the parent and affiliated institutions. These entities must be directed by qualified physicians who are committed to medical education and to providing competent instruction to the transitional year residents when patients require these diagnostic and/or therapeutic modalities.
2. During working and on-call hours, the transitional year residents must be provided with adequate sleeping, lounge, and food facilities. There should be adequate backup so that patient care is not jeopardized during or following assigned periods of duty. Support services must be such that the transitional year residents do not spend an inordinate amount of time in noneducational activities that can be discharged properly by other personnel. Ancillary support services, facilities, and personnel must contribute to the transitional year program in accordance with the institutional requirements of the Essentials of Accredited Residencies.
3. Transitional year residents must be provided with rapid, reliable systems for communicating with supervising residents and attendings.
4. Residents must have ready access to a major medical library, either at the institution where the residents are located or through arrangement with convenient nearby institutions. Library services should include the electronic retrieval of information from medical databases. There must be access to an on-site library or to a collection of appropriate texts and journals in each institution participating in a residency program. On-site libraries and/or collections of texts and journals must be readily available during nights and weekends.

V. Resident Supervision and Working Environment

A. Supervision
1. The transitional year program director and the faculty of the disciplines participating in the transitional year must ensure, direct, and document proper supervision of the residents in the program at all times.
2. At least 6 months of each transitional year resident's rotations must be on clinical services where he or she works directly with more-senior residents in ACGME-accredited programs. On services where senior residents are not present, there must be effective supervision by faculty and evaluation systems in place.
3. Attending physicians or senior residents with experience appropriate for the severity and complexity of a patient's condition must be available at all times on site.
4. The responsibility or independence given to the transitional year residents by the supervising physician for the care of patients should depend on the residents' knowledge, manual skill, experience, and the complexity of the patients' illnesses and the risk of any procedures that residents perform.

B. Hours
1. Graduate training requires a commitment to continuity of patient care. This continuity of care takes precedence without regard to
the time of day, day of the week, number of hours already
worked, or on-call schedules.

2. The transitional year program director and the faculty of the dis-
ciplines participating in the transitional year must establish an en-
vironment that is optimal both for resident education and for
patient care, while ensuring that undue stress and fatigue among
residents are avoided. It is the responsibility of the transitional
year program director and faculty to ensure that in-hospital duty
hours shall correspond to the program requirements of the cate-
gorical programs to which the transitional year resident is as-
signed so that residents are not required to perform excessively
difficult or prolonged duties regularly.

3. A distinction must be made between on-call time in the hospital
and on-call availability at home vis-a-vis actual hours worked.
The ratio of hours worked to on-call time may vary with each ro-
tation, and therefore precludes a mandated pattern of established
hours.

VI. Assessment

Performance Evaluations
1. The transitional year program director must receive a perfor-
mance evaluation of each transitional year resident by the par-
ticipating discipline on each resident's completion of a rotation
in that discipline. These evaluations must include an assessment
of the resident's knowledge, skills, and professional growth using
appropriate criteria and procedures.

2. At least twice a year, the transitional year residents must be ap-
prised individually by the program director of their evaluations.
These evaluations must be communicated to the resident in a
timely manner.

3. The program director must provide a written final evaluation for
each resident who completes the program. The evaluation must
include a review of the resident's performance during the final
period of training and should verify that the resident has demon-
strated sufficient professional ability to advance into a catego-
rical program.

4. The transitional year residents must provide written evaluations
of the adequacy, quality, and appropriateness of each component
of their educational program, including an evaluation of the fac-
ulty members.

5. The program director must maintain a permanent record of evalu-
ations, as noted in this section, for each resident and have it ac-
cessible to the resident and other authorized personnel. These
records must be made available for inspection during the process
of accreditation of the program.

VII. Completion of Training

A. Institutional Certificates
Institutional certificates to be awarded at the conclusion of training
in the transitional year program must clearly indicate that the expe-
rience was that of a Transitional Year.

B. Continuation of Residency Training
If more than 20% of the transitional year residents, when averaged
over 5 years, enter clinical practice without further training, such
will be considered as evidence that a program is ineffective in
achieving its essential objectives and may be cause for an adverse
accreditation action.

ACGME: June 1991  Effective: July 1995
Section III

Accredited Graduate Medical Education Programs

This section of the Directory contains a list of graduate medical education (GME) programs accredited by the Accreditation Council for Graduate Medical Education (ACGME).

Programs are listed by specialty under the state and city of the sponsoring institution. Listed under the program title is the sponsoring institution at which the resident receives a significant portion of the GME, followed by the primary clinical site (when the location of the primary teaching institution differs from that of the sponsoring institution) and participating institutions (institutions that provide a major portion of required education). Hospitals and other institutions that provide rotations of less than one-sixth of the program length or less than a total of 6 months are not listed.

Listings contain the name, address, and telephone number of program directors. Additional information on each program includes the number of years of GME, the total number of positions for 1995-1996 as reported by the program director, and the program identification number. In most cases, programs that show zero graduate year one (GY-1) positions do not accept applicants without prior GME.

The published program length reflects the length approved by the Residency Review Committee. The program may require additional years.

Most programs start in June or July, but several begin in January or at other times. Candidates should contact program directors or refer to the AMA-FREIDA (Fellowship and Residency Electronic Interactive Database Access system) to ascertain the availability of different or multiple start dates.

Candidates interested in a particular program may obtain additional program and institution information by writing to the program director or by referring to the AMA-FREIDA, available from the American Medical Association: Order Department, PO Box 109050, Chicago, IL 60610, 800 621-8385.

Programs that did not respond to the 1994 AMA Annual Survey of Graduate Medical Education Programs are identified by an asterisk at the end of the program name. Such programs may show zero positions or have outdated information. Programs interested in providing updated information should contact the AMA at 312 464-4693.

Graduates of schools not accredited by the Liaison Committee on Medical Education should carefully read Section I before applying to a program.

Transitional Year Programs

Transitional year programs are available for physicians seeking broad clinical experience before entering GME in their chosen field or for physicians who have not yet decided on a medical specialty.

Combined Specialty Programs

Specialty board-approved "combined specialty programs" are included in Appendix A. The Residency Review Committees do not review or accredit combined programs.

US Armed Forces Graduate Medical Education Programs

GME programs sponsored by the US Armed Forces may have specific entrance requirements (see Section I, Graduate Medical Education Information).
Minnesota

Rochester

Mayo Graduate School of Medicine Program
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Rochester)
Rochester Methodist Hospital
Program Director:
Miguel E Cabanela, MD
Mayo Clinic
Div of Adult Reconstruction
200 First St SW
Rochester, MN 55905
507 284-3816
Length: 1 Year(s)  Total Positions: 3
Program ID: 281-05-21-015

New York

New York

Columbia University Program
Presbyterian Hospital in the City of New York
Program Director:
Louis E Bigrasias, MD
New York Orthopaedic Hospital
The Shoulder Serv
161 Fort Washington Ave Rm 245
New York, NY 10032
212 995-5664
Length: 1 Year(s)  Total Positions: 1
Program ID: 281-35-21-011

Hospital for Special Surgery/Cornell Medical Center Program
Hospital for Special Surgery
Program Director:
Eduardo A Salzani, MD
Paul M. Pollock MD
Dept of Orthopaedics
Hospital for Special Surgery
535 E 70th St
New York, NY 10021
212 606-1472
Length: 1 Year(s)  Total Positions: 2
Program ID: 281-35-21-003

Ohio

Toledo

Medical College of Ohio at Toledo Program
Medical College of Ohio Hospital
St Vincent Medical Center
Program Director:
W. Thomas Jackson, MD
Medical College of Ohio Hospital
Dept of Orthopaedic Surgery
3000 Arlington
Toledo, OH 43699
419 381-3599
Length: 1 Year(s)  Total Positions: 2
Program ID: 281-35-21-014

Pennsylvania

Philadelphia

Thomas Jefferson University Program
Thomas Jefferson University Hospital
Pennsylvania Hospital
Program Director:
Richard H Rothman, MD PhD
Thomas Jefferson University Hospital
838 Walnut St
Philadelphia, PA 19107
215 955-2122
Length: 1 Year(s)  Total Positions: 3
Program ID: 201-41-31-008

University of Pennsylvania Program
Hospital of the University of Pennsylvania
Delaware County Memorial Hospital
Program Director:
Pau L Lutke, MD
University of Pennsylvania School of Medicine
3400 Spruce St
Philadelphia, PA 19104
215 349-9729
Length: 1 Year(s)  Total Positions: 1
Program ID: 201-41-21-001

Pittsburgh

University Health Center of Pittsburgh Program
University Health Center of Pittsburgh
Presbyterian University Hospital/UPMC Veterans Affairs Medical Center (Pittsburgh)
Program Director:
Harry B Ruhsh, MD
Lawrence S. Crossen MD
University of Pittsburgh Medical Center
3071 Fifth Ave Ste 1010
Pittsburgh, PA 15213
412-667-8000
Length: 1 Year(s)  Total Positions: 2
Program ID: 201-41-31-002

Texas

San Antonio

University of Texas Health Science Center at San Antonio Program
University of Texas Medical School at San Antonio
Audie L. Murphy Memorial Veterans Hospital (San Antonio)
University Hospital-South Texas Medical Center
Program Director:
James D Beckman, MD
University of Texas Health Science Center
Dept of Orthopaedics
7700 Floyd Curl Dr
San Antonio, TX 78284-7774
210 567-5158
Length: 1 Year(s)  Total Positions: 1
Program ID: 201-48-21-007

* Updated information not provided.
Virginia

Charlottesville

University of Virginia Program
University of Virginia Medical Center
Program Director: Gwo-Jaw Wang, MD
University of Virginia Health Sciences Center
Dept of Orthopaedics
PO Box 158
Charlottesville, VA 22908
804 924-2300
Length: 1 Year(s)
Total Positions: 1
Program ID: 201-01-31-009

Allergy and Immunology

Alabama

Birmingham

University of Alabama Medical Center Program
University of Alabama Hospital
Program Director: Marc D Cooper, MD
Allergy and Immunology Division
Wallace Tumor Institute # 2
Birmingham, AL 35294-3306
205 934-7440
Length: 2 Year(s)
Total Positions: 6
Program ID: 020-01-31-109

California

La Jolla

Scripps Clinic and Research Foundation Program
Scripps Clinic and Research Foundation
Program Director: Ronald A Simon, MD
Bruce L Zarau, MD
Dept of Grad Med Education 400C
Scripps Clinic and Research
10666 N Torrey Pines Rd
La Jolla, CA 92037-1000
619 554-8818
Length: 2 Year(s)
Total Positions: 2
Program ID: 020-06-31-002

Los Angeles

Children's Hospital of Los Angeles Program
Childrens Hospital of Los Angeles
Kaiser Foundation Hospital (Los Angeles)
Program Director: Joseph A Church, MD
Children's Hosp of Los Angeles
Div of Allergy & Clin Immunol Box 75
4650 Sunset Blvd
Los Angeles, CA 90027
213 667-2501
Length: 2 Year(s)
Program ID: 020-06-21-049

UCLA Medical Center Program
UCLA School of Medicine
UCLA Medical Center
Program Director: E Richard Stiehm, MD
Andrew Saxon, MD
UCLA Med Ctr Dept of Pediatrics
Div of Allergy/Immunology
10831 Le Conte Ave 22-387 MDCC
Los Angeles, CA 90024-1752
310 825-6481
Length: 2 Year(s)
Total Positions: 4
Program ID: 020-06-11-038

University of Southern California Program
Los Angeles County-USC Medical Center
Program Director: Craig Jones, MD
Los Angeles County-USC Medical Center
1129 N State St
Los Angeles, CA 90033
213 236-2813
Length: 2 Year(s)
Program ID: 020-06-31-005

Veterans Affairs Medical Center (West Los Angeles) Program
Veterans Affairs Medical Center (West Los Angeles)
Childrens Hospital of Los Angeles
Program Director: William B Klausnermeyer, MD
West Los Angeles Veterans Admin Med Ctr
Allergy/Immunology Section W111K
Los Angeles, CA 90073
310 824-3210
Length: 2 Year(s)
Total Positions: 3
Program ID: 020-06-21-066

Orange

University of California (Irvine) Program
University of California (Irvine) Medical Center
Veterans Affairs Medical Center (Long Beach)
Program Director: Sudhir Gupta, MD
Dept of Medicine
260 Medical Sciences I
Univ of California
Irvine, CA 92717-4099
714 824-5818
Length: 2 Year(s)
Total Positions: 2
Program ID: 020-06-21-064

Pasadena

Southern California Kaiser Permanente Medical Care (Los Angeles) Program
Southern California Kaiser Permanente Medical Group
Kaiser Foundation Hospital (Los Angeles)
Program Director: Michael Kaplan, MD
Kaiser Foundation Hosp
1515 Vermont 5th Fl
Los Angeles, CA 90027
213 667-4647
Length: 2 Year(s)
Total Positions: 2
Program ID: 020-06-12-003

Sacramento

University of California (Davis) Program
University of California (Davis) Medical Center
Program Director: M Eric Gershwin, MD
Section of Rheumatology-Allergy TB 192
Univ of California (Davis)
School of Medicine
Davis, CA 95616
916 752-3894
Length: 2 Year(s)
Total Positions: 2
Program ID: 020-06-21-048

* Updated information not provided.
San Diego
University of California (San Diego) Program
University of California (San Diego) Medical Center
Program Director: Stephen I Wasserman, MD
1450 Valley Torrey Pines
La Jolla, CA 92037
Program ID: 020-06-21-056
Length: 2 Year(s) Total Positions: 3

San Francisco
University of California (San Francisco) Program
University of California (San Francisco) School of Medicine
Program Director: Daniel C Adelman, MD
University of California (San Francisco) Medical Center
Box 0854
43656 Irving St
San Francisco, CA 94143-0654
415 476-6338
Program ID: 020-06-21-059
Length: 2 Year(s) Total Positions: 7

Stanford
Stanford University Program
Stanford University Hospital
Lucile Salter Packard Children's Hospital at Stanford
Program Director: Richard Moss, MD
Pediatrics Dept
All-Imm and Bsp Med Div
Stanford, CA 94305-5119
Program ID: 020-06-21-066
Length: 2 Year(s) Total Positions: 5

Torrance
Los Angeles County-Harbor-UCLA Medical Center Program
Los Angeles County-Harbor-UCLA Medical Center
Program Director: Gordon N Read, MD
Bayview Medical Center
700 West Carson St Box 409
Torrance, CA 90509-3610
310 222-3365
Program ID: 020-06-21-182
Length: 2 Year(s) Total Positions: 4

Colorado
Aurora
Fitzsimons Army Medical Center Program
Fitzsimons Army Medical Center
Program Director: Philip D Dyre, MD
Maj Thomas R Vaughan, MD
Fitzsimons Army Medical Center
Allergy and Immunology Service
Aurora, CO 80045-5001
303 841-8913
Program ID: 020-07-21-067
Length: 2 Year(s)

Denver
University of Colorado Program A
University of Colorado Health Sciences Center
National Jewish Ctr for Immunology and Respiratory Medicine
Program Director: Stanley J Sodler, MD
Nat’l Jewish Ctr for Immunology and Respiratory Med
Dept of Pediatrics
1400 Jackson St
Denver, CO 80262-2765
303 392-1379
Program ID: 020-07-31-010
Length: 2 Year(s) Total Positions: 14

University of Colorado Program B
University of Colorado Health Sciences Center
National Jewish Ctr for Immunology and Respiratory Medicine
Program Director: Lanny J Rosewater, MD
Henry M Cisneros, MD
Nat'ljewish Ctr for Immunology and Respiratory Med
1400 Jackson St
Denver, CO 80206
303 392-1066
Program ID: 020-07-31-008
Length: 2 Year(s) Total Positions: 10

Connecticut
New Haven
Yale-New Haven Medical Center Program
Yale-New Haven Hospital
Program Director: Robert A Good, MD
All Children’s Hosp Clinical Immunology & Allergy
Stamford, CT 06907-4809
Program ID: 020-011-12-106
Length: 2 Year(s) Total Positions: 7

Florida
Tampa
University of South Florida (All Children’s) Program
University of South Florida College of Medicine
All Children’s Hospital
Veterans Affairs Medical Center (Bay Pines)
Program Director: R Michael Sip, MD
111 Michigan Ave NW
Washington, DC 20010-2970
202-884-3071
Length: 2 Year(s) Total Positions: 2
Program ID: 020-11-11-025

* Updated Information not provided.
Georgia

Atlanta

Emory University Program
Emory University School of Medicine
Emory University Hospital
Grady Memorial Hospital
Henrietta Egleston Hospital for Children

Program Director:
Timothy J. Sullivan, MD
Keith M. Phillips, MD
The Emory Clinic
1555 Clifton Rd NE
Atlanta, GA 30322
404-266-4697

Length: 2 Year(s)  Total Positions: 5
Program Id: 020-12-21-101

Augusta

Medical College of Georgia Program
Medical College of Georgia Hospital and Clinics

Program Director:
Bettie B. Wray, MD
Chesley T. Stafford, MD
Dept of Pediatrics and Medicine
Med Coll of Georgia CJ 141
Augusta, GA 30912-3709
706-721-3531

Length: 2 Year(s)  Total Positions: 2
Program Id: 020-13-21-019

Illinois

Chicago

McCaw Medical Center of Northwestern University Program
Northwestern University Medical School
Children's Memorial Medical Center
Northwestern Memorial Hospital

Program Director:
Paul A. Greenberger, MD
Richard Evans III, MD
Northwestern Univ Med SchI
360 E Chicago Ave 5207
Chicago, IL 60611-3008
312-695-8171

Length: 2 Year(s)  Total Positions: 8
Subspecialties: All
Program Id: 020-16-31-016

Rush Medical College/Max Samter Institute Program*
Rush Medical College
Grant Hospital of Chicago
Max Samter Institute of Allergy and Clinical Immunology

Program Director:
Anita Gewurs, MD
Rush Medical Center
Suite 207 Professional Bldg
1735 W Harrison
Chicago, IL 60612-3834
312-942-6296

Length: 2 Year(s)  Total Positions: 5
Program Id: 020-14-21-188

Iowa

Iowa City

University of Iowa Hospitals and Clinics
Program A*
University of Iowa Hospitals and Clinics

Program Director:
Miles M. Weinberger, MD
University of Iowa Hospitals and Clinics
Dept of Pediatrics
200 Hawkins Dr
Iowa City, IA 52242-1009
319-356-3486

Length: 2 Year(s)  Total Positions: 3
Subspecialties: All
Program Id: 020-18-21-080

University of Iowa Hospitals and Clinics
Program B*
University of Iowa Hospitals and Clinics

Program Director:
Thomas B. Cassal, MD
University of Iowa Hospitals and Clinics
Dept of Internal Medicine
Iowa City, IA 52242-1009
319-556-3682

Length: 2 Year(s)  Total Positions: 3
Program Id: 020-18-21-081

Kansas

Kansas City

University of Kansas Medical Center/Children's Mercy Hospital Program
University of Kansas School of Medicine
Children's Mercy Hospital
University of Kansas Medical Center

Program Director:
Daniel J. Stechschulte, MD
University of Kansas Medical Center
Div of Allergy/Immunology
3901 Rainbow Blvd
Kansas City, KS 66169-7317
913-586-2608

Length: 2 Year(s)  Total Positions: 6
Program Id: 020-19-21-030

Kentucky

Lexington

University of Kentucky Medical Center Program
University of Kentucky Medical Center

Program Director:
Mitch C. Kang, MD
University of Kentucky Dept of Internal Medicine
Kentucky Clinic K-528
Lexington, KY 40536-0254
606-323-5199

Length: 2 Year(s)  Total Positions: 3
Program Id: 020-23-21-110

Louisiana

New Orleans

Louisiana State University Program
Louisiana State University School of Medicine
Children's Hospital
Medical Center of Louisiana at New Orleans-LSU Division

Program Director:
Prem Kumar, MD
Ricardo Scorenzen, MD
Dept of Allergy/Immunology
LSU Medical Center
1642 Tulane Ave
New Orleans, LA 70112-3822
504-568-6080

Length: 2 Year(s)  Total Positions: 5
Program Id: 020-21-21-070

Tulane University Program
Tulane University School of Medicine
Medical Center of Louisiana at New Orleans-Tulane Division

Tulane University Hospital and Clinics
Veterans Affairs Medical Center-Tulane Service (New Orleans)

Program Director:
Manuel Lopez, MD
Tulane University Medical Ctr Sect of Allergy/Immunology
1700 Perdido St
New Orleans, LA 70119
504-588-5578

Length: 2 Year(s)  Total Positions: 4
Program Id: 020-21-31-017

Shreveport

Louisiana State University (Shreveport) Program
Louisiana State University Medical Center-Shreveport
Tulane University Hospital and Clinics

Program Director:
Betina C. Hilmann, MD
LA State Univ Medical Center Hosp
Med Ed Dept (Allergy & Immunology)
PO Box 33822
Shreveport, LA 71130-3822
318-675-6094

Length: 2 Year(s)  Total Positions: 4
Program Id: 020-21-21-060

Maryland

Baltimore

Johns Hopkins University Program
Johns Hopkins University School of Medicine
Johns Hopkins Bayview Medical Center
Johns Hopkins Hospital

Program Director:
N. Franklin Adkinson Jr, MD
Peyton A. Eggleston, MD
Johns Hopkins Allergy and Asthma Center
5001 Hopkins Bayview Circle
Baltimore, MD 21224-5801
410-550-2287

Length: 2 Year(s)  Total Positions: 14
Program Id: 020-23-21-094

* Updated information not provided.

Graduate Medical Education Directory 2023
Accredited Programs in Allergy and Immunology

Bethesda
National Institutes of Health Clinical Center Program*
NIH Warren Grant Magnuson Clinical Center
Program Director:
Dean D Metcalfe, MD
LCU/MHRI/NID
Rm 11 C 265 Bldg 10
9600 Rockville Pike
Bethesda, MD 20892
301-480-2585
Length: 2 Year(s) Total Positions: 9
Program ID: 420-23-16-996

Massachusetts
Boston
Brigham and Women's Hospital Program
Brigham and Women's Hospital
Program Director:
Lawrence Daublade, MD
K Frank Austin, MD
Brigham and Women's Hosp
200 Longwood Ave
Boston, MA 02115
617-522-1965
Length: 2 Year(s) Total Positions: 5
Program ID: 020-24-21-031

Children's Hospital Program
Children's Hospital
Program Director:
Ralph G Geha, MD
Lynda C Schneider, MD
Children's Hospital
300 Longwood Ave
Boston, MA 02115-6747
617-732-7603
Length: 2 Year(s) Total Positions: 10
Program ID: 020-24-21-061

Massachusetts General Hospital Program
Massachusetts General Hospital
Program Director:
Kurt J Bloch, MD
Massachusetts Gen Hosp
Patt St
Boston, MA 02114-2006
617-732-2694
Length: 2 Year(s) Total Positions: 3
Program ID: 020-24-21-051

Michigan
Ann Arbor
University of Michigan Program
University of Michigan Hospitals
Program Director:
James R Baker Jr, MD
William E Solomon, MD
Univ of Michigan Hospitals
Div of Allergy & Immunology
3613 Taubman Ctr
Ann Arbor, MI 48109-0380
313-936-5634
Length: 2 Year(s) Total Positions: 4
Program ID: 020-25-21-045

Detroit
Henry Ford Hospital Program
Henry Ford Hospital
Program Director:
John A Anderson, MD
Henry Ford Hospital Dept of Allergy
2700 W Grand Blvd
Detroit, MI 48202
313-876-3662
Length: 2 Year(s) Total Positions: 5
Program ID: 020-25-11-092

Wayne State University/Detroit Medical Center Program
Wayne State University School of Medicine
Children's Hospital of Michigan
Detroit Receiving Hospital and University Health Care Center
Veterans Affairs Medical Center (Allen Park)
Program Director:
Michael Simon, MD
VA Medical Center
Allen Park, MI 48101
313-595-6000
Length: 2 Year(s) Total Positions: 3
Program ID: 020-25-21-071

Minneapolis
University of Minnesota Program
University of Minnesota Medical School
University of Minnesota Hospital and Clinic
Program Director:
Malcolm N Blumenthal, MD
Univ of Minnesota Box 434 UMMC
530 Mayo Building
420 Delaware Street SE
Minneapolis, MN 55455
612-343-6436
Length: 2 Year(s) Total Positions: 1
Program ID: 020-26-21-091

Rochester
Mayo Graduate School of Medicine Program A
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Rochester)
Rochester Methodist Hospital
Program Director:
James T Li, MD
Application Processing Center
Sheehan 5th Fl
Mayo Graduate School of Medicine
Rochester, MN 55905
612-343-3136
Length: 2 Year(s) Total Positions: 3
Program ID: 020-26-11-018

Mayo Graduate School of Medicine Program B
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Rochester)
St Mary's Hospital of Rochester
Program Director:
Martin 1 Sachs, PhD B0
MGM Application Processing Center
Sheehan 5th Floor
Mayo Graduate School of Medicine
Rochester, MN 55905
507-284-3454
Length: 2 Year(s) Total Positions: 2
Program ID: 020-26-21-007

Missouri
St Louis
St Louis University Group of Hospitals Program
St Louis University School of Medicine
Cardinal Glennon Children's Hospital
St Louis University Hospital
Program Director:
Raymond S Slivka, MD
Alan P Kouton, MD
St Louis University School of Medicine
1402 S Grand Blvd
St Louis, MO 63104-1828
314-577-8456
Length: 2 Year(s) Total Positions: 4
Program ID: 020-28-21-019

Washington University Program
Washington University School of Medicine
Barnes Hospital
St Louis Children's Hospital
Program Director:
J. James Weder, MD
Thomas Smith, MD
Washington University Program
600 S Euclid Box 8122
St Louis, MO 63110
314-286-1658
Length: 2 Year(s) Total Positions: 4
Program ID: 020-28-21-065

Nebraska
Omaha
Creighton University Program
Creighton/Nebraska University Health Foundation
AM St Joseph Hospital at Creighton Univ Medical Center
Ehring Bergquist Hospital
Program Director:
Robert G Townley, MD
Creighton University School of Medicine
2920 California Plaza
Omaha, NE 68178
402-552-2840
Length: 2 Year(s) Total Positions: 3
Program ID: 020-30-21-088

New Jersey
Newark
UMDNJ-New Jersey Medical School Program
UMDNJ New Jersey Medical School
Children's Hospital of New Jersey
Dept of Veterans Affairs Medical Center (East Orange)
UMDNJ-University Hospital
Program Director:
Leonard Bieler, MD
James Oleske, MD
UMDNJ-New Jersey Medical School
Allergy and Immunology DOC 4700
90 Bergen St
Newark, NJ 07118-2489
201-882-2762
Length: 2 Year(s) Total Positions: 4
Program ID: 020-33-11-040

*Updated information not provided.
New York

Bronx

Albert Einstein College of Medicine Program
Albert Einstein College of Medicine of Yeshiva University
Bronx Municipal Hospital Center
La Montefiore Medical Center-Weiler Hospital
Program Director: Arvye Robinstein, MD
Albert Einstein College of Medicine
1900 Morris Park Ave
Forch Bldg Rm 401
Bronx, NY 10461
718 430-2319
Length: 2 Year(s) Total Positions: 11
Program ID: 020-35-21-084

East Meadow

Nassau County Medical Center Program
Nassau County Medical Center
North Shore University Hospital
Program Director: Marianne Prieto, MD PhD
Nassau County Medical Center
Dept of Clinical Immunopathology
2301 Hempstead Tpke
East Meadow, NY 11554-5400
516 572-3214
Length: 2 Year(s) Total Positions: 5
Program ID: 020-35-11-080

New Hyde Park

Albert Einstein College of Medicine at Long Island Jewish Medical Center Program
Long Island Jewish Medical Center
Schneider Children's Hospital (Long Island Jewish Med Ctr)
Program Director: Vincent Bonagura, MD
Schneider Children's Hospital (Long Island Jewish Med Ctr)
26401 76th Ave Rm 235
New Hyde Park, NY 11040
718 470-3506
Length: 2 Year(s) Total Positions: 4
Program ID: 020-35-21-085

New York

Mount Sinai School of Medicine Program*
Mount Sinai School of Medicine
Mount Sinai Medical Center
Program Director: Lloyd F Mayer, MD
Joseph M. Battelle, MD
Mount Sinai Medical Center
Avenue 23-15 Box 1009
Oakwood Ave
New York, NY 10029-6574
212 241-7361
Length: 2 Year(s) Total Positions: 3
Program ID: 020-35-21-083

New York Hospital/Cornell Medical Center Program A*
New York Hospital
Program Director: David J. Valentine, MD
Irwin Rappaport, MD
New York Hospital Dept of Pediatrics
525 E 68th St Rm NO50
New York, NY 10021-4685
212 747-6666
Length: 2 Year(s) Total Positions: 1
Program ID: 020-35-21-046

New York Hospital/Cornell Medical Center Program B*
New York Hospital
Program Director: Gregory Stokkind, MD
Cornell University Medical College
Allergy-Immunology Box 41
520 F 68th St
New York, NY 10021
212 746-4664
Length: 2 Year(s) Total Positions: 2
Program ID: 020-35-21-084

Presbyterian Hospital in the City of New York Program
Presbyterian Hospital in the City of New York
Program Director: William J Davis, MD
Columbia University College of Physicians and Surgeons
530 W 140th St
New York, NY 10032
212 395-2500
Length: 2 Year(s) Total Positions: 2
Program ID: 020-35-21-082

St. Luke's-Roosevelt Hospital Center Program
St. Luke’s-Roosevelt Hospital Center
St. Luke’s-Roosevelt Hospital Center-Roosevelt Division
Program Director: Michael H Greese, MD
St. Luke's-Roosevelt Hospital Center
1600 Tenth Ave
New York, NY 10031-1196
212 533-6066
Length: 2 Year(s) Total Positions: 3
Program ID: 020-35-21-042

Rochester

University of Rochester Program
Strong Memorial Hospital of the University of Rochester
Program Director: Stephen J Rosenfeld, MD
Clinical Immunology/Rheumatology Unit
University of Rochester
601 Elmwood Ave Box 666
Rochester, NY 14642-5876
716 275-2691
Length: 2 Year(s) Total Positions: 4
Program ID: 020-35-11-083

Stony Brook

SUNY at Stony Brook Program
University Hospital-SUNY at Stony Brook
Veterans Affairs Medical Center (Northport)
Program Director: Manochakarian B Murrali, MD
Div of Allergy/Rheumatology Clinical Immunology
SUNY Health Science Center
716 Rm 040
Stony Brook, NY 11794-5161
516 444-2272
Length: 2 Year(s) Total Positions: 2
Program ID: 020-35-21-089

North Carolina

Durham

Duke University Program
Duke University Medical Center
Program Director: Rebecca H Buckles, MD
Charles E Buckle III, MD
Duke University Medical Center
Iv Pod Allergy/Immunology Box 2088
Durham, NC 27710
919 684-2922
Length: 2 Year(s) Total Positions: 8
Subspecialties: All.
Program ID: 020-36-21-022

* Updated information not provided,
Accredited Programs in Allergy and Immunology

**Greenville**

**East Carolina University Program**
East Carolina University School of Medicine
Pitt County Memorial Hospital

**Program Director:**
W James Metager, MD
East Carolina University School of Medicine
Dept of Medicine Brody JB 129
Greenville, NC 27858-6354
919-616-1314

Length: 2 Year(s)  Total Positions: 2
Program ID: 020-36-21-167

**Winston-Salem**

**Bowman Gray School of Medicine Program**
North Carolina Baptist Hospital

**Program Director:**
John W Georgiades, MD
Bowman Gray School of Medicine
Medical Center Blvd
Winston-Salem, NC 27117
910-716-4883

Length: 2 Year(s)  Total Positions: 3
Program ID: 020-36-11-047

**Ohio**

**Cincinnati**

**University of Cincinnati Hospital Group (Veterans) Program**
University of Cincinnati Hospital
Veterans Affairs Medical Center (Cincinnati)

**Program Director:**
David I Bernstein, MD
Jonathan A Bernstein, MD
University of Cincinnati Medical Center
Mail Location 0563
231 Bethesda Ave
Cincinnati, OH 45267-0563
513-558-4703

Length: 2 Year(s)  Total Positions: 1
Program ID: 020-38-21-072

**University of Cincinnati Hospital Group Program**
Children's Hospital Medical Center
University of Cincinnati Hospital

**Program Director:**
Michelle B Leier, MD
Children's Hospital Medical Center
3333 Burnet Ave
Cincinnati, OH 45229-3039
513-558-4586

Length: 2 Year(s)  Total Positions: 2
Program ID: 020-38-21-033

**Pennsylvania**

**Philadelphia**

**Thomas Jefferson University Program**
Thomas Jefferson University Hospital

**Program Director:**
Stephen J McQuade, MD
Jefferson Medical College
Jefferson Alumni Hall
1020 Locust St Ste 643
Philadelphia, PA 19107
215 595-6912

Length: 2 Year(s)  Total Positions: 6
Program ID: 020-41-11-034

**University of Pennsylvania (Children's Hospital Program)**
Children's Hospital of Philadelphia
Hospital of the University of Pennsylvania

**Program Director:**
Nicholas Pawlowski, MD
Children's Hospital of Philadelphia
34th & Civic Blvd
Philadelphia, PA 19104
215-596-9661

Length: 2 Year(s)  Program ID: 020-41-21-074

**University of Pennsylvania Program**
Hospital of the University of Pennsylvania

**Program Director:**
Burton Zeiseman, MD
University of Pennsylvania School of Medicine
612 Johnson Pavilion
Philadelphia, PA 19104-6057
215-882-6241

Length: 2 Year(s)  Program ID: 020-41-21-075

**Pittsburgh**

**University Health Center of Pittsburgh Program**
University Health Center of Pittsburgh
Children's Hospital of Pittsburgh

**Program Director:**
Philip Feinman, MD
Children's Hospital of Pittsburgh
3700 Fifth Ave at DeSoto St
Pittsburgh, PA 15213-2503
412-692-0850

Length: 2 Year(s)  Program ID: 020-41-21-076

**Rhode Island**

**Providence**

**Rhode Island Hospital Program**
Rhode Island Hospital

**Program Director:**
Donald E Klein, MD
Guy A Settipane, MD
Div of Allergy
Rhode Island Hospital
191 Eddy St
Providence, RI 02903
401-444-5640

Length: 2 Year(s)  Program ID: 020-48-21-054

**Tennessee**

**Memphis**

**University of Tennessee Program**
University of Tennessee College of Medicine
Baptist Memorial Hospital
LeBonheur Children's Medical Center
St Jude Children's Research Hospital
University of Tennessee Medical Center
Veterans Affairs Medical Center (Memphis)

**Program Director:**
Tal Munevo, MD PhD
Univ of Tennessee Coll of Med
Div of Allergy and Immunology
656 Court Ave Bn H300
Memphis, TN 38163
901-595-6603

Length: 2 Year(s)  Program ID: 020-47-21-025

**Nashville**

**Vanderbilt University Program**
Vanderbilt University Medical Center

**Program Director:**
William E Stroebel, MD
1500 21st Ave S
Ste 3600
Nashville, TN 37212
615-322-7242

Length: 2 Year(s)  Program ID: 020-47-21-097

**Texas**

**Dallas**

**University of Texas Southwestern Medical School Program**
University of Texas Southwestern Medical School
Children's Medical Center of Dallas
Dallas County Hospital District-Parkland Memorial Hospital

**Program Director:**
Donald A Kennedy, MD PhD
Univ of Texas Southwestern Medical Center
3323 Harry Hines Blvd
Dallas, TX 75235-8559
214-648-3064

Length: 2 Year(s)  Program ID: 020-48-21-085

**Galveston**

**University of Texas Medical Branch Hospitals Program A**
University of Texas Medical Branch Hospitals

**Program Director:**
J Andrew Grant, MD
University of Texas Medical Branch Hospitals
Clinical Science Bldg Rm 406
Route 0762
Galveston, TX 77555-0762
409-772-3411

Length: 2 Year(s)  Program ID: 020-48-11-036

* Updated information not provided.
University of Texas Medical Branch Hospitals Program B
University of Texas Medical Branch Hospitals
Program Director: James G. Goldstein, MD
Univ of Texas Medical Branch Pediatric Immunology/Allergy
301 University Blvd
Galveston, TX 77555-0569
409-772-2305
Length: 2 Year(s)  Total Positions: 3
Program ID: 026-48-11-827

Houston
Baylor College of Medicine Program
Baylor College of Medicine
Methodist Hospital
Texas Children's Hospital
Program Director: William T. Shearer, MD PhD
David P. Houston, MD
Baylor College of Medicine
Dep of Pediatrics
One Baylor Plaza
Houston, TX 77030
713 798-3204
Length: 2 Year(s)  Total Positions: 8
Program ID: 026-48-21-483

Lackland AFB
Wilford Hall USAF Medical Center
Program
Wilford Hall USAF Medical Center (S6)
Program Director: Theodore M. Freeman, MD
WHMC/DT
2200 Bergquist Dr Sta 1
Lackland AFB
San Antonio, TX 78236-5000
210-670-5417
Length: 2 Year(s)  Total Positions: 6
Program ID: 026-48-21-477

San Antonio
University of Texas Health Science Center at San Antonio
Program
University of Texas Medical School at San Antonio
University Health Center-Downtown
University Hospital-South Texas Medical Center
Program Director: Joseph D. Diaz, MD
University of Texas Health Science Center
Internal Medicine-Allergy & Immunology
7220 Floyd Curl Dr
San Antonio, TX 78284-7805
210-587-9676
Length: 2 Year(s)  Total Positions: 2
Program ID: 026-48-41-435

Virginia
Charlottesville
University of Virginia Program
University of Virginia Medical Center
Program Director: Thomas A. A Plate-Mills, MD
George W. Ward, Jr, MD
University of Virginia
Dept of Medicine-Allergy/Immunology
Box 2359
Charlottesville, VA 22908
434-243-2277
Length: 2 Year(s)  Total Positions: 4
Program ID: 026-51-21-100

Richmond
Medical College of Virginia/Virginia Commonwealth University Program
Medical College of Virginia/Virginia Commonwealth University
Medical College of Virginia Hospitals
Program Director: Lawrence R. Schwarts, MD PhD
MC/Virginia Commonwealth Univ
PO Box 980252
Richmond, VA 23298-0252
804-828-5885
Length: 2 Year(s)  Total Positions: 2
Program ID: 026-51-21-466

Washington
Seattle
University of Washington Program
University of Washington School of Medicine
Children's Hospital and Medical Center
Harborview Medical Center
University of Washington Medical Center
Virginia Mason Medical Center
Program Director: William R. Henderson Jr, MD
Univ of Washington Med Ctr
1050 NE Pacific
Dept of Med Mail Code RM-13
Seattle, WA 98195
206-598-3780
Length: 2 Year(s)  Total Positions: 4
Program ID: 026-54-21-478

Wisconsin
Madison
University of Wisconsin Program
University of Wisconsin Hospital and Clinics
William S Middleton Veterans Hospital
Program Director: Robert F. Lenarmo Jr, MD
University of Wisconsin Hospitals and Clinics
600 Highland Ave 10667
Madison, WI 53792-3344
608-263-4184
Length: 2 Year(s)  Total Positions: 4
Program ID: 026-58-21-425

* Updated information not provided.

Graduate Medical Education Directory
287
Anesthesiology

Alabama

Birmingham
University of Alabama Medical Center Program
University of Alabama Hospital
Carraway Methodist Medical Center
Children's Hospital of Alabama
Cooper Green Hospital
Veterans Affairs Medical Center (Birmingham)
Program Director:
David H Chestnut, MD
Department of Anesthesiology UAB
Jefferson Tower 445
619 S 19th St
Birmingham, AL 35233-6310
205 934-4996
Length: 4 year(s) Total Positions: 48 (GY: 0)
Program ID: 040-04-21-018

Mobile
University of South Alabama Program
University of South Alabama Medical Center
Program Director:
John N Miller, MD
University of South Alabama Dept of Anesthesiology
Martin Rm 908
241 Printz Hall
Mobile, AL 36617
205 471-7041
Length: 4 year(s) Total Positions: 20 (GY: 4)
Program ID: 040-04-21-179

Arkansas

Little Rock
University of Arkansas for Medical Sciences Program*
University of Arkansas College of Medicine
Arkansas Children's Hospital
John McClelland Memorial Veterans Hospital
University Hospital of Arkansas
Program Director:
E F Klein Jr, MD
Univ of Arkansas for Med Sci
4301 W Markham St
Little Rock, AR 72205
501 686-6119
Length: 4 year(s) Total Positions: 48 (GY: 8)
Program ID: 040-04-21-018

California

Loma Linda
Loma Linda University Program
Loma Linda University Medical Center
Program Director:
Floyd S Brauner, MD
Loma Linda University Medical Center
Dept of Anesthesiology Rm 2519
Loma Linda, CA 92545
909 554-4776
Length: 4 year(s) Total Positions: 29 (GY: 0)
Subspecialty: APM
Program ID: 040-05-21-016

Los Angeles
Charles R Drew University Program
Charles R Drew University Of Medicine And Science
LAC-King/Drew Medical Center
Program Director:
Daniel J Wooley, MD
Martin Luther King Jr Drew Medical Center
1200 S Willowbrook
Los Angeles, CA 90033
310 638-2401
Length: 3 year(s) Total Positions: 15 (GY: 0)
Program ID: 040-05-21-019

UCLA Medical Center Program
UCLA School of Medicine
Cedars-Sinai Medical Center
UCLA Medical Center
Veterans Affairs Medical Center (West Los Angeles)
Program Director:
Michael J Sopher, MD
UCLA School of Medicine
Dept of Anesthesiology
10833 LeConte Ave
Los Angeles, CA 90024-1718
310 638-3310
Length: 3 year(s) Total Positions: 76 (GY: 0)
Program ID: 040-05-21-200

University of Southern California Program
Los Angeles County-USC Medical Center
Program Director:
Vladimir Zelen, MD
Los Angeles City-USC Med Ctr
1200 N State St Trc 14901
Los Angeles, CA 90033
213 222-6597
Length: 4 year(s) Total Positions: 75 (GY: 0)
Program ID: 040-05-21-018

Orange
University of California (Irvine) Program
University of California (Irvine) Medical Center
Saw Bernardino County Medical Center
Veterans Affairs Medical Center (Long Beach)
Program Director:
Steven J Barker, PhD MD
Dept of Anesthesiology
101 City Dr S PO Box 1401
Bldg 62 Bld 61A
Orange, CA 92861-1401
714 456-5501
Length: 3 year(s) Total Positions: 42 (GY: 10)
Subspecialties: APM, OCA
Program ID: 040-05-21-015

Sacramento
University of California (Davis) Program
University of California (Davis) Medical Center
Program Director:
Carol L Lake, MD
Univ of California (Davis) Med Ctr
Dept of Anesthesia
2315 Stockton Blvd #1007
Sacramento, CA 95817
916 228-1772
Length: 4 year(s) Total Positions: 31 (GY: 0)
Program ID: 040-05-21-014

San Diego
Naval Medical Center (San Diego) Program
Naval Medical Center (San Diego)
Program Director:
Gerald A Burgard, MD
Naval Hospital
Dept of Anesthesia
San Diego, CA 921 14-5600
619 632-8841
Length: 3 year(s) Total Positions: 18 (GY: 0)
Program ID: 040-05-21-006

University of California (San Diego) Program
University of California (San Diego) Medical Center
Children's Hospital Medical Center of Northern California
Veterans Affairs Medical Center (San Diego)
Program Director:
Harvey M Shatzko, MD
Dept of Anesthesiology
UCSD Med Ctr
200 W Arbor Dr
San Diego, CA 92103-001
619 543-5207
Length: 3 year(s) Total Positions: 35 (GY: 0)
Subspecialties: APM
Program ID: 040-05-21-022

* Updated information not provided.
San Francisco
University of California (San Francisco) Program
University of California (San Francisco) School of Medicine
San Francisco General Hospital Medical Center
University of California (San Francisco) Medical Center
Veterans Affairs Medical Center (San Francisco)
Program Director:
Mark A Rosen, MD
University of California Dept of Anesthesiology
Box 0648
San Francisco, CA 94143-0648
415 476-2335
Length: 4 Year(s) Total Positions: 92 (GY: 30)
Subspecialties: CCA
Program ID: 049-06-21-023

Stanford
Stanford University Program
Stanford University Hospital
Santa Clara Valley Medical Center
Veterans Affairs Medical Center (Palo Alto)
Program Director:
Donald R Stanski, MD
Stanford University Medical Center
Dept of Anesthesiology
33580
Stanford, CA 94305-5117
415 723-7377
Length: 4 Year(s) Total Positions: 46 (GY: 0)
Subspecialties: APM, CCA
Program ID: 049-06-21-025

Torrance
Los Angeles County-Harbor-UCLA Medical Center Program
Los Angeles County-Harbor-UCLA Medical Center
Program Director:
Ching-Yuh Lee, MD
Harbor-UCLA Medical Center
1000 W Carson St Box 10
Torrance, CA 90608-2910
213 523-3471
Length: 3 Year(s) Total Positions: 10 (GY: 0)
Program ID: 049-06-11-026

Colorado
Denver
University of Colorado Program
University of Colorado Health Sciences Center
Denver Health and Hospitals
Veterans Affairs Medical Center (Denver)
Program Director:
Charles P Gibbs, MD
University of Colorado Health Sciences Center
Dept of Anesthesiology B113
4266 E Ninth Ave
Denver, CO 80262
303 279-4681
Length: 3 Year(s) Total Positions: 36 (GY: 0)
Program ID: 049-07-21-028

Connecticut
Farmington
University of Connecticut Program
University of Connecticut School of Medicine
St Francis Hospital and Medical Center
Univ of Connecticut Health Center/John Dempsey Hospital
Program Director:
Martin Rosenblum, MD
Univ of Connecticut Health Center
263 Farmington Ave
Farmington, CT 06030-2015
203 679-4270
Length: 3 Year(s) Total Positions: 17 (GY: 0)
Program ID: 049-08-21-172

Hartford
Hartford Hospital Program
Hartford Hospital
Program Director:
James J Richter, MD
Hartford Hospital
80 Seymour St
Hartford, CT 06105
203 545-3117
Length: 3 Year(s) Total Positions: 28 (GY: 0)
Subspecialties: APM, CCA
Program ID: 049-08-12-029

New Haven
Yale-New Haven Medical Center Program
Yale-New Haven Hospital
Veterans Affairs Medical Center (West Haven)
Program Director:
Abraham Mandel, MD
Yale-New Haven Medical Center Dept of Anesthesiology
20 York St
New Haven, CT 06504-0110
203 788-3002
Length: 3 Year(s) Total Positions: 57 (GY: 0)
Program ID: 049-08-21-030

District of Columbia
Washington
George Washington University Program
George Washington University School of Medicine
George Washington University Hospital
Program Director:
Herbert D Weintraub, MD
George Washington University Medical Center
901 23rd St NW
Washington, DC 20037
202 994-3150
Length: 3 Year(s) Total Positions: 10 (GY: 0)
Subspecialties: CCA
Program ID: 049-10-21-033

Georgetown University Program
Georgetown University Hospital
Program Director:
David E Less, MD
Georgetown University Hospital
3800 Reservoir Rd NW
Washington, DC 20007
202 331-8640
Length: 4 Year(s) Total Positions: 30 (GY: 5)
Subspecialties: APM
Program ID: 049-10-21-032

Howard University Program
Howard University Hospital
Program Director:
Melville Q Wyde Jr, MD
Howard University Hospital Dept of Anesthesiology
2441 Georgia Ave NW
Washington, DC 20050
202 865-8711
Length: 4 Year(s) Total Positions: 19 (GY: 2)
Program ID: 049-10-11-084

Walter Reed Army Medical Center Program
Walter Reed Army Medical Center
Program Director:
Ronald L Lutz, MD
Chief Anesthesia and Operative Service
Walter Reed Army Medical Center
6825 16th St NW
Washington, DC 20037-5001
202 782-9009
Length: 4 Year(s) Total Positions: 27 (GY: 0)
Subspecialties: CCA
Program ID: 049-10-31-003

Florida
Gainesville
University of Florida Program
University of Florida College of Medicine
Shands Hospital at the University of Florida
Veterans Affairs Medical Center (Gainesville)
Program Director:
Roy F Cucchiara, MD
University of Florida
Dept of Anesthesiology
1800 SW Archer Rd
Gainesville, FL 32610-0254
904 392-3441
Length: 4 Year(s) Total Positions: 80 (GY: 0)
Subspecialties: APM, CCA
Program ID: 049-11-81-035

Miami
University of Miami-Jackson Memorial Medical Center Program
University of Miami-Jackson Memorial Medical Center
Miami Children's Hospital
Mount Sinai Medical Center of Greater Miami
Veterans Affairs Medical Center (Miami)
Program Director:
N W Brian Crenthorne, MD
Dept of Anesthesiology (R-370)
Jackson Memorial Medical Center
PO Box 01570
Miami, FL 33101
305 358-6970
Length: 4 Year(s) Total Positions: 107 (GY: 5)
Subspecialties: APM, CCA
Program ID: 049-11-21-036

* Updated information not provided.
Tampa
University of South Florida Program
University of South Florida College of Medicine
H Lee Moffitt Cancer Center
Tampa General Healthcare
Program Director: John D. Dowling, MD
University of South Florida College of Medicine
Dept of Anesthesiology
12001 Bruce B Downs Blvd Box 56
Tampa, FL 33612-4790
813 842-3009
Length: 3 Year(s)  Total Positions: 69  (GYI: 6)
Subspecialties: APM, CCA
Program ID: 040-11-21-178

Georgia
Atlanta
Emory University Program
Emory University School of Medicine
Grady Memorial Hospital
Henrietta Lipton Hospital for Children
Program Director: John J. Walle, MD
Emory University School of Medicine
Dept of Anesthesiology
1360 Clifton Rd NW
Atlanta, GA 30322
404 241-3111
Length: 4 Year(s)  Total Positions: 78  (GYI: 6)
Subspecialties: APM
Program ID: 040-12-21-037

Augusta
Medical College of Georgia Program
Medical College of Georgia Hospital and Clinics
Veterans Affairs Medical Center (Augusta)
Program Director: Robert S. Gramling, MD
Dept of Anesthesiology
Medial College of Georgia
1120 15th St SE
Augusta, GA 30912-2706
706 721-4644
Length: 4 Year(s)  Total Positions: 32  (GYI: 7)
Program ID: 040-12-11-036

Illinois
Chicago
Cook County Hospital Program
Cook County Hospital
Program Director: Alon P. Winnie, MD
Cook County Hospital
Dept of Anesthesiology
1835 W Harrison St
Chicago, IL 60612-9005
312 830-3800
Length: 3 Year(s)  Total Positions: 42  (GYI: 1)
Program ID: 040-13-15-039

Illinois Masonic Medical Center Program
Illinois Masonic Medical Center
Program Director: M. Harper Sevitt, MD
Department of Anesthesiology
Illinois Masonic Medical Center
860 Wellington Ave
Chicago, IL 60657-6108
312 236-7005
Length: 4 Year(s)  Total Positions: 57  (GYI: 1)
Program ID: 040-16-31-040

McGaw Medical Center of Northwestern University Program
Northwestern University Medical School
Children's Memorial Medical Center
Evanston Hospital
Northwestern Memorial Hospital
Veterans Affairs Lakeside Medical Center (Chicago)
Program Director: Edward A. Brunner, MD Phil
Northwestern University Med Schi
Dept of Anesthesiology
303 E Superior St Rm #056
Chicago, IL 60611
312 998-8254
Length: 4 Year(s)  Total Positions: 46  (GYI: 5)
Subspecialties: APM, CCA
Program ID: 040-15-21-042

Rush-Presbyterian-St Luke's Medical Center Program*
Rush-Presbyterian-St Luke's Medical Center
Program Director: Anthony D. Ivanovich, MD
Rush-Presbyterian-St Luke's Medical Center
1653 W Congress Pkwy
Chicago, IL 60612
312 942-6664
Length: 4 Year(s)  Total Positions: 47  (GYI: 5)
Program ID: 040-16-21-043

University of Chicago Program
University of Chicago Hospitals
Program Director: Michael F. Feigen, MD
University of Chicago Dept of Anesthesia and Critical Care
5841 S Maryland Ave MC2028
Chicago, IL 60637-1470
312 755-6700
Length: 4 Year(s)  Total Positions: 50  (GYI: 6)
Subspecialties: APM
Program ID: 040-16-11-044

University of Illinois College of Medicine at Chicago Program
University of Illinois College of Medicine at Chicago
Michael Reese Hospital and Medical Center
University of Illinois Hospital and Clinics
Program Director: Ronald F. Albrecht, MD
Univ of Illinois at Chicago Coll of Medicine
Dept of Anesthesiology/3 Kaplan
1901 S Ellis Ave
Chicago, IL 60616-3502
312 751-2544
Length: 4 Year(s)  Total Positions: 7  (GYI: 7)
Subspecialties: APM
Program ID: 040-16-11-041

Maywood
Loyola University Program
Foster G McGaw Hospital-Loyola University of Chicago
Edward J Hines Jr Veterans Affairs Hospital
Program Director: Stephen Strogoff, MD
Loyola Univ Med Ctr
Dept of Anesthesiology
2160 S First Ave
Maywood, IL 60153
708 216-4616
Length: 4 Year(s)  Total Positions: 56  (GYI: 8)
Program ID: 040-10-11-046

Indiana
Indianapolis
Indiana University Medical Center Program
Indiana University Medical Center
Richard L Roudebush Veterans Affairs Medical Center
William N Wishard Memorial Hospital
Program Director: Robert H. Stooling, MD
Indiana Univ Med Ctr
1120 S Dr PH 204
Indianapolis, IN 46202-5115
317 274-0259
Length: 3 Year(s)  Total Positions: 75  (GYI: 0)
Subspecialties: APM
Program ID: 040-17-31-048

Iowa
Iowa City
University of Iowa Hospitals and Clinics Program
University of Iowa Hospitals and Clinics
Veterans Affairs Medical Center (Iowa City)
Program Director: John H. Tinker, MD
University of Iowa Hospitals and Clinics
Dept of Anesthesia
Iowa City, IA 52242-1000
319 356-2833
Length: 4 Year(s)  Total Positions: 46  (GYI: 0)
Subspecialties: APM, CCA
Program ID: 040-16-31-049

Kansas
Kansas City
University of Kansas Medical Center Program
University of Kansas School of Medicine
University of Kansas Medical Center
Program Director: Kirk T. Benson, MD
Univ of Kansas Medical Center
Dept of Anesthesiology 2407 Bell
3901 Rainbow
Kansas City, KS 66160-7415
913 588-6670
Length: 3 Year(s)  Total Positions: 29  (GYI: 0)
Program ID: 040-18-11-050

* Updated information not provided.
Wichita
University of Kansas (Wichita) Program
University of Kansas School of Medicine (Wichita)
St Francis Regional Medical Center
St Joseph Medical Center
Wesley Medical Center
Program Director:
Karl E Becker Jr, MD
Univ of Kansas Sch of Medicine (Wichita)
Dept of Anesthesiology
1010 N Kansas
Wichita, KS 67214-3109
316 268-6147
Length: 3 Year(s) Total Positions: 20 (GYI: 0)
Program ID: 040-20-22451

Kentucky
Lexington
University of Kentucky Medical Center Program
University Hospital Albert B Chandler Medical Center
Program Director:
William O Witt, MD
University of Kentucky
Albert B Chandler Medical Center
800 Rose St Rm N 202
Lexington, KY 40536-0864
606 257-8652
Length: 3 Year(s) Total Positions: 54 (GYI: 0)
Subspecialties: APM
Program ID: 040-20-21-052

Louisville
University of Louisville Program
University of Louisville School of Medicine
Kosair Childrens Hospital (Alliant Health System)
University of Louisville Hospital
Veterans Affairs Medical Center (Louisville)
Program Director:
Benjamin M. Rijter, MD
Univ of Louisville School of Medicine
Dept of Anesthesiology
Louisville, KY 40292
502 852-5651
Length: 3 Year(s) Total Positions: 36 (GYI: 0)
Program ID: 040-20-21-053

Louisiana
New Orleans
Alton Ochsner Medical Foundation Program
Alton Ochsner Medical Foundation
Program Director:
James B Douglas Jr, MD
Alton Ochsner Medical Foundation
Dept of Graduate Medical Education
1516 Jefferson Hwy
New Orleans, LA 70121
504 842-3755
Length: 4 Year(s) Total Positions: 26 (GYI: 6)
Program ID: 040-21-12-050

Louisiana State University Program
Louisiana State University School of Medicine
Medical Center of Louisiana at New Orleans-LSU Division
Veterans Affairs Medical Center-LSU Service (New Orleans)
Program Director:
Mohammed Yarahchi, MD
Medical Center of Louisiana at New Orleans
1532 Tulane Ave
New Orleans, LA 70112-2360
504 568-3156
Length: 3 Year(s) Total Positions: 25 (GYI: 5)
Program ID: 040-21-21-054

Tulane University Program
Tulane University School of Medicine
Tulane University Hospital and Clinics
Program Director:
Alan W. Grogono, MD
Tulane University School of Medicine
1430 Tulane Ave
New Orleans, LA 70112-2399
504 588-5004
Length: 4 Year(s) Total Positions: 34 (GYI: 4)
Program ID: 040-21-31-168

Shreveport
Louisiana State University (Shreveport) Program
Louisiana State University Medical Center-Shreveport
Program Director:
D. Richard Davis II, MD
Louisiana State Univ Med Ctr- Hosp
1501 Kings Hwy
P.O. Box 33932
Shreveport, LA 71133-3932
318 677-5300
Length: 3 Year(s) Total Positions: 24 (GYI: 0)
Program ID: 040-21-11-056

Maine
Portland
Maine Medical Center Program
Maine Medical Center
Program Director:
Kenneth L. Racester, MD
Maine Medical Center
22 Bramhall St
Portland, ME 04102-3175
207 871-2525
Length: 4 Year(s) Total Positions: 18 (GYI: 2)
Program ID: 040-22-11-067

Maryland
Baltimore
Johns Hopkins University Program
Johns Hopkins University School of Medicine
Johns Hopkins Bayview Medical Center
Johns Hopkins Hospital
Program Director:
Edward D Miller Jr, MD
Dept of Anesthesiology and Critical Care Medicine
Johns Hopkins Hospital
600 N Wolfe St Blalock 1415
Baltimore, MD 21287-4963
410 555-8488
Length: 3 Year(s) Total Positions: 68 (GYI: 0)
Subspecialties: APM,CA
Program ID: 040-22-11-067

University of Maryland Program
University of Maryland Medical System
Program Director:
Jane Magazako, MD
University of Maryland Medical System
Dept of Anesthesiology
22 S Greene St
Baltimore, MD 21201
410 328-6120
Length: 3 Year(s) Total Positions: 43 (GYI: 0)
Subspecialties: APM,CA
Program ID: 040-23-11-059

Bethesda
National Naval Medical Center (Bethesda) Program*
National Naval Medical Center (Bethesda)
Program Director:
Col Robert M Grant, MD
National Naval Medical Center
8901 Wisconsin Ave
Bethesda, MD 20889-5000
301 265-4455
Length: 3 Year(s) Total Positions: 18 (GYI: 0)
Program ID: 040-23-21-067

Massachusetts
Boston
Beth Israel Hospital Program
Beth Israel Hospital
Program Director:
Edward Lowenstein, MD
Beth Israel Hospital
Dept of Anesthesia & Urological Care
330 Brookline Ave
Boston, MA 02215
617 736-3903
Length: 3 Year(s) Total Positions: 45 (GYI: 0)
Subspecialties: APM,CA
Program ID: 040-24-11-160

Boston University Program
Boston University Medical Center-Boston Medical Hospital
Children's Hospital
Program Director:
Marc H. Willock, MD MBA
University Hospital
Anesthesia Dept
88 E Newton St
Boston, MA 02118-2393
617 638-0210
Length: 3 Year(s) Total Positions: 26 (GYI: 0)
Program ID: 040-24-21-060

Brigham and Women's Hospital Program
Brigham and Women's Hospital
Program Director:
Simon Getman, MD PhD
Brigham and Women's Hospital
76 Prairies St
Boston, MA 02116
617793-8218
Length: 3 Year(s) Total Positions: 106 (GYI: 0)
Subspecialties: APM
Program ID: 040-24-21-060

* Updated information not provided.
Accredited Programs in Anesthesiology

Massachusetts General Hospital Program
Massachusetts General Hospital
Program Director:
Warren M Zapot, MD
Massachusetts General Hosp
Pruit St
Boston, MA 02114
617 726-3000
Length: 3 Year(s) Total Positions: 31 (GYI: 0)
Subspecialties: APM,COA
Program ID: 040-24-31-964

New England Medical Center Hospitals Program
New England Medical Center Hospitals
Program Director:
W Heinrich Wurm, MD
Bex 298 Dept of Anesthesia
New England Medical Center
770 Washington St
Boston, MA 02111
617 906-6094
Length: 3 Year(s) Total Positions: 23 (GYI: 0)
Program ID: 040-24-21-965

St Elizabeth's Medical Center of Boston Program
St Elizabeth's Medical Center of Boston
Program Director:
Paul E Levesque, MD
St Elizabeth's Hospital of Boston
Basket, USB
738 Cambridge St
Brighton, MA 02135
617 788-2782
Length: 3 Year(s) Total Positions: 21 (GYI: 0)
Program ID: 040-24-21-667

Springfield Baystate Medical Center Program
Baystate Medical Center
Program Director:
Howard A Trachtenberg, MD
Baystate Medical Center
Dept of Anesthesiology
709 Chestnut St
Springfield, MA 01199
413 794-3520
Length: 4 Year(s) Total Positions: 22 (GYI: 4)
Subspecialties: APM
Program ID: 040-24-13-669

Worcester University of Massachusetts Medical Center Program*
University of Massachusetts Medical Center
Program Director:
Charles A Vaccari, MD
Univ of Massachusetts Medical Center
55 Lake Ave N
Worcester, MA 01655
508 856-3821
Length: 4 Year(s) Total Positions: 26 (GYI: 0)
Subspecialties: OCA
Program ID: 040-24-31-670

Michigan Ann Arbor
University of Michigan Program*
University of Michigan Hospitals
Program Director:
Kevin K Temprem, MD
University of Michigan
Dept of Anesthesiology
1500 E Medical Center Dr
Ann Arbor, MI 48109-0048
313 853-4260
Length: 4 Year(s) Total Positions: 77 (GYI: 5)
Subspecialties: APM
Program ID: 040-25-21-071

Detroit Henry Ford Hospital Program
Henry Ford Hospital
Program Director:
H Michael Mars, MBBS
Henry Ford Hospital
Dept of Anesthesiology
2790 W Grand Blvd
Detroit, MI 48202
313 586-5034
Length: 4 Year(s) Total Positions: 28 (GYI: 4)
Subspecialties: APM,COA
Program ID: 040-29-21-185

Snaif Hospital Program
Snaif Hospital
Program Director:
Morris Brown, MD
Snaif Hospital
6767 W Outer Dr
Detroit, MI 48235
313 401-5365
Length: 4 Year(s) Total Positions: 33 (GYI: 0)
Subspecialties: OCA
Program ID: 040-35-21-703

Southfield Providence Hospital Program
Providence Hospital
Program Director:
Janet A Livermore, MD
Providence Hosp
Med Education
10400 W Nine Mile Rd
Southfield, MI 48075
810 424-2751
Length: 4 Year(s) Total Positions: 11 (GYI: 4)
Program ID: 040-20-21-074

Minnesota Minneapolis
University of Minnesota Program
University of Minnesota Medical School
Hennepin County Medical Center
University of Minnesota Hospital and Clinic
Program Director:
Richard J Palaszynz, MD
University of Minnesota Hospital and Clinics
420 Delaware St SE
Box 244 UMMC
Minneapolis, MN 55455-0392
612 624-9990
Length: 4 Year(s) Total Positions: 31 (GYI: 4)
Program ID: 040-26-21-076

Rochester Mayo Graduate School of Medicine Program
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Scottsdale)
Rochester Methodist Hospital
St Luke's Hospital
St Mary's Hospital of Rochester
Program Director:
Diane K Horie, MD
Mayo Clinic Dept of Anesthesiology
Rochester, MN 55905
507 255-6219
Length: 4 Year(s) Total Positions: 61 (GYI: 7)
Subspecialties: APM,COA
Program ID: 040-26-21-076

Mississippi Jackson
University of Mississippi Medical Center Program
University of Mississippi School of Medicine
University Hospital
Program Director:
John H Eichhorn, MD
University of Mississippi Medical Center
2500 x State St
Jackson, MS 39216-4005
601 984-5900
Length: 3 Year(s) Total Positions: 28 (GYI: 0)
Program ID: 040-27-11-077

Missouri Columbia
University of Missouri-Columbia Program
University of Missouri-Columbia School of Medicine
University and Children's Hospital
Program Director:
Noel W Lawson, MD
University of Missouri-Columbia Hospital and Clinics
One Hospital Dr
Columbia, MO 65212
314 882-2568
Length: 4 Year(s) Total Positions: 25 (GYI: 0)
Program ID: 040-28-11-078

Kansas City University of Missouri at Kansas City Program
University of Missouri Kansas City School of Medicine
Truman Medical Center-West
Program Director:
Gerald P Touhy, MD
St Luke's Hospital
4th & Wornall Rd
Kansas City, MO 64111
816 892-5132
Length: 4 Year(s) Total Positions: 24 (GYI: 6)
Program ID: 040-28-13-080

* Updated information not provided.
St Louis
St Louis University Group of Hospitals Program
St Louis University School of Medicine
Cardinal Glennon Children's Hospital
St Louis University Hospital
Veterans Affairs Medical Center (St Louis)
Program Director: John P. Schweiss, MD
St Louis Univ School of Medicine
3650 Vista Ave at Grand
P.O. Box 16250
St Louis, MO 63110-0250
314 577-8750
Length: 4 Year(s) Total Positions: 24 (GYT: 3)
Program ID: 040-28-21-186

Washington University Program
Barnes Hospital
Program Director: Alex S. Zwen, MD
Washington Univ School of Medicine Dept of Anesthesiology
660 S. Euclid Ave
Box 8094
St Louis, MO 63110
314 362-6976
Length: 4 Year(s) Total Positions: 54 (GYT: 0)
Subspecialties: APM, CCA
Program ID: 040-28-11-081

New Jersey
Hackensack
Hackensack Medical Center Program
Hackensack Medical Center
Program Director: Mark D. Schlesinger, MD
Hackensack Medical Center
Dept of Anesthesiology
30 Prospect Ave
Hackensack, NJ 07601
201 996-2345
Length: 4 Year(s) Total Positions: 12 (GYT: 0)
Program ID: 040-33-11-084

Lindonston
St Barnabas Medical Center Program
St Barnabas Medical Center
Program Director: Norman J. Zeig, MD
St Barnabas Medical Center
Dept of Anesthesiology
94 Old Short Hills Rd #1002
Lindonston, NJ 07030-6072
201 533-5512
Length: 3 Year(s) Total Positions: 6 (GYT: 0)
Program ID: 040-33-12-089

Long Branch
Monmouth Medical Center Program
Monmouth Medical Center
Program Director: Sandor Pankin, MD
Monmouth Medical Center Dept of Anesthesiology
300 Second Ave
Long Branch, NJ 07740
973 870-5109
Length: 4 Year(s) Total Positions: 19 (GYT: 0)
Program ID: 040-33-11-086

Newark
UMDNJ-New Jersey Medical School Program
UMDNJ-New Jersey Medical School
UMDNJ-University Hospital
Program Director: Wen-Hsien Wu, MD
UMDNJ-New Jersey Medical School
165 S Orange Ave Med Science Bldg
Newark, NJ 07103-5714
201 982-5006
Length: 4 Year(s) Total Positions: 28 (GYT: 4)
Subspecialties: APM
Program ID: 040-33-21-087

Piscataway
UMDNJ-Robert Wood Johnson Medical School Program
UMDNJ-Robert Wood Johnson Medical School
Robert Wood Johnson University Hospital
Program Director: Sanford L. Klein, DDS, MD
UMDNJ-Robert Wood Johnson Medical School
Dept of Anesthesiology
One Robert Wood Johnson Pl CN19
New Brunswick, NJ 08903-0019
908 235-7907
Length: 3 Year(s) Total Positions: 26 (GYT: 1)
Subspecialties: APM, CCA
Program ID: 040-33-21-180

South Orange
Seton Hall University School of Graduate Medical Education Program
Seton Hall University School of Graduate Medical Education
St Joseph's Hospital and Medical Center
Program Director: Ana Stanic, MD
St Joseph's Hospital and Medical Center
783 Main St
Paterson, NJ 07503
201 977-2116
Length: 4 Year(s) Total Positions: 23 (GYT: 0)
Program ID: 040-33-21-089

New Mexico
Albuquerque
University of New Mexico Program
University of New Mexico School of Medicine
Veterans Affairs Medical Center (Albuquerque)
Program Director: Jorge A. Estrin, MD, PhD
University of New Mexico School of Medicine
2701 Frontier NE
Sage Bldg Rm 110
Albuquerque, NM 87131-5216
505 272-2610
Length: 4 Year(s) Total Positions: 45 (GYT: 5)
Subspecialties: APM
Program ID: 040-34-21-183

New York
Albany
Albany Medical Center Program
Albany Medical Center Hospital
Program Director: Phillip D. Lomb, MB BS
Albany Medical Center Hospital
Dept of Anesthesiology (A-311)
43 New Scotland Ave
Albany, NY 12208-3478
518 262-4300
Length: 4 Year(s) Total Positions: 36 (GYT: 5)
Subspecialties: APM, CCA
Program ID: 040-35-21-187

Bronx
Albert Einstein College of Medicine Program
Albert Einstein College of Medicine of Yeshiva University
Bronx Municipal Hospital Center
Montefiore Medical Center-Henry and Lucy Moses Division
Montefiore Medical Center-Weiler Hospital
Program Director: Albert J. Sattlermann, MD
Albert Einstein College of Medicine
Montefiore Medical Center
111 W 210th St
Bronx, NY 10467
718 935-4300
Length: 3 Year(s) Total Positions: 91 (GYT: 0)
Subspecialties: CCA
Program ID: 040-35-21-181
<table>
<thead>
<tr>
<th>Program Name</th>
<th>Program Details</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Brooklyn</strong></td>
<td><strong>Brookdale Hospital Medical Center Program</strong>&lt;br&gt;Program Director: Adel E Abad, MD&lt;br&gt;Brookdale Hospital Medical Center&lt;br&gt;Bronx, NY 10469&lt;br&gt;Length: 3 Year(s) Total Positions: 18 (GYT: 0) Program ID: 040-35-11-107</td>
</tr>
<tr>
<td><strong>East Meadow</strong></td>
<td><strong>Nassau County Medical Center Program</strong>&lt;br&gt;Program Director: Kenneth J Freese, MD&lt;br&gt;Nassau County Medical Center&lt;br&gt;Length: 3 Year(s) Total Positions: 14 (GYT: 0) Program ID: 040-35-11-109</td>
</tr>
<tr>
<td><strong>New Hyde Park</strong></td>
<td><strong>Albert Einstein College of Medicine at Long Island Jewish Medical Center Program</strong>&lt;br&gt;Program Director: Philip Lebowitz, MD&lt;br&gt;Long Island Jewish Medical Center&lt;br&gt;Length: 3 Year(s) Total Positions: 24 (GYT: 0) Program ID: 040-35-11-110</td>
</tr>
<tr>
<td><strong>New York</strong></td>
<td><strong>Albert Einstein College of Medicine at Beth Israel Medical Center Program</strong>&lt;br&gt;Program Director: Erwin Lalez, MD&lt;br&gt;Beth Israel Medical Center&lt;br&gt;Length: 3 Year(s) Total Positions: 30 (GYT: 0) Program ID: 040-35-11-108</td>
</tr>
<tr>
<td><strong>Mount Sinai School of Medicine Program</strong></td>
<td><strong>Elmhurst Hospital Center-Mount Sinai Services Mount Sinai Medical Center Program</strong>&lt;br&gt;Program Director: Joel A Kapitan, MD&lt;br&gt;Mount Sinai Medical Center&lt;br&gt;Length: 3 Year(s) Total Positions: 26 (GYT: 0) Program ID: 040-35-11-106</td>
</tr>
<tr>
<td><strong>New York Hospital/Cornell Medical Center Program</strong></td>
<td><strong>New York Hospital Memorial Sloan-Kettering Cancer Center Program</strong>&lt;br&gt;Program Director: John J Saverese, MD&lt;br&gt;New York Hospital Memorial Sloan-Kettering Cancer Center&lt;br&gt;Length: 4 Year(s) Total Positions: 52 (GYT: 9) Subspecialties: APM, CCA Program ID: 040-35-21-093</td>
</tr>
<tr>
<td><strong>New York University Medical Center Program</strong></td>
<td>**New York University Medical Center Bellevue Hospital Center Veterans Affairs Medical Center (Manhattan) Program Director: Herman Turndorf, MD&lt;br&gt;New York Univ Medical Center Dept of Anesthesiology&lt;br&gt;550 First Ave&lt;br&gt;New York, NY 10016&lt;br&gt;Length: 3 Year(s) Total Positions: 60 (GYT: 0) Subspecialties: CCA Program ID: 040-35-11-106</td>
</tr>
<tr>
<td><strong>Presbyterian Hospital in the City of New York Program</strong></td>
<td><strong>Presbyterian Hospital in the City of New York Program</strong>&lt;br&gt;Program Director: Mieczyslaw D Fister, MD&lt;br&gt;Presbyterian Hospital in the City of New York&lt;br&gt;622 W 168th St&lt;br&gt;New York, NY 10032-3784&lt;br&gt;Length: 3 Year(s) Total Positions: 55 (GYT: 0) Subspecialties: CCA Program ID: 040-35-11-107</td>
</tr>
<tr>
<td><strong>St Luke's-Roosevelt Hospital Center Program</strong></td>
<td><strong>St Luke's-Roosevelt Hospital Center Program</strong>&lt;br&gt;Program Director: Daniel M Thys, MD&lt;br&gt;St Luke's-Roosevelt Hospital Center&lt;br&gt;1111 Amsterdam Ave&lt;br&gt;New York, NY 10025&lt;br&gt;Length: 3 Year(s) Total Positions: 35 (GYT: 0) Subspecialties: APM Program ID: 040-35-11-108</td>
</tr>
<tr>
<td><strong>Stony Brook</strong></td>
<td><strong>SUNY at Stony Brook Program</strong>&lt;br&gt;Program Director: Paul J Poppens, MD&lt;br&gt;SUNY at Stony Brook University Hospital&lt;br&gt;Stony Brook, NY 11794-5840&lt;br&gt;Length: 4 Year(s) Total Positions: 35 (GYT: 0) Subspecialties: APM Program ID: 040-35-21-170</td>
</tr>
</tbody>
</table>

* Updated information not provided.*
Syracuse
St Joseph's Hospital Health Center
Program
St Joseph's Hospital Health Center
Program Director: Anthony A. Arcieri, MD
St Joseph's Hospital Health Center
301 Prospect Ave
Syracuse, NY 13203
315-448-5440
Length: 4 Year(s) Total Positions: 10 (GY: 2)
Subspecialties: APM
Program ID: 040-3S-12-112

SUNY Health Science Center at Syracuse
Program
University Hospital-SUNY Health Science Center at Syracuse
Crouse Irving Memorial Hospital
Veterans Affairs Medical Center (Syracuse)
Program Director:
Enrico M. Campione, MD
SUNY-Bobst Sci Ctr
Dept of Anesthesiology
780 E Adams St
Syracuse, NY 13220
315-484-4720
Length: 4 Year(s) Total Positions: 36 (GY: 0)
Program ID: 040-3S-31-113

Valhalla
New York Medical College at St Vincent's Hospital and Medical Center of New York
Program
New York Medical College
St Vincent's Hospital and Medical Center of New York
Program Director:
George G. Neuman, MD
St Vincent's Hospital and Medical Center of New York
153 W 11th St SR Room 408
Dept of Anesthesiology
New York, NY 10011
212-790-7550
Length: 4 Year(s) Total Positions: 20 (GY: 0)
Program ID: 040-3S-31-109

New York Medical College at Westchester County Medical Center
Program
New York Medical College
Lincoln Medical and Mental Health Center
Metropolitan Hospital Center
New Rochelle Hospital Medical Center
Westchester County Medical Center
Program Director:
Elizabeth A. Post, MD
New York Med-Coll
Dept of Anesthesiology
Macy Pavilion W 1nd Fl
Valhalla, NY 10595
914-238-7892
Length: 4 Year(s) Total Positions: 53 (GY: 0)
Subspecialties: APM
Program ID: 040-3S-31-105

North Carolina
Chapel Hill
University of North Carolina Hospitals
Program
University of North Carolina Hospitals
Program Director:
Philip G. Boyer, MD
UNC School of Medicine
Dept of Anesthesiology
220 Burnett Womack Bldg CB7010
Chapel Hill, NC 27599-7010
919-866-5136
Length: 4 Year(s) Total Positions: 23 (GY: 3)
Program ID: 040-3S-31-114

Durham
Duke University Program
Duke University Medical Center
Program Director:
J.G. Reeves, MD
Duke University Medical Center
Box 3064
Durham, NC 27710
919-668-6841
Length: 4 Year(s) Total Positions: 44 (GY: 0)
Subspecialties: CCA
Program ID: 040-3S-31-115

Winston-Salem
Bowman Gray School of Medicine
Program
North Carolina Baptist Hospital
Program Director:
Francis M. Jones III, MD
Bowman Gray School of Medicine/North Carolina Baptist Hosp
Medical Center Blvd
Winston-Salem, NC 27157-1000
336-716-4497
Length: 4 Year(s) Total Positions: 45 (GY: 11)
Subspecialties: APM, CCA
Program ID: 040-3S-31-116

Ohio
Cincinnati
University of Cincinnati Hospital Group
Program
University of Cincinnati Hospital
Children's Hospital Medical Center
Program Director:
Phillip O. Brindamour, MD
Univ of Cincinnati Med Ctr
PO Box 670531
Cincinnati, OH 45267-0531
513-558-5885
Length: 4 Year(s) Total Positions: 37 (GY: 4)
Subspecialties: APM
Program ID: 040-3S-31-118

Cleveland
Case Western Reserve University (MetroHealth) Program
MetroHealth Medical Center
Program Director:
Lee S. Shepard, MD
MetroHealth Medical Center
200 MetroHealth Dr
Cleveland, OH 44109-1988
216-468-4801
Length: 4 Year(s) Total Positions: 21 (GY: 0)
Program ID: 040-3S-31-117

Case Western Reserve University Program
University Hospitals of Cleveland
Veterans Affairs Medical Center (Cleveland)
Program Director:
Helmut F. Caspari, MD PhD
University Hospitals of Cleveland Dept of Anesthesiology
11100 Euclid Ave
Cleveland, OH 44106-6000
216-844-7330
Length: 4 Year(s) Total Positions: 40 (GY: 2)
Subspecialties: CCA
Program ID: 040-3S-31-119

Cleveland Clinic Foundation Program
Cleveland Clinic Foundation
Program Director:
F. George Kestenstein, MD
Cleveland Clinic Foundation
9500 Euclid Ave TCC2
Dept of Anesthesiology
Cleveland, OH 44195-8242
216-444-5690
Length: 4 Year(s) Total Positions: 78 (GY: 6)
Subspecialties: APM, CCA
Program ID: 040-3S-31-110

Meridia Huron Hospital Program
Meridia Huron Hospital
Program Director:
John P. Poulos, MD
Meridia Huron Hospital
19891 Terracina Rd
Cleveland, OH 44112
216-761-4280
Length: 3 Year(s) Total Positions: 15 (GY: 4)
Program ID: 040-3S-32-122

Columbus
Ohio State University Program
Ohio State University Medical Center
Program Director:
John S. McDonald, MD
Ohio State University Hospitals Dept of Anesthesiology
N 415 Down Hall
410 W 10th Ave
Columbus, OH 43210-1288
614-294-5345
Length: 3 Year(s) Total Positions: 35 (GY: 0)
Subspecialties: CCA
Program ID: 040-3S-11-123

* Updated Information not provided.
Toledo
Medical College of Ohio at Toledo Program
Medical College of Ohio Hospital
Flower Hospital
Toledo Hospital
Program Director:
Michael Nugent, MD
Med Coll of Ohio Hosp
Dept of Anesthesiology
P O Box 10086
Toledo, OH  43609-0008
419 381-3566
Length: 4 Year(s) Total Positions: 40  (GTY: 10)
Program ID: 040-38-21-125

Pennsylvania
Danville
Geisinger Medical Center Program
Geisinger Medical Center
Program Director:
John B Houston, MD
Geisinger Medical Center
North Academy Ave
Danville, PA 17822
17-271-6843
Length: 4 Year(s) Total Positions: 20   (GTY: 5)
Program ID: 040-41-21-184

Hershey
Milton S Hershey Medical Center of Pennsylvania State University Program
Penn State University Hospital-Milton S Hershey Med Ctr
Program Director:
Julien P Fleury, MD
Milton S Hershey Medical Center
Dept of Anesthesia
Residency Admissions Office
Hershey, PA 17033
717 531-6128
Length: 4 Year(s) Total Positions: 26   (GTY: 0)
Subspecialties: APM,CCA
Program ID: 040-41-11-130

Philadelphia
Albert Einstein Medical Center Program
Albert Einstein Medical Center
Program Director:
Jonathan V Roth, MD
Albert Einstein Medical Center
Dept of Anesthesiology
5511 Old York Rd
Philadelphia, PA 19141-3008
215 456-0850
Length: 4 Year(s) Total Positions: 26   (GTY: 0)
Subspecialties: APM
Program ID: 040-41-21-132

MCPHU/Hahnemann University Hospital Program
Hahnemann University Hospital
Program Director:
Henry Rosenberg, MD
Dept of Anesthesiology 95-310
Hahnemann University
Broad & Vine Sts
Philadelphia, PA 19102-1192
215 762-7902
Length: 4 Year(s) Total Positions: 41   (GTY: 9)
Subspecialties: APM
Program ID: 040-41-21-133

Temple University Program
Temple University Hospital
Program Director:
Christina Carlson, MD
Temple University Hospital
Dept of Anesthesiology
Broad & Ontario St
Philadelphia, PA 19140
215 707-3325
Length: 3 Year(s) Total Positions: 24   (GTY: 0)
Subspecialties: APM,CCA
Program ID: 040-41-81-136

Thomas Jefferson University Program
Thomas Jefferson University Hospital
Program Director:
Joseph L Sultzman, MD
Thomas Jefferson University Hospital
Dept of Anesthesiology
111 South 11th St Ste 64603
Philadelphia, PA 19107
215 955-6161
Length: 3 Year(s) Total Positions: 66   (GTY: 0)
Subspecialties: APM
Program ID: 040-41-21-127

University of Pennsylvania Program
Hospital of the University of Pennsylvania
Children's Hospital of Philadelphia
Veterans Affairs Medical Center (Philadelphia)
Program Director:
David E Longnecker, MD
Hospital of the University of Pennsylvania
Dept of Anesthesiology
3400 Spruce St
Philadelphia, PA 19104-4283
215 662-3738
Length: 4 Year(s) Total Positions: 76   (GTY: 0)
Subspecialties: APM,CCA
Program ID: 040-41-21-134

Pittsburgh
MCPHU/Allegheny General Hospital Program
Allegheny General Hospital
Program Director:
Glenn P Grawold, MD
Allegheny Gen Hosp
333 E North Ave
Pittsburgh, PA 15212-0006
412 369-3155
Length: 3 Year(s) Total Positions: 26   (GTY: 0)
Program ID: 040-41-11-136

Mercy Hospital of Pittsburgh Program
Mercy Hospital of Pittsburgh
Program Director:
William D Hetrick, MD
Mercy Hospital of Pittsburgh
Dept of Anesthesiology
1400 Locust St
Pittsburgh, PA 15219-5166
412 232-8005
Length: 4 Year(s) Total Positions: 24   (GTY: 0)
Subspecialties: CCA
Program ID: 040-41-12-149

University Health Center of Pittsburgh Program
University Health Center of Pittsburgh
Montefiore University Hospital (UPMC)
Presbyterian-University Hospital/UPMC
Program Director:
Peter M Winter, MD
Univ of Pittsburgh
Dept of Anesthesiology Sch of Med
1500 Scalp Hall
Pittsburgh, PA 15261
412 648-9223
Length: 4 Year(s) Total Positions: 67   (GTY: 0)
Subspecialties: APM,CCA
Program ID: 040-41-21-139

Oklahoma
Oklahoma City
University of Oklahoma Health Sciences Center Program
University of Oklahoma College of Medicine-Oklahoma City
Children's Hospital of Oklahoma
University Hospital and Clinical Center
Veterans Affairs Medical Center (Oklahoma City)
Program Director:
Robin J Elwood, MD
University of Oklahoma Health Sciences Center
920 Stanton L Young Blvd
PO Box 53188
Oklahoma City, OK 73104-5000
405 271-4951
Length: 4 Year(s) Total Positions: 38   (GTY: 6)
Program ID: 040-38-21-128

Oregon
Portland
Oregon Health Sciences University Program
Oregon Health Sciences University Hospital
Program Director:
Harry G Kington, MB BCh
Oregon Health Sciences University Dept of Anesthesiology
3181 SW Sam Jackson Park Rd
Portland, OR 97201-3088
503 404-7644
Length: 3 Year(s) Total Positions: 10   (GTY: 0)
Subspecialties: APM
Program ID: 040-40-21-129

* Updated information not provided.
Western Pennsylvania Hospital Program
Western Pennsylvania Hospital
Program Director: Jeffrey L. Canose, MD
The Western Pennsylvania Hospital
Anesthesiology Dept
4600 Pittsburgh Ave
Pittsburgh, PA 15234
412 587-5322
Length: 3 Year(s) Total Positions: 18 (GY: 0)
Program ID: 040-41-32-141

Puerto Rico
San Juan
University of Puerto Rico Program
University of Puerto Rico School of Medicine: General Hospital
San Juan City Hospital
Veteran Affairs Medical Center (San Juan)
Program Director: Carlos Rivas-Haddick, MD
Univ of Puerto Rico School of Med
1800 Oxford Ave Box 4677
San Juan, PR 00986
880 758-0640
Length: 4 Year(s) Total Positions: 33 (GY: 5)
Program ID: 040-45-21-142

South Carolina
Charleston
Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
MUSC Medical Center
Veteran Affairs Medical Center (Charleston)
Program Director: Raymond C. Roy, PhD MD
Medical University of South Carolina
Dept of Anesthesiology
171 Ashley Ave
Charleston, SC 29425-2207
803 792-2322
Length: 4 Year(s) Total Positions: 20 (GY: 10)
Program ID: 040-45-25-142

Columbia
Richland Memorial Hospital-University of South Carolina School of Medicine Program
Richland Memorial Hospital-Univ of South Carolina Sch of Med
Program Director: Edwin A. Bowe, MD
Dept of Anesthesiology
Richland Memorial Hospital
6 Richland Medical Pk
Columbia, SC 29033
803 434-6181
Length: 3 Year(s) Total Positions: 22 (GY: 4)
Subspecialties: APM
Program ID: 040-45-21-177

Tennessee
Knoxville
University of Tennessee Medical Center at Knoxville Program
University of Tennessee Graduate School of Medicine
University of Tennessee Memorial Hospital
Program Director: Steve A. Morris, MD
The Univ of Tennessee
Graduate Sch of Medicine
1924 Alcoa Hwy
Knoxville, TN 37996
865 544-9221
Length: 3 Year(s) Total Positions: 18 (GY: 0)
Subspecialties: CCA
Program ID: 040-47-11-144

Memphis
University of Tennessee Program
University of Tennessee College of Medicine
Regional Medical Center at Memphis
University of Tennessee Medical Center
Program Director: John Zanolla Jr, MD PhD
Univ of Tennessee Memphis
Dept of Anesthesiology
800 Madison Ave
Memphis, TN 38163
901 448-1554
Length: 3 Year(s) Total Positions: 34 (GY: 0)
Program ID: 040-47-21-145

Nashville
Vanderbilt University Program
Vanderbilt University Medical Center
Program Director: Charles J. Beaulieu, MD PhD
Vanderbilt University Hospital
1161 2nd Ave S
Suite 2301 The Vanderbilt Clinic
Nashville, TN 37232-2155
615 343-9410
Length: 3 Year(s) Total Positions: 40 (GY: 0)
Subspecialties: APM
Program ID: 040-47-11-146

Texas
Dallas
University of Texas Southwestern Medical School Program
University of Texas Southwestern Medical School
Dallas County Hospital District-Parkland Memorial Hospital
Program Director: Dennis P. Landers, MD PhD
University of Texas Southwestern Medical Center at Dallas
5323 Harry Hines Blvd
Dallas, TX 75390-8001
214 648-5460
Length: 4 Year(s) Total Positions: 72 (GY: 0)
Subspecialties: APM
Program ID: 040-48-21-147

El Paso
Texas Tech University (El Paso) Program
Texas Tech University Health Sciences Center at El Paso
Baylor College of Medicine
Program Director: L Donald Randell, MD
Texas Tech University-HSC
Dept of Anesthesiology
4800 Alberia Ave
El Paso, TX 79905-1288
915 545-6660
Length: 3 Year(s) Total Positions: 21 (GY: 0)
Program ID: 040-48-21-187

Fort Sam Houston
Brooke Army Medical Center Program
Brooke Army Medical Center
Program Director: Douglas M Anderson, MD
Brooke Army Medical Center Anesthesiology Service
Fort Sam Houston
San Antonio, TX 78234-6346
210 741-6139
Length: 3 Year(s) Total Positions: 21 (GY: 0)
Program ID: 040-48-12-004

Galveston
University of Texas Medical Branch Hospitals Program
University of Texas Medical Branch Hospitals Program
Program Director: Donald S Prough, MD
University of Texas Medical Branch
Dept of Anesthesiology
Galveston, TX 77555-0991
409 772-1231
Length: 4 Year(s) Total Positions: 74 (GY: 16)
Subspecialties: CCA
Program ID: 040-46-11-149

Houston
Baylor College of Medicine Program
Baylor College of Medicine
Harris County Hospital District-Ben Taub General Hospital
Methodist Hospital
Veteran Affairs Medical Center (Houston)
Program Director: William P Childress, MD
Baylor College of Medicine
Dept of Anesthesiology
6550 Fannin Smith Tower 1003
Houston, TX 77030
713 798-5117
Length: 4 Year(s) Total Positions: 78 (GY: 6)
Subspecialties: APM
Program ID: 040-48-31-150

University of Texas at Houston Program
University of Texas Medical School at Houston Hermann Hospital
Program Director: Jeffrey Katz, MD
University of Texas Health Science Center at Houston
4041 Fannin MSB 5.120
Houston, TX 77030
713 792-5858
Length: 4 Year(s) Total Positions: 91 (GY: 30)
Subspecialties: APM,CCA
Program ID: 040-48-31-182

* Updated information not provided.
Lackland AFB
Wilford Hall USAF Medical Center
Program
Wilford Hall USAF Medical Center (SG)
Program Director:
Jay S Ellin Jr, MD
Wilford Hall Medical Center/PSSA
Dept of Anesthesiology
2200 Bergquist Dr Ste 1
San Antonio, TX 78236-5000
210-678-5555

Length: 3 Year(s)  Total Positions: 31 (GYI: 6)
Subspecialties: CCA
Program ID: 040-49-21-001

Lubbock
Texas Tech University (Lubbock) Program
Texas Tech University Health Sciences Center at Lubbock University Medical Center
Program Director:
Gabor B Racz, MD
Texas Tech University Health Sciences Center
Dept of Anesthesiology
3601 Fourth St
Lubbock, TX 79430
806-743-3112

Length: 3 Year(s)  Total Positions: 16 (GYI: 0)
Subspecialties: APM
Program ID: 040-49-11-153

San Antonio
University of Texas Health Science Center at San Antonio Program
University of Texas Medical School at San Antonio
Audie L. Murphy Memorial Veterans Hospital (San Antonio)
University Hospital-South Texas Medical Center
Program Director:
R Brian Smith, MD
Univ of Texas Rlth Sci Ctr
Dept of Anesthesiology
7703 Floyd Curl Dr
San Antonio, TX 78284-7638
210-647-4567

Length: 3 Year(s)  Total Positions: 16 (GYI: 6)
Subspecialties: APM
Program ID: 040-49-21-155

Temple
Texas A&M College of Medicine-Scott and White Program
Scott and White Memorial Hospital
Olin E Teague Veterans Center
Program Director:
Charles H McLester, MD
Texas A&M College of Medicine-Scott and White
Dept of Anesthesiology
2401 S 31st St
Temple, TX 76508
800-289-4465

Length: 3 Year(s)  Total Positions: 24 (GYI: 5)
Program ID: 040-49-21-156

Utah
Salt Lake City
University of Utah Program
University of Utah Medical Center
Program Director:
K C Wong, MD PhD
University of Utah Medical Center
50 N Medical Dr
Salt Lake City, UT 84132
801-581-6383

Length: 3 Year(s)  Total Positions: 38 (GYI: 0)
Program ID: 040-49-31-157

Vermont
Burlington
Medical Center Hospital of Vermont Program
Medical Center Hospital of Vermont
Program Director:
John E Massman Jr, MD
Dept of Anesthesia
Medical Center Hospital of Vermont
Colchester Ave
Burlington, VT 05401
802-865-3415

Length: 3 Year(s)  Total Positions: 23 (GYI: 0)
Subspecialties: APM
Program ID: 040-49-11-138

Virginia
Charlottesville
University of Virginia Program
University of Virginia Medical Center
Program Director:
Robert M Epstein, MD
University of Virginia Medical Center
Box 238
Charlottesville, VA 22908
804-984-9613

Length: 4 Year(s)  Total Positions: 50 (GYI: 6)
Subspecialties: CCA
Program ID: 040-51-11-169

Portsmouth
Naval Medical Center (Portsmouth) Program*
Naval Medical Center (Portsmouth)
Program Director:
William L Little Jr, MD
Dept of Anesthesiology Dept of the Navy
Naval Med Ctr
620 John Paul Jones Circle
Fortonace, VA 23601-5600
804-288-5125

Length: 3 Year(s)  Total Positions: 16 (GYI: 0)
Subspecialties: APM
Program ID: 040-61-21-008

Richmond
Medical College of Virginia/Virginia Commonwealth University Program*
Medical College of Virginia/Virginia Commonwealth University
Hunter Holmes McGuire VA Medical Center (Richmond)
Medical College of Virginia Hospitals
Program Director:
Surinder K Kalar, MD
MC/Virginia Commonwealth Univ
PO Box 90102
Richmond, VA 23298-0103
804-786-0733

Length: 4 Year(s)  Total Positions: 9 (GYI: 3)
Subspecialties: APM
Program ID: 040-61-11-160

Washington
Seattle
University of Washington Program
University of Washington School of Medicine
Harborview Medical Center
University of Washington Medical Center
Program Director:
Fredrick W Cheney, MD
Dept of Anesthesiology RN-10
Univ of Washington
1650 NE Pacific
Seattle, WA 98195
206-543-2673

Length: 4 Year(s)  Total Positions: 56 (GYI: 2)
Subspecialties: APM
Program ID: 040-54-21-161

Virginia Mason Medical Center Program
Virginia Mason Medical Center
Program Director:
Michael F Mutry, MD
Virginia Mason Hospital
Off of Housestaff Affairs (H7-ME)
825 Seneca St
Seattle, WA 98101
206-838-0679

Length: 4 Year(s)  Total Positions: 31 (GYI: 4)
Subspecialties: APM
Program ID: 040-64-12-182

Tacoma
Madigan Army Medical Center Program
Madigan Army Medical Center
Program Director:
Michael J Shroyer, MD
Commander
Madigan Army Medical Center
Attn: HSHJ-9-AO (Anesthesiology Svcs)
Tacoma, WA 98431-5000
256-982-1975

Length: 3 Year(s)  Total Positions: 16 (GYI: 5)
Program ID: 040-64-21-188

* Updated information not provided.
Blood Banking/Transfusion Medicine (Pathology-Anatomic and Clinical)

Alabama

Birmingham

University of Alabama Medical Center Program
University of Alabama Hospital
American Red Cross Blood Services-Alabama Region
Program Director:
Shu T Huang, MD
University of Alabama Hospital Blood Bank
619 S 11th St
Birmingham, AL 35233-6420
205 944-5421
Length: 1 Year(s) Total Positions: 3 (GY: 2)
Program ID: 005-01-21-041

California

Long Beach

Long Beach Memorial Medical Center/American Red Cross Blood and Tissue Services Program
Long Beach Memorial Medical Center
American Red Cross Blood Services-Southern California Region
Program Director:
Asa Barnes, MD
George Garrison, PhD
Long Beach Memorial Medical Center
2801 Atlantic Ave
Long Beach, CA 90801
310 595-3489
Length: 1 Year(s) Total Positions: 2
Program ID: 005-05-21-014

Los Angeles

Cedars-Sinai Medical Center Program
Cedars-Sinai Medical Center
Program Director:
Dennis Goldfinger, MD
Div of Transfusion Medicine
Dept of Pathology & Lab Medicine
8700 Beverly Blvd
Los Angeles, CA 90048
310 655-5195
Length: 1 Year(s) Total Positions: 1 (GY: 0)
Program ID: 005-05-21-015

UCLA Medical Center Program
UCLA School of Medicine
UCLA Medical Center
Program Director:
Lawrence D Petz, MD
University of California Los Angeles Medical Center
Room 25-258 CHS
10833 Le Conte Ave
Los Angeles, CA 90024-1713
213 825-0700
Length: 1 Year(s) Total Positions: 1 (GY: 0)
Program ID: 005-05-21-049

University of Southern California Program
Los Angeles County- USC Medical Center
Program Director:
Jr A Shuman, MD
Los Angeles County-University of S California Medical Center
1200 N State St Box 771
Los Angeles, CA 90033
213 222-5993
Length: 1 Year(s) Total Positions: 1
Program ID: 005-06-21-016

San Francisco

Irwin Memorial Blood Center Program
Irwin Memorial Blood Centers
Program Director:
Herbert A Perkins, MD
Irwin Memorial Blood Centers
270 Masonic Ave
San Francisco, CA 94118-4896
415 567-5400
Length: 1 Year(s) Total Positions: 1 (GY: 0)
Program ID: 005-05-21-017

Connecticut

Farmington

University of Connecticut Program
University of Connecticut School of Medicine
Connecticut Red Cross Blood Services
Hartford Hospital
St Francis Hospital and Medical Center
Univ of Connecticut Health Center/John Dempsey Hospital
Program Director:
Edward E Morse, MD
University of Connecticut School of Medicine
Dept of Laboratory Medicine MC2225
363 Farmington Ave
Farmington, CT 06030
303 637-3632
Length: 1 Year(s) Total Positions: 2 (GY: 0)
Program ID: 005-08-21-025

New Haven

Yale-New Haven Medical Center Program
Yale-New Haven Hospital
Connecticut Red Cross Blood Services
Program Director:
Edward L Snyder, MD
Blood Bank/Laboratory Medicine 459-CB
Yale-New Haven Hospital
20 York St
New Haven, CT 06504
203 785-2441
Length: 1 Year(s) Total Positions: 1 (GY: 0)
Program ID: 005-06-21-062

* Updated information not provided.
District of Columbia

Washington

Georgetown University Program
Georgetown University Hospital
Program Director:
S Gerald Sanders, MD
Georgetown University Medical Center
Bloom Donor Services Suite M-1296
3800 Reservoir Rd NW
Washington, DC 20007
202 365-6836
Length: 1 Year(s) Total Positions: 2 (GYI: 0)
Program ID: 305-19-124567

Illinois

Chicago

University of Chicago Program
University of Chicago Hospitals
Program Director:
Beverly W. Baron, MD
University of Chicago Hospitals
Blood Bank MC0007
5841 S Maryland Ave
Chicago, IL 60637
212 734-1400
Length: 1 Year(s) Total Positions: 1 (GYI: 0)
Program ID: 305-16-214564

Louisiana

New Orleans

Louisiana State University Program
Louisiana State University School of Medicine
Blood Center for Southeast Louisiana
Program Director:
Yuan-Shiang Kao, MD
Louisiana State University Medical Center
1901 Pendergast St
New Orleans, LA 70117-1803
504 568-6001
Length: 1 Year(s) Total Positions: 1 (GYI: 0)
Program ID: 305-21-214568

Florida

Tampa

Southwest Florida Blood Bank Program
Florida Blood Services
Program Director:
George P. Magrane, MD
Florida Blood Services
PO Box 2125
Tampa, FL 33694-2125
813 970-7523
Length: 1 Year(s) Total Positions: 1 (GYI: 0)
Program ID: 305-11-214531

Indiana

Indianapolis

Indiana University Medical Center Program
Indiana University Medical Center
Central Indiana Blood Center
William N. Wishard Memorial Hospital
Program Director:
Lee J. McCarthy, MD
Transfusion Medicine Room 4430
Indiana University Medical Center
500 N University Blvd
Indianapolis, IN 46202-5285
317 274-8100
Length: 1 Year(s) Total Positions: 1 (GYI: 0)
Program ID: 305-17-21458

Maryland

Baltimore

Johns Hopkins University Program
Johns Hopkins University School of Medicine
American Red Cross Blood Services
Johns Hopkins Hospital
Program Director:
Pam M. Ness, MD
Johns Hopkins Hospital
419 N Wolfe St
Baltimore, MD 21287-6667
410 556-5033
Length: 1 Year(s) Total Positions: 1 (GYI: 0)
Program ID: 305-23-214526

Georgia

Atlanta

Emory University Program
Emory University School of Medicine
Program Director:
Kenneth W. Sel, MD PhD
Education Office Dept of Pathology
H-119 Emory University Hospital
1364 Clifton Rd NE
Atlanta, GA 30322-9110
404 727-4253
Length: 1 Year(s) Total Positions: 2 (GYI: 0)
Program ID: 305-12-214556

Augusta

Medical College of Georgia Program
Medical College of Georgia Hospital and Clinics
Program Director:
Lloyd O. Custer, MD
Medical College of Georgia
Blood Bank
Augusta, GA 30912-3620
706 721-7371
Length: 1 Year(s) Total Positions: 1 (GYI: 0)
Program ID: 305-12-214553

Iowa

Iowa City

University of Iowa Hospitals and Clinics Program
University of Iowa Hospitals and Clinics
Program Director:
Ronald G. Strasen, MD
University of Iowa Hospitals and Clinics
Dept of Pathology
200 Hawkins Dr
Iowa City, IA 52242-1098
319 335-8150
Length: 1 Year(s) Total Positions: 2 (GYI: 0)
Program ID: 305-15-21458

Kentucky

Louisville

American Red Cross Blood Services-Louisville Region Program
American Red Cross Blood Services Louisville Region
Kyser Children’s Hospital (Alliant Health System)
Norton Hospital (Alliant Health System)
University of Louisville School of Medicine
Program Director:
David M. Jenkins Jr, MD
American Red Cross Blood Services
PO Box 5165
Louisville, KY 40209-3168
502 561-3977
Length: 1 Year(s) Total Positions: 1 (GYI: 0)
Program ID: 305-50-21459

Massachusetts

Boston

Massachusetts General Hospital Program
Massachusetts General Hospital
Program Director:
Christopher P. Stowell, MD PhD
Massachusetts General Hospital
Blood Transfusion Service 512
32 Fruit St.
Boston, MA 02114
617 736-6244
Length: 1 Year(s) Total Positions: 1 (GYI: 0)
Program ID: 305-24-214564

* Updated information not provided.

300 Graduate Medical Education Directory
### Michigan

**Royal Oak**
- **William Beaumont Hospital/Program**
  - William Beaumont Hospital
  - American Red Cross Blood Serv-Southeastern Michigan Region
  - **Program Director:**
    - Richard B. Walker, MD
    - John Stevens, MD
  - William Beaumont Hospital
  - 3901 W 13 Mots Rd
  - Royal Oak, MI 48073-6769
  - 810-501-8013
- **Length:** 1 Year(s)
- **Total Positions:** 2
- **Program ID:** 030-28-25-012

### New Mexico

**Albuquerque**
- **University of New Mexico Program**
  - University of New Mexico School of Medicine
  - University Hospital
  - **Program Director:**
    - Kenneth D. Friedman, MD
    - University of New Mexico School of Medicine
    - Dept of Pathology, Rm 333 BBF
    - 916 Camino De Salud NE
    - Albuquerque, NM 87131-5001
    - 505-277-5872
- **Length:** 1 Year(s)
- **Total Positions:** 1 (GYT: 0)
- **Program ID:** 030-34-21-050

### North Carolina

**Chapel Hill**
- **University of North Carolina Hospitals Program**
  - University of North Carolina Hospitals
  - **Program Director:**
    - Myra L. Collins, MD
    - Dept of Pathology Div of Laboratory Medicine Transfusion Med Serv
    - U of North Carolina School of Med
    - Chapel Hill, NC 27514
    - 919-966-2454
- **Length:** 1 Year(s)
- **Total Positions:** 1 (GYT: 0)
- **Program ID:** 030-38-21-020

### Minnesota

**Minneapolis**
- **University of Minnesota Program**
  - University of Minnesota Medical School
  - Memorial Blood Centers of Minnesota
  - North Central Blood Services Region
  - University of Minnesota Hospital and Clinic Veterans Affairs Medical Center (Minneapolis)
  - **Program Director:**
    - Jeffrey McCullough, MD
    - University of Minnesota Hospital and Clinic
    - Box 509, 3145 Mayo Blvd
    - 420 Delaware St SE
    - Minneapolis, MN 55455
    - 612-232-3272
- **Length:** 1 Year(s)
- **Total Positions:** 3
- **Program ID:** 030-26-21-018

### New York

**New York**
- **New York Blood Center Program**
  - New York Blood Center
  - Memorial Sloan-Kettering Cancer Center
  - Mount Sinai Medical Center
  - New York Hospital
  - New York University Medical Center
  - Presbyterian Hospital in the City of New York
  - St Luke's-Roosevelt Hospital Center
  - St Vincent's Hospital and Medical Center of New York
  - Westchester County Medical Center
  - **Program Director:**
    - John W. Adamson, MD
    - New York Blood Center
    - 310 E 57th St
    - New York, NY 10021
    - 212-570-3142
- **Length:** 1 Year(s)
- **Total Positions:** 5 (GYT: 0)
- **Program ID:** 030-35-21-019

**Stony Brook**
- **SUNY at Stony Brook Program**
  - University Hospital-SUNY at Stony Brook
  - **Program Director:**
    - Dennis K. Galanakis, MD
    - SUNY at Stony Brook HRS Sci Ctr
    - Basic Sciences Tower B
    - Room 140
    - Stony Brook, NY 11794-6691
    - 631-444-2626
- **Length:** 1 Year(s)
- **Total Positions:** 1 (GYT: 0)
- **Program ID:** 030-36-21-061

### Ohio

**Cincinnati**
- **University of Cincinnati Hospital Group Program**
  - University Hospitals of Cincinnati
  - Family Medicine
  - **Program Director:**
    - Thomas F. Zuck, MD
    - University Hospitals of Cincinnati
    - 333 Highland Ave
    - P3 Box 070065
    - Cincinnati, OH 45267-0665
    - 513-588-1200
- **Length:** 1 Year(s)
- **Total Positions:** 4 (GYT: 0)
- **Program ID:** 030-38-21-027

### Rochester

**Mayo Graduate School of Medicine Program**
- Mayo Graduate School of Medicine-Mayo Foundation
- Mayo Clinic (Rochester)
- Rochester Methodist Hospital
- St Mary's Hospital of Rochester
- **Program Director:**
  - Kenneth B. Williamson, MD
  - Mayo Graduate School of Medicine Application Processing Ctr
  - Mayo Graduate School of Medicine
  - 200 First St SW
  - Rochester, MN 55905
  - 507-284-5326
- **Length:** 1 Year(s)
- **Total Positions:** 1 (GYT: 0)
- **Program ID:** 030-26-21-005

### Missouri

**St Louis**
- **Barnes Hospital Group Program**
  - Barnes Hospital
  - **Program Director:**
    - Douglas Lublin, MD, PhD
    - Att: Kevin Bjerke, Manager
  - Grad Med Ed/ WashUniv Med Ctr
  - One Barnes Hospital Plaza
  - St Louis, MO 63110
  - 314-282-1031
- **Length:** 1 Year(s)
- **Total Positions:** 4
- **Program ID:** 030-28-22-004

*Updated information not provided.*
Columbus
Ohio State University Program
Ohio State University Medical Center
American Red Cross Central Ohio Region
Children’s Hospital
Program Director:
Larry C Lasky, MD
Dept of Pathology/Ohio State University
312 Doan Hall
410 W Tenth Ave
Columbus, OH 43210
614 293-3260
Length: 1 Year(s)  Total Positions: 1  (GYI: 1)
Program ID: 305-38-81-981

Pennsylvania
Philadelphia
Thomas Jefferson University Program
Thomas Jefferson University Hospital
American Red Cross Blood Services-Penn-Jersey Region
Program Director:
Samir K Buxas, MD
Thomas Jefferson University Hospital
1015 Walnut St Curtis Bldg
Philadelphia, PA 19107
215 955-6455
Length: 1 Year(s)  Total Positions: 1  (GYI: 0)
Program ID: 305-41-21-807

University of Pennsylvania Program
Hospital of the University of Pennsylvania
Program Director:
Leslie E Silberstein, MD
Blood Banking Section/Founders Hosp of the Univ of Pennsylvania
3400 Spruce St
Philadelphia, PA 19104-4283
215 662-3427
Length: 1 Year(s)  Total Positions: 2
Program ID: 305-41-21-007

Tennessee
Nashville
Vanderbilt University Program
Vanderbilt University Medical Center
American Red Cross Blood Services-Tennessee Valley Region
Program Director:
Anne T Thomas, MD
Vanderbilt University Medical Center
4405-TCV
1301 2nd Ave S
Nashville, TN 37232-2310
615 343-8144
Length: 1 Year(s)  (GYI: 0)
Program ID: 305-47-81-008

Texas
Houston
Baylor College of Medicine Program*
Baylor College of Medicine
Gulf Coast Regional Blood Center
Harris County Hospital District-Ben Taub General Hospital
Methodist Hospital
Program Director:
David H Yawn, MD
Dept of Pathology
Baylor College of Medicine
One Baylor Plaza
Houston, TX 77030
713 790-2434
Length: 1 Year(s)
Program ID: 305-48-21-462

University of Texas MD Anderson Cancer Center Program*
University of Texas M D Anderson Cancer Center
Program Director:
Harold E Fischer, MD PhD
1515 Holcombe Blvd
Houston, TX 77030
713 792-2944
Length: 1 Year(s)  Total Positions: 2
Program ID: 305-48-21-244

San Antonio
University of Texas Health Science Center at San Antonio Program
University of Texas Medical School at San Antonio
University Hospital-South Texas Medical Center
Program Director:
Chantal R Harrison, MD
University of Texas Health Science Center
Dept of Pathology-Bloodbanking/Trans
7708 Floyd Curl Dr
San Antonio, TX 78284-7750
210 567-4090
Length: 1 Year(s)  Total Positions: 1  (GYI: 0)
Program ID: 305-48-21-645

Wisconsin
Madison
University of Wisconsin Program
University of Wisconsin Hospital and Clinics
American Red Cross Blood Services Badger-Hawkeye Region
Program Director:
James S Markle, MD
Gary A Becker, MD
University of Wisconsin Hospital and Clinics
600 Highland Ave
AA/264 Clinical Science Center
Madison, WI 53792-2472
608 263-6843
Length: 1 Year(s)  Total Positions: 1  (GYI: 0)
Program ID: 305-56-21-648

Milwaukee
Medical College of Wisconsin Program
Medical College of Wisconsin Affiliated Hospitals Inc
Blood Center of Southeastern Wisconsin
John L Doyne Hospital
Program Director:
Jerome L Gottschall, MD
The Blood Center of Southeastern Wisconsin
1701 W Wisconsin Ave
Milwaukee, WI 53233
414 937-6231
Length: 1 Year(s)  Total Positions: 2
Program ID: 305-56-21-023

* Updated information not provided.
Cardiovascular Disease (Internal Medicine)

Alabama

Birmingham
University of Alabama Medical Center Program
University of Alabama Hospital - 
Program Director: Louis J Dell'Italia, MD
Div of Cardiovascular Disease
321 E 15th 
Birmingham, AL 35294
205 934-0820
Length: 3 Year(s) Total Positions: 21
Program ID: 141-01-21-141

Mobile
University of South Alabama Program
University of South Alabama Medical Center - 
Program Director: Vasik Makej, MD
Univ of South Alabama Div of Cardiology
2601 Pillingin St
106 PT Ste D
Mobile, AL 36617
205 411-7923
Length: 3 Year(s) Total Positions: 6
Program ID: 141-01-11-040

Arizona

Phoenix
Good Samaritan Regional Medical Center Program
Good Samaritan Regional Medical Center - 
Carl T Hayden Veterans Affairs Medical Center (Phoenix) - 
Program Director: Frank P Cardello, MD
Kenneth B Deuser, MD
Carl T Hayden Veterans Affairs Medical Center
Seventh St & Indian School Rd 111
Phoenix, AZ 85012
602 277-6561
Length: 3 Year(s) Total Positions: 8
Program ID: 141-03-21-019

Tucson
University of Arizona Program
University of Arizona College of Medicine - 
University Medical Center - 
Veterans Affairs Medical Center (Tucson) - 
Program Director: Gordon A Dwyer, MD
William R Rooske, MD
University of Arizona Health Sciences Center
1501 N Campbell
Tucson, AZ 85724
602 283-6221
Length: 2 Year(s) Total Positions: 5
Program ID: 141-03-21-131

Arkansas

Little Rock
University of Arkansas for Medical Sciences Program* - 
University of Arkansas College of Medicine - 
John L McClellan Memorial Veterans Hospital - 
University Hospital of Arkansas - 
Program Director: Jon P Lindeman, MD
University of Arkansas
4301 W Markham
Little Rock, AR 72205-7199
501 686-5980
Length: 3 Year(s) Total Positions: 8
Program ID: 141-04-31-182

California

Fresno
University of California (San Francisco)/Fresno Program - 
UCSF Fresno Medical Education Program - 
Valley Medical Center of Fresno - 
Veterans Affairs Medical Center (Fresno) - 
Program Director: Lauren H Grayson, MD
Valley Medical Center of Fresno
445 S Cedar Ave
Fresno, CA 93702
209 545-4386
Length: 3 Year(s) Total Positions: 6
Program ID: 141-05-31-193

La Jolla
Scripps Clinic and Research Foundation Program - 
Scripps Clinic and Research Foundation - 
Program Director: Allen D Johnson, MD
Dept of Graduate Med Educ/40C
Scripps Clinic & Research Phd
10808 N Torrey Pines Rd
La Jolla, CA 92037-1000
858 554-8305
Length: 3 Year(s) Total Positions: 3
Program ID: 141-05-21-086

Loma Linda
Loma Linda University Program - 
Loma Linda University Medical Center - 
Jerry L Pettis Memorial Veterans Hospital - 
Program Director: Pravin M Shah, MD
Loma Linda University Medical Center - 
Cardiology Section - 
PO Box 2000
Loma Linda, CA 92354
909 824-4653
Length: 2 Year(s) Total Positions: 7
Program ID: 141-05-21-153

Los Angeles

Cedars-Sinai Medical Center Program - 
Cedars-Sinai Medical Center - 
Program Director: Prediman K Shah, MD
Cedars-Sinai Med Ctr
8700 Beverly Blvd
Los Angeles, CA 90048-1865
310 855-6876
Length: 3 Year(s) Total Positions: 13
Program ID: 141-06-11-194

Charles R Drew University Program* - 
Charles R, Drew University Of Medicine And Science - 
LAC-King/Drew Medical Center - 
St Vincent Medical Center - 
Program Director: P Anthony Chandraaruna, MD
LAC County-Martin Luther King Jr-Drew Medical Center
12021 S Wilton Ave
Los Angeles, CA 90059
213 603-6584
Length: 2 Year(s) Total Positions: 4
Program ID: 141-06-11-154

UCLA Medical Center Program - 
UCLA School of Medicine - 
UCLA Medical Center - 
Program Director: Linda L Deuser, MD PhD
UCLA Div of Cardiology
5050 Grifith Pl
Los Angeles, CA 90024-1679
310 657-2277
Length: 3 Year(s) Total Positions: 10
Program ID: 141-06-11-155

University of Southern California Program* - 
Los Angeles County-USC Medical Center Program - 
Program Director: David P Phan, MD
Univ of Southern California Medical Center
1555 San Pablo St, #117
Los Angeles, CA 90036
213 345-5890
Length: 3 Year(s) Total Positions: 4
Program ID: 141-06-21-001

Veterans Affairs Medical Center (West Los Angeles) Program - 
Veterans Affairs Medical Center (West Los Angeles) - 
Program Director: Presley V Modly, MD
West Los Angeles VA Medical Center - 
Div of Cardiology (4111E)
11301 Wilshire Blvd
Los Angeles, CA 90073
310 584-3326
Length: 3 Year(s) Total Positions: 6
Program ID: 141-06-31-073

Los Angeles (Sepulveda)
UCLA San Fernando Valley Program - 
Veterans Affairs Medical Center (Sepulveda) - 
Kerns-Teramian Regional Medical Center - 
LAC-Olive View Medical Center - 
Program Director: Ming K Heng, MD
Veterans Affairs Medical Center
16111 Plummer St
Sepulveda, CA 91343
818 886-3906
Length: 3 Year(s) Total Positions: 6
Program ID: 141-06-31-184

* Updated information not provided.

Graduate Medical Education Directory
Accredited Programs in Cardiovascular Disease (Internal Medicine)

Orange
University of California (Irvine) Program
University of California (Irvine) Medical Center
Long Beach Memorial Medical Center
Veteran Affairs Medical Center (Long Beach)
Program Director:
Richard H Heftant, MD
University of California (Irvine) UCI Medical Center
101 The City Dr Ste RT 81/8L 53
Orange, CA 92668-3269
714 456-6545
Length: 3 Year(s) Total Positions: 16
Program ID: 1414-06-21-160

Pasadena
Southern California Kaiser Permanente Medical Care (Los Angeles) Program
Southern California Kaiser Permanente Medical Group
Kaiser Foundation Hospital (Los Angeles)
Program Director:
Michael Jorgensen, MD
Dept of Cardiology
4800 Sunset Blvd 6th Fl
Los Angeles, CA 90027
213 667-3867
Length: 3 Year(s) Total Positions: 11
Program ID: 1414-05-12-041

Sacramento
University of California (Davis) Program
University of California (Davis) Medical Center
Program Director:
Lawrence Lusllet, MD
University of California (Davis) Medical Center
Div of Cardiovascular Medicine
4301 X St Ste 3040
Sacramento, CA 95817
916 734-3762
Length: 3 Year(s) Total Positions: 12
Program ID: 1414-05-21-111

San Diego
Mercy Hospital and Medical Center Program
Mercy Hospital and Medical Center
Program Director:
Joseph B Stin, MD
Paul S Phillips, MD
Dept of Medical Education
Mercy Hospital and Medical Center
4077 Fifth Ave
San Diego, CA 92103-3189
619 260-7220
Length: 3 Year(s) Total Positions: 3
Program ID: 1414-06-11-208

Naval Medical Center (San Diego) Program
Naval Medical Center (San Diego)
Program Director:
C R Kerr Boyle, MD
Naval Medical Center
Cardiology Div
San Diego, CA 92134-6000
619 522-7408
Length: 2 Year(s) Total Positions: 12
Program ID: 1414-05-12-181

University of California (San Diego) Program
University of California (San Diego) Medical Center
Veteran Affairs Medical Center (San Diego)
Program Director:
Anthony DeMaria, MD
UCSD Medical Center Dept of Medicine
Div of Cardiology
200 W Arbor St
San Diego, CA 92103-8411
619 695-3666
Length: 3 Year(s) Total Positions: 12
Program ID: 1414-05-21-209

San Francisco
California Pacific Medical Center Program
California Pacific Medical Center
California Pacific Medical Center (Pacific Campus)
Program Director:
Keith E Cohn, MD
Arthur Selzer, MD
California Pacific Medical Center
Div of Cardiology
PO Box 7999
San Francisco, CA 94130-7999
415 820-2336
Length: 3 Year(s) Total Positions: 6
Program ID: 1414-05-12-183

St Mary’s Hospital and Medical Center Program
St Mary’s Hospital and Medical Center
Program Director:
Dean T Maben, MD
St Mary's Hospital and Medical Center
Dept of Cardiology/WHI
450 Stanyan St
San Francisco, CA 94117-1079
415 750-5507
Length: 3 Year(s) Total Positions: 3
Program ID: 1414-05-22-233

University of California (San Francisco) Program
University of California (San Francisco) School of Medicine
San Francisco General Hospital Medical Center
University of California (San Francisco) Medical Center
Program Director:
William W Parmley, MD
Dept of Medicine
1196 Moffit Hosp
San Francisco, CA 94143
415 476-1206
Length: 2 Year(s)
Program ID: 1414-05-21-184

University of California (San Francisco)/Mount Zion Program
University of California (San Francisco) School of Medicine
Mount Zion Medical Center of the University of California
Program Director:
Edward M Cohen, MD
James Malhot, MD
UCSF/Mount Zion
1600 Divisadero
San Francisco, CA 94115
415 886-7021
Length: 3 Year(s) Total Positions: 3
Program ID: 1414-05-31-182

Stanford
Stanford University Program*
Stanford University Hospital
Veteran Affairs Medical Center (Palo Alto)
Program Director:
Edwin L Alderman, MD
Cardiovascular Medicine Div CVRC
Stanford University Medical Center
Stanford, CA 94305-5246
415 723-9686
Length: 2 Year(s) Total Positions: 22
Program ID: 1414-05-21-025

Torrance
Los Angeles County-Harbor-UCLA Medical Center Program
Los Angeles County-Harbor-UCLA Medical Center
Program Director:
Bruce H Brundage, MD
Harbor-UCLA Medical Center
Div of Cardiology
1000 W Carson St RB2
Torrance, CA 90509
310 222-2515
Length: 3 Year(s) Total Positions: 11
Program ID: 1414-06-11-210

Colorado
Aurora
Fitzsimons Army Medical Center Program
Fitzsimons Army Medical Center
Program Director:
Richard C Davis Jr, MD PhD
Fitzsimons Army Medical Center
Cardiovascular Disease Section
Aurora, CO 80045-5001
303 361-8007
Length: 3 Year(s) Total Positions: 2
Program ID: 1414-07-12-088

Denver
University of Colorado Program*
University of Colorado Health Sciences Center
Denver Health and Hospitals
Veteran Affairs Medical Center (Denver)
Program Director:
Lawrence Howitz, MD
Dept of Medicine
Univ of Colorado Health Sci-Ctr
Box B-178 4200 E Ninth Ave
Denver, CO 80220
303 270-7161
Length: 3 Year(s)
Program ID: 1414-07-31-074

Connecticut
Bridgeport
Yale University (Bridgeport) Program
Bridgeport Hospital
Program Director:
Joseph Babb, MD
Bridgeport Hospital Dept of Cardiology
297 Grant St
Bridgeport, CT 06902-2570
203 364-3044
Length: 3 Year(s) Total Positions: 4
Program ID: 1414-08-11-211

* Updated information not provided.
<table>
<thead>
<tr>
<th>Location</th>
<th>Program Name</th>
<th>University</th>
<th>Program Director(s)</th>
<th>Program Details</th>
<th>Length</th>
<th>Program ID</th>
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<tbody>
<tr>
<td>Farmington</td>
<td>University of Connecticut Program 1</td>
<td>University of Connecticut School of Medicine</td>
<td>Mount Sinai Hospital St Francis Hospital and Medical Center</td>
<td>Univ of Connecticut Health Center/John Dempsey Hospital</td>
<td>Program Director: Peter Schulman, MD University of Connecticut Health Center Div of Cardiology L3104 263 Farmington Ave Farmington, CT 06030-3906 203 679-3865</td>
<td>Length: 3 Year(s)</td>
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<tr>
<td>University of Connecticut Program 2</td>
<td>University of Connecticut School of Medicine</td>
<td>Univ of Connecticut Health Center/John Dempsey Hospital</td>
<td>Program Director: David D Waters, MD Hartford Hospital 96 Seymour St Hartford, CT 06102-5037 203 446-2800</td>
<td>Length: 3 Year(s)</td>
<td>Total Positions: 9</td>
<td>Program ID: 141-06-31-293</td>
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<tr>
<td>New Haven</td>
<td>Hospital of St Raphael Program</td>
<td>Hospital of St Raphael</td>
<td>Program Director: Robert F Morrison, MD Hospital of St Raphael</td>
<td>Dept of Medicine 1459 Chapel St</td>
<td>New Haven, CT 06511 203 738-9325</td>
<td>Length: 3 Year(s)</td>
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<tr>
<td>Yale-New Haven Medical Center Program</td>
<td>Yale-New Haven Hospital</td>
<td>Veterans Affairs Medical Center (West Haven)</td>
<td>Program Director: Fortunato A Lee, MD Yale University School of Medicine</td>
<td>Sect of Cardiovascular Medicine PO Box 208013 333 Cedar St 3FMP</td>
<td>New Haven, CT 06520-9017 203 785-7781</td>
<td>Length: 2 Year(s)</td>
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<tr>
<td>Norwalk</td>
<td>Yale University/Norwalk Hospital Program</td>
<td>Norwalk Hospital</td>
<td>Program Director: Martin Joel Krauthamer, MD Norwalk Hospital Maple St</td>
<td>Norwalk, CT 06856 203 852-3410</td>
<td>Length: 3 Year(s)</td>
<td>Total Positions: 3</td>
</tr>
<tr>
<td>Georgetown University Program</td>
<td>Georgetown University Hospital</td>
<td>Veteran Affairs Medical Center (Washington DC)</td>
<td>Program Director: Bernard L Gremm, MD Georgetown University Hospital</td>
<td>Dept of Medicine 3800 Reservoir Rd NW</td>
<td>Washington, DC 20007 202 687-3227</td>
<td>Length: 3 Year(s)</td>
</tr>
<tr>
<td>Howard University Program</td>
<td>Howard University Hospital</td>
<td>District of Columbia General Hospital</td>
<td>Program Director: Charles L Curry, MD Howard University Hospital 2041 Georgia Ave NW Ste 6C-63</td>
<td>Washington, DC 20060 202 865-6791</td>
<td>Length: 3 Year(s)</td>
<td>Total Positions: 10</td>
</tr>
<tr>
<td>Walter Reed Army Medical Center Program*</td>
<td>Walter Reed Army Medical Center</td>
<td>Program Director: Clarence E Pearson, MD Chief Cardiology Service Walter Reed Army Medical Center 6125 16th St NW</td>
<td>Washington, DC 20017-5001 202 579-3896</td>
<td>Length: 3 Year(s)</td>
<td>Total Positions: 11</td>
<td>Program ID: 141-10-11-150</td>
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<tr>
<td>Washington Hospital Center Program</td>
<td>Washington Hospital Center</td>
<td>Program Director: Joseph Lindsay Jr, MD Washington Hospital Center 110 Irving St NW</td>
<td>Washington, DC 20010-2075 202 677-7597</td>
<td>Length: 2 Year(s)</td>
<td>Total Positions: 9</td>
<td>Program ID: 141-10-11-160</td>
</tr>
<tr>
<td>Florida</td>
<td>Gainesville</td>
<td>University of Florida Program</td>
<td>University of Florida College of Medicine</td>
<td>Shands Hospital at the University of Florida Veterans Affairs Medical Center (Gainesville)</td>
<td>Program Director: C Richard Conti, MD Univ of Florida Dept of Medicine Box 100277 J Hillis Miller Health Center Gainesville, FL 32610 904 322-4193</td>
<td>Length: 3 Year(s)</td>
</tr>
<tr>
<td>University of Florida Health Science Center/ Jacksonville Program</td>
<td>University Medical Center (UFHSC/J)</td>
<td>Program Director Alan B Miller, MD</td>
<td>Univ of Florida Hlth Sci Ctr/Jacksonville 655 W Eighth St Jacksonville, FL 32209 904 648-3066</td>
<td>Length: 3 Year(s)</td>
<td>Total Positions: 9</td>
<td>Program ID: 141-11-21-027</td>
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<tr>
<td>Miami</td>
<td>University of Miami-Jackson Memorial Medical Center Program</td>
<td>University of Miami-Jackson Memorial Medical Center</td>
<td>Veterans Affairs Medical Center (Miami)</td>
<td>Program Director: Robert J Myers, MD University of Miami School of Medicine Dept of Medicine Div of Cardiology (D-39) PO Box 01860 Miami, FL 33101-6860 305 638-6534</td>
<td>Length: 3 Year(s)</td>
<td>Total Positions: 17</td>
</tr>
<tr>
<td>Miami Beach</td>
<td>Mount Sinai Medical Center of Greater Miami Program</td>
<td>Mount Sinai Medical Center of Greater Miami</td>
<td>Program Director: Gervasio A Lamas, MD Mount Sinai Medical Center of Greater Miami Div of Cardiology 4300 Alton Rd</td>
<td>Miami Beach, FL 33140 305 674-2150</td>
<td>Length: 3 Year(s)</td>
<td>Total Positions: 19</td>
</tr>
<tr>
<td>Tampa</td>
<td>University of South Florida Program</td>
<td>University of South Florida College of Medicine</td>
<td>James A Haley Veterans Hospital Tampa General Healthcare</td>
<td>Program Director: Douglas D Schocken, MD MDC Box 110 13001 Bruce B Downs Blvd Tampa, FL 33612-4799 813 974-2800</td>
<td>Length: 3 Year(s)</td>
<td>Total Positions: 9</td>
</tr>
</tbody>
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* Updated information not provided.
Accredited Programs in Cardiovascular Disease (Internal Medicine)

Georgia

Atlanta

Emory University Program
Emory University School of Medicine
Crawford Long Hospital of Emory University
Emory University Hospital
Grady Memorial Hospital
Veterans Affairs Medical Center (Atlanta)
Program Director:
Wayne Alexander, MD
Emory University School of Medicine Div of Cardiology
PO Drawer LL
1630 Pierce Dr
Atlanta, GA 30322
404 727-4724
Length: 2 Year(s)  Total Positions: 30
Program ID: 141-12-21-161

Augusta

Medical College of Georgia Program
Medical College of Georgia Hospital and Clinics
Veterans Affairs Medical Center (Augusta)
Program Director:
David L. Batlin, MD
Medical College of Georgia
Dept of Medicine Cardiology Sect
RAA 526
Augusta, GA 30901
706 721-3436
Length: 2 Year(s)  Total Positions: 9
Program ID: 141-12-21-004

Illinois

Chicago

Cook County Hospital Program*
Cook County Hospital
Program Director:
James Mathew, MD
Cook County Hospital Div of Adult Cardiology
1825 W Harrison
Chicago, IL 60612
312 353-7862
Length: 3 Year(s)  Total Positions: 9
Program ID: 141-16-13-047

Illinois Masonic Medical Center Program
Illinois Masonic Medical Center
Program Director:
Peter J Stecy, MD
Section of Cardiology
Illinois Masonic Medical Center
3333 S. Wabash Ave
Chicago, IL 60616-5100
312 266-7044
Length: 3 Year(s)  Total Positions: 9
Program ID: 141-16-11-229

McGaw Medical Center of Northwestern University Program
Northwestern University Medical School
Northwestern Memorial Hospital
Veterans Affairs Lakeside Medical Center (Chicago)
Program Director:
David J. Mahfman, MD
Northwestern Memorial Hospital
Wesley Pavilion Rm 230
250 E Superior St
Chicago, IL 60611
312 926-4063
Length: 3 Year(s)  Total Positions: 18
Program ID: 141-16-21-090

Rush-Presbyterian-St Luke's Medical Center Program*
Rush-Presbyterian-St Luke's Medical Center
MacNeal Memorial Hospital
Program Director:
Joseph P Parrillo, MD
Rush-Presbyterian-St Luke's Medical Center
1633 W Congress Pkwy
Chicago, IL 60612-2864
312 945-1989
Length: 2 Year(s)  Total Positions: 30
Program ID: 141-16-11-162

University of Chicago Program
University of Chicago Hospitals
Program Director:
Craig T Janeway, MD FACP
University of Chicago Hospitals
5841 S Maryland Ave MC C680
Chicago, IL 60637-1470
312 722-1767
Length: 2 Year(s)  Total Positions: 17
Program ID: 141-16-14-077

University of Illinois College of Medicine at Chicago Program*
University of Illinois College of Medicine at Chicago
University of Illinois Hospital and Clinics
Veterans Affairs Chicago Medical Center (Chicago)
Program Director:
George E Kondos, MD
University of Illinois at Chicago
Section of Cardiology M/C 757
842 S Wood St 6th Fl
Chicago, IL 60612
312 996-9096
Length: 3 Year(s)  Total Positions: 13
Program ID: 141-16-21-163

University of Illinois College of Medicine at Chicago/Michael Reese Hospital Program*
University of Illinois College of Medicine at Chicago
Michael Reese Hospital and Medical Center
Program Director:
Barb Silver, MD
Univ of Illinois College of Medicine Cardiology
2200 S Ellis Ave
Chicago, IL 60616-3300
312 731-3100
Length: 3 Year(s)  Total Positions: 9
Program ID: 141-16-21-028

Evaston

St Francis Hospital of Evanston Program
St Francis Hospital of Evanston
Program Director:
Visvanepathap, MD
St Francis Hospital of Evanston
355 Ridge Ave
Evanston, IL 60202
708 435-0000
Length: 3 Year(s)  Total Positions: 9
Program ID: 141-16-11-228

Maywood

Loyola University Program
Foster G Morris Hospital-Loyola University of Chicago
Edward J Hines Jr Veterans Affairs Hospital
Program Director:
Ronald R Schreiber, MD
Henry S Loeb, MD
Dept of Medicine Bldg 54 Rm 125
2150 S First Ave
Maywood, IL 60153
708 216-4545
Length: 3 Year(s)  Total Positions: 27
Program ID: 141-16-21-006

North Chicago

Finch University of Health Sciences/Chicago Medical School/ Program
Finch University of Health Sciences/Chicago Medical School
Mount Sinai Hospital Medical Center of Chicago
Veterans Affairs Medical Center (North Chicago)
Program Director:
John G Somberg, MD
Univ of IH S/Chicago Med Schl
Dep of Medicine
3333 Green Bay Rd
North Chicago, IL 60064-3065
708 378-3291
Length: 2 Year(s)  Total Positions: 10
Program ID: 141-16-21-062

Oak Lawn

EHS Christ Hospital and Medical Center Program
EHS Christ Hospital and Medical Center
Program Director:
Gerald Glick, MD
Christ Hosp/Rush University Cardiology Fellowship Program
4444 W 156th St Ste 428B
Oak Lawn, IL 60453
708 346-4386
Length: 3 Year(s)  Total Positions: 9
Program ID: 141-16-21-091

Park Ridge

University of Chicago (Park Ridge) Program
Lutheran General Hospital
Program Director:
Jeffrey R Lasker, MD
Lutheran General Hospital
1775 W Dempster St
Park Ridge, IL 60068-1174
708 435-7979
Length: 3 Year(s)  Total Positions: 78
Program ID: 141-16-21-286

* Updated Information not provided.
Indiana

Indianapolis
Indiana University Medical Center Program
Indiana University Medical Center
Program Director:
Eric S Williams, MD
Charles Fisch, MD
Indiana Univ Med Ctr Kransner Inst of Cardiology
111 W Tench St
Indianapolis, IN 46202-6800
317 630-7716
Length: 2 Year(s) Total Positions: 18
Program ID: 141-17-21-185

Methodist Hospital of Indiana Program
Methodist Hospital of Indiana
Program Director:
Richard W Campbell, MD
Methodist Hospital of Indiana Dept of Internal Medicine
1-65/21st St
PO Box 1367
Indianapolis, IN 46206-1367
317 292-6566
Length: 3 Year(s) Total Positions: 3
Program ID: 141-17-11-135

Kentucky

Lexington
University of Kentucky Medical Center Program
University Hospital-Albert B Chandler Medical Center
Veterans Affairs Medical Center (Lexington)
Program Director:
Michael D Smith, MD
University Hospital-Albert B Chandler Medical Center
Dept of Cardiology
800 Rose St
Lexington, KY 40536-0084
606 323-5478
Length: 3 Year(s) Total Positions: 12
Program ID: 141-20-21-213

Louisville
University of Louisville Program
University of Louisville School of Medicine
University of Louisville Hospital
Veterans Affairs Medical Center (Louisville)
Program Director:
Stephen O Wagner, MD
Univ of Louisville Sch of Med
550 S Jackson
Louisville, KY 40292
502 852-7868
Length: 3 Year(s) Total Positions: 15
Program ID: 141-20-31-215

Louisiana

New Orleans
Alton Ochsner Medical Foundation Program
Alton Ochsner Medical Foundation
Program Director:
Joseph P Murgo, MD
Alton Ochsner Medical Foundation
Dept of Graduate Med Education
1516 Jefferson Hwy
New Orleans, LA 70121
504 842-4005
Length: 2 Year(s) Total Positions: 25
Program ID: 141-21-22-123

Louisiana State University Program
Louisiana State University School of Medicine
Medical Center of Louisiana at New Orleans-LSU Division
Medical Center of Louisiana University Hospital Campus
Program Director:
Gary E Sander, MD PhD
Louisiana State University Medical School
Dept of Med Sect of Cardiology
1542 Tulane Ave Rem 417
New Orleans, LA 70112-2922
504 566-5645
Length: 3 Year(s) Total Positions: 12
Program ID: 141-21-21-246

Maryland

Baltimore
Johns Hopkins University Program
Johns Hopkins University School of Medicine
Johns Hopkins Hospital
Program Director:
Kenneth L Baughman, MD
Johns Hopkins Hospital Div of Cardiology
600 N Wolfe St Harald 600
Baltimore, MD 21287
410 955-5997
Length: 3 Year(s) Total Positions: 33
Program ID: 141-28-11-093

University of Maryland Program
University of Maryland School of Medicine
Veterans Affairs Medical Center (Baltimore)
Program Director:
Gary D Plotnick, MD
University of Maryland Medical Center
Div of Cardiology
22 S Greene St
Baltimore, MD 21201-1585
410 328-4394
Length: 2 Year(s) Total Positions: 15
Program ID: 141-23-21-049

,* Updated Information not provided.
Accredited Programs in Cardiovascular Disease (Internal Medicine)

Bethesda
National Naval Medical Center (Bethesda) Program
National Naval Medical Center (Bethesda)
Program Director:
David W Ferguson, MD
National Naval Medical Center Cardiology Div
8801 Wisconsin Ave
Bethesda, MD 20898-5000
202-295-4500
Length: 2 Year(s)  Total Positions: 6
Program ID: 141-23-11-186

Massachusetts
Boston
Beth Israel Hospital Program
Beth Israel Hospital
Program Director:
James P Morgan, MD PhD
Beth Israel Hospital Div of Cardiology
330 Brookline Ave
Boston, MA 02215-5481
617-735-2191
Length: 3 Year(s)  Total Positions: 17
Program ID: 141-24-21-006

Boston University Program*
Boston University School of Medicine
Boston City Hospital
Boston University Medical Center University Hospital
Program Director:
Thomas W Smith, MD
Boston University Medical Center
Section of Cardiology
88 E Newton St
Boston, MA 02118
617-638-8710
Length: 2 Year(a)  Total Positions: 15
Program ID: 141-24-21-187

Brigham and Women's Hospital Program 1
Brigham and Women's Hospital
Program Director:
Thomas W Smith, MD
Brigham and Women's Hospital Dept of Medicine
76 Francis St
Boston, MA 02115
617-732-7144
Length: 2 Year(a)  Total Positions: 27
Program ID: 141-24-21-097

Brigham and Women's Hospital Program 2
Brigham and Women's Hospital
Program Director:
Thomas B Grabois, MD
Lown Cardiovascular Center
21 Longwood Ave
Boston, MA 02115
617-732-1318
Length: 2 Year(a)  Total Positions: 4
Program ID: 141-24-21-008

Brigham and Women's Hospital Program 3*
Brigham and Women's Hospital
Brockton-West Roxbury Veterans Affairs Medical Center
Program Director:
Director Residency Training, Veterans Administration Medical Center Dept of Medicine
1400 VFW Pkwy
Brockton, MA 02132
617-323-7700
Length: 2 Year(s)  Total Positions: 6
Program ID: 141-24-21-009

Massachusetts General Hospital Program
Massachusetts General Hospital
Program Director:
Arthur E Wegman, MD
Tim Eagle, MD
Massachusetts General Hospital Cardiac Unit
32 Fruit St
Boston, MA 02114
617-736-2888
Length: 3 Year(s)  Total Positions: 52
Program ID: 141-24-11-079

New England Deaconess Hospital Program 1
New England Deaconess Hospital
Program Director:
Michael T Johnstone, MD
New England Deaconess Hospital Cardiology Div-Deaconess 3
185 Pilgrim Rd
Boston, MA 02215
617-732-9951
Length: 3 Year(s)  Total Positions: 12
Program ID: 141-24-21-221

New England Medical Center Hospitals Program*
New England Medical Center Hospitals
Program Director:
Dee Salone, MD
New England Medical Center
171 Harrison Ave
Boston, MA 02111
617-856-0604
Length: 2 Year(a)  Total Positions: 10
Program ID: 141-24-21-010

St Elizabeth's Medical Center of Boston Program
St Elizabeth's Medical Center of Boston
Program Director:
Bernard D Knospe, MD
St Elizabeth's Medical Center
736 Cambridge St
Boston, MA 02135
617-788-2000
Length: 3 Year(s)  Total Positions: 11
Program ID: 141-24-21-063

Burlington
New England Deaconess Hospital Program 2
Lahey Clinic
Program Director:
Sherif B Labib, MD
Michael Lauer, MD
Lahey Clinic Foundation
41 Mall Rd
Burlington, MA 01805
617-273-8400
Length: 3 Year(s)  Total Positions: 6
Program ID: 141-24-21-222

Springfield
Baystate Medical Center Program
Baystate Medical Center
Program Director:
James B Kirchhoff, MD
Baystate Medical Center
Div of Cardiology
709 Cherington St
Springfield, MA 01199
413-794-4490
Length: 2 Year(s)  Total Positions: 9
Program ID: 141-24-11-095

Worcester
St Vincent Hospital Program
St Vincent Hospital
University of Massachusetts Medical Center
Program Director:
David H Spodick, MD
St Vincent Hospital
25 Wentworth St
Worcester, MA 01604
508-368-6162
Length: 3 Year(s)  Total Positions: 6
Program ID: 141-24-21-239

University of Massachusetts Medical Center Program*
University of Massachusetts Medical Center
Program Director:
Gerard Aurigemma, MD
University of Massachusetts Medical Center
55 Lake Ave N
Cardiovascular Div
Worcester, MA 01655
508-856-3064
Length: 2 Year(a)  Total Positions: 18
Program ID: 141-24-21-011

Michigan
Ann Arbor
University of Michigan Program
University of Michigan Hospitals
Veterans Affairs Medical Center (Ann Arbor)
Program Director:
Mark R Sgulring, MD
University of Michigan Hospitals
1500 E Medical Ctr Dr 3910 Taubman
Ann Arbor, MI 48109-0966
313-764-7978
Length: 3 Year(s)  Total Positions: 24
Program ID: 141-25-21-096

Detroit
Henry Ford Hospital Program
Henry Ford Hospital
Program Director:
Howard S Rosman, MD
Henry Ford Hospital
Internal Medicine/Cardiovascular Dis
2790 W Grand Blvd
Detroit, MI 48202
313-476-2871
Length: 3 Year(s)  Total Positions: 17
Program ID: 141-25-11-164

* Updated information not provided.
Sinai Hospital Program

Sinai Hospital
Program Director:
Stephen J Gutter, MD
Sinai Hospital
Medical Staff Office
6787 W Outer Dr
Detroit, MI 48239-2899
313 488-5780
Length: 2 Year(s) Total Positions: 6
Program ID: 141-28-1-33

Wayne State University/Detroit Medical Center Program

Wayne State University School of Medicine
Detroit Receiving Hospital and University Health Center
Harper Hospital
Veterans Affairs Medical Center (Allen Park)
Program Director:
Paul R Ruble, MD
Harper Hospital Div of Cardiology
3900 John R (R Webber Core)
Detroit, MI 48201
313 876-3655
Length: 2 Year(s) Total Positions: 16
Program ID: 141-28-31-657

Royal Oak

William Beaumont Hospital Program

William Beaumont Hospital
Program Director:
Robert D Saffran, MD
William Beaumont Hospital
3601 W 13 Mile Rd
Royal Oak, MI 48073-6768
313 587-2000
Length: 3 Year(s) Total Positions: 12
Program ID: 141-28-15-316

Southfield

Providence Hospital Program

Providence Hospital
Program Director:
Wolf P C Davenport, MD
Providence Hospital
1600 W Nine Mile Rd
Southfield, MI 48075
810 347-4316
Length: 2 Year(s) Total Positions: 6
Program ID: 141-28-11-214

Minnesota

Minneapolis

University of Minnesota Program

University of Minnesota Medical School
Hennepin County Medical Center
St Paul-Ramsey Medical Center
University of Minnesota Hospital and Clinic
Veterans Affairs Medical Center (Minneapolis)
Program Director:
Jay N Cohn, MD
University of Minnesota
Cardiovascular Div
420 Delaware St SE
Minneapolis, MN 55455
612 624-9369
Length: 3 Year(s) Total Positions: 22
Program ID: 141-28-31-139

Rochester

Mayo Graduate School of Medicine Program

Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Rochester)
Rochester Methodist Hospital
St Mary's Hospital of Rochester
Program Director:
Rick A Nishimura, MD
MGMM Application Processing Center
Siebens 5Th Fl
Mayo Graduate School of Medicine
Rochester, MN 55905
507-284-8125
Length: 3 Year(s) Total Positions: 26
Program ID: 141-28-21-066

Mississippi

Jackson

University of Mississippi Medical Center Program

University of Mississippi School of Medicine
University Hospital
Veterans Affairs Medical Center (Jackson)
Program Director:
Paul H Lehan, MD
Div of Cardiovascular Diseases
University Medical Center
3500 N State St
Jackson, MS 39216-6505
601 894-6630
Length: 2 Year(s) Total Positions: 6
Program ID: 141-28-31-097

Missouri

Columbia

University of Missouri-Columbia Program
University of Missouri-Columbia School of Medicine
Harry S Truman Memorial Veterans Hospital
University of Children's Hospital
Program Director:
Karl T Weber, MD
Div of Cardiology
University of Missouri-Columbia
MA 482 Health Sciences Ctr
Columbia, MO 65212
314 882-2385
Length: 3 Year(s) Total Positions: 51
Program ID: 141-28-31-066

Kansas City

University of Missouri at Kansas City Program

University of Missouri-Kansas City School of Medicine
St Luke's Hospital
Truman Medical Center-West
Program Director:
Alan D Porter, MD
Univ of Missouri-Kansas City School of Medicine
2411 Holmes St
Dept of Cardiology 6Th Fl
Kansas City, MO 64108
816 556-4070
Length: 3 Year(s) Total Positions: 6
Program ID: 141-28-31-140

St Louis

Barnes Hospital Group Program

Barnes Hospital
Program Director:
Michael E Cahn, MD
Washington University Cardiovascular Div
Campus Box 8085
660 S Euclid
St Louis, MO 63110
314 362-3802
Length: 3 Year(s) Total Positions: 36
Program ID: 141-28-21-188

St Louis University Group of Hospitals Program

St Louis University School of Medicine
St Louis University Hospital
Veterans Affairs Medical Center (St Louis)
Program Director:
Bernard R Chaitman, MD
St Louis University Medical Center
Div of Cardiology
3605 Vista Ave at Grand Blvd
St Louis, MO 63110-0250
314 577-8860
Length: 2 Year(s) Total Positions: 18
Program ID: 141-28-21-106

St Luke's Hospital Program*

St Luke's Hospital
St Louis Regional Medical Center
University of Missouri-Columbia School of Medicine
Program Director:
Scott A Brodick, MD
Daniel B Baumann, MD
St Luke's Hospital Dept of Cardiology
222 S Woods Mill Rd Ste 610
Chesterfield, MO 63007
314 434-8017
Length: 3 Year(s) Total Positions: 6
Program ID: 141-28-21-109

Washington University Program

Jewish Hospital of St Louis
Program Director:
Michael W Rich, MD
Jewish Hospital of St Louis at Washington University
Div of Cardiology
216 S Kingshighway
St Louis, MO 63110
314 454-8997
Length: 3 Year(s) Total Positions: 20
Program ID: 141-28-21-189

Nebraska

Omaha

Creighton University Program

Creighton/Nebraska University Health Foundation
AMR St Joseph Hospital at Creighton Univ Medical Center
Veterans Affairs Medical Center (Omaha)
Program Director:
Syed M Mehdiuddin, MD
Creighton University Cardiac Center
3000 Webster St
Omaha, NE 68131-2044
402 288-4566
Length: 2 Year(s) Total Positions: 9
Program ID: 141-28-31-180

* Updated information not provided.
Accredited Programs in Cardiovascular Disease (Internal Medicine)

University of Nebraska Program
University of Nebraska Medical Center
Veterans Affairs Medical Center (Omaha)
Program Director: William W Barrington, MD
University of Nebraska Medical Center
600 S 42nd St
Omaha, NE 68198-2366
402 559-8853
Length: 3 Year(s) Total Positions: 11
Program ID: 141-96-31-191

New Hampshire
Lebanon
Dartmouth-Hitchcock Medical Center Program
Mary Hitchcock Memorial Hospital
Program Director: Debra J. Jones, MD
Dartmouth-Hitchcock Medical Center One Medical Center Dr
Lebanon, NH 03756
603 650-6009
Length: 3 Year(s) Total Positions: 0
Program ID: 141-52-31-178

New Jersey
Camden
UMDNJ-Robert Wood Johnson Medical School (Camden) Program
Cooper Hospital-University Medical Center
Program Director: Harvey L. Waxman, MD
Cooper Hospital-University Medical Center
One Cooper Plaza Rm 404
Camden, NJ 08103-1906
856-220-3001
Length: 3 Year(s) Total Positions: 9
Program ID: 141-39-31-240

Hackensack
UMDNJ-New Jersey Medical School (Hackensack) Program
Hackensack Medical Center
Program Director: Milton W. Wexner, MD
Hackensack Medical Center
30 Prospect Ave
Hackensack, NJ 07601
201 999-5310
Length: 3 Year(s) Total Positions: 3
Program ID: 141-39-11-012

Newark
UMDNJ-New Jersey Medical School Program
UMDNJ-New Jersey Medical School
Dept of Veterans Affairs Medical Center (East Orange)
Newark Beth Israel Medical Center
UMDNJ-University Hospital
Program Director: Douglas Haider, MD
UMDNJ-New Jersey Medical School
185 S Orange Ave
Newark, NJ 07103-3714
973 885-4732
Length: 3 Year(s) Total Positions: 11
Program ID: 141-96-31-257

Piscataway
UMDNJ-Robert Wood Johnson Medical School Program
UMDNJ-Robert Wood Johnson Medical School
Deborah Heart and Lung Center
Robert Wood Johnson University Hospital
Program Director: Abel E Moreira, MD
UMDNJ-Robert Wood Johnson Med Sch Dept of Medicine
One Robert Wood Johnson Plow<br>CN 178
New Brunswick, NJ 08903-0019
908 235-7851
Length: 3 Year(s) Total Positions: 10
Program ID: 141-39-31-109

South Orange
Seton Hall University School of Graduate Medical Education (Jersey City) Program
Seton Hall University School of Graduate Medical Education
Jersey City Medical Center
Program Director: Anthony S. Darrato, MD
Jersey City Medical Center
50 Baldwin Ave
Jersey City, NJ 07304
201 815-3290
Length: 3 Year(s) Total Positions: 6
Program ID: 141-39-31-208

Seton Hall University School of Graduate Medical Education Program
Seton Hall University School of Graduate Medical Education
St Joseph's Hospital and Medical Center
Program Director: Rita M Watson, MD
St Elizabeth Hospital
225 Williamson St
Elizabeth, NJ 07207
908 837-3314
Length: 3 Year(s) Total Positions: 12
Program ID: 141-39-11-223

New Mexico
Albuquerque
University of New Mexico Program
University of New Mexico School of Medicine
Lovelace Medical Center
University Hospital
Veterans Affairs Medical Center (Albuquerque)
Program Director: Michael H Crawford, MD
School of Medicine
Division of Cardiology
2211 Lomas NE
Albuquerque, NM 87131-5271
505 272-6300
Length: 3 Year(s) Total Positions: 9
Program ID: 141-96-31-166

New York
Albany
Albany Medical Center Program* Albany Medical Center Hospital
Veterans Affairs Medical Center (Albany)
Program Director: Theodore L Biddle, MD
Albany Medical College Div of Cardiology (A-44)
47 New Scotland Ave
Albany, NY 12208-3479
518 445-5239
Length: 2 Year(s) Total Positions: 10
Program ID: 141-35-31-030

Bronx
Albert Einstein College of Medicine (East Campus) Program
Albert Einstein College of Medicine of Yeshiva University
Bronx Municipal Hospital Center
Montefiore Medical Center-Weiller Hospital
Program Director: Peter M Buttrick, MD
1500 Morris Park Ave
Bronx, NY 10461
718 502-9396
Length: 3 Year(s) Total Positions: 12
Program ID: 141-35-31-142

Albert Einstein College of Medicine (West Campus) Program
Albert Einstein College of Medicine of Yeshiva University
Montefiore Medical Center-Henry and Lucy Moses Division
Program Director: Peter M Buttrick, MD
Montefiore Medical Center
Div of Cardiology
111 E 210th St
Bronx, NY 10467
718 438-4126
Length: 3 Year(s) Total Positions: 15
Program ID: 141-35-31-124

Bronx-Lebanon Hospital Center Program
Bronx-Lebanon Hospital Center
Albert Einstein College of Medicine of Yeshiva University
Program Director: Edward J Brown Jr, MD
Bronx Lebanon Hospital Center
1650 Grand Concourse
Bronx, NY 10457
718 518-2222
Length: 3 Year(s) Total Positions: 6
Program ID: 141-35-31-125

Brooklyn
Brooklyn Hospital Center Program
Brooklyn Hospital Center
Program Director: Kenneth Ong, MD
The Brooklyn Hospital Center
Division of Cardiology
121 DeKalb Ave
Brooklyn, NY 11201
718 257-8256
Length: 3 Year(s) Total Positions: 8
Program ID: 141-35-12-166

* Updated information not provided.
Coney Island Hospital Program
Coney Island Hospital
Program Director: Ernst Greif, MD
Coney Island Hospital
2601 Ocean Pkwy
Brooklyn, NY 11236
718 615-4226
Length: 3 Year(s) Total Positions: 9
Program ID: 141-35-11-207

Interfaith Medical Center Program
Interfaith Medical Center
St Luke's-Roosevelt Hospital Center
Program Director: Sanford Leff, MD
Interfaith Medical Center
655 Prospect Pl
Brooklyn, NY 11238
718 230-7111
Length: 3 Year(s) Total Positions: 4
Program ID: 141-35-21-224

Long Island College Hospital Program*
Long Island College Hospital,
Woodhull Medical and Mental Health Center
Program Director: Terrence J Socoti, MD
Long Island College Hospital Dept of Medicine
346 Henry St
Brooklyn, NY 11201
718 853-3000
Length: 3 Year(s) Total Positions: 12
Program ID: 141-35-11-192

Maimonides Medical Center Program
Maimonides Medical Center
Program Director: Gerald Pollard, MD
Maimonides Medical Center
Cardiology Div
6002 Third Ave
Brooklyn, NY 11219
718 283-7480
Length: 3 Year(s) Total Positions: 12
Program ID: 141-35-11-192

SUNY Health Science Center at Brooklyn Program
SUNY HSC at Brooklyn College of Medicine
Brookdale Hospital Medical Center
Kings County Hospital Center
University Hospital-SUNY Health Science Center at Brooklyn
Veterans Affairs Medical Center (Brooklyn)
Program Director: Richard A Stein, MD
SUNY Health Science Center at Brooklyn
450 Clarkson Ave
Brooklyn, NY 11203
718 279-1550
Length: 3 Year(s) Total Positions: 17
Program ID: 141-35-21-019

Buffalo
SUNY at Buffalo Graduate Medical-Dental Education Consortium Program
SUNY at Buffalo Grad Medical-Dental Education Consortium
Buffalo General Hospital
Erie County Medical Center
Millard Fillmore Hospitals
Veterans Affairs Medical Center (Buffalo)
Program Director: Avery R Ellis, MD PhD
VA Medical Center
Dept of Medicine (111)
3405 Bailey Ave
Buffalo, NY 14215
716 882-3003
Length: 3 Year(s) Total Positions: 15
Program ID: 141-35-21-201

East Meadow
SUNY at Stony Brook (East Meadow) Program
Nassau County Medical Center
Winthrop-University Hospital
Program Director: Arnold R Conrad, MD
Div of Cardiology
Nassau County Medical Center
2301 Hempstead Turnpike
East Meadow, NY 11554
516 572-8781
Length: 3 Year(s) Total Positions: 6
Program ID: 141-35-21-113

Jamaica
Catholic Medical Center of Brooklyn and Queens Program
Catholic Medical Center of Brooklyn and Queens Inc
Catholic Medical Center (Mary Immaculate Hospital)
Catholic Medical Center (St John's Queens Hospital)
New York Hospital
Program Director: Bernard H Roel, MD
Catholic Med Ctr of Brooklyn and Queens
69-25 152nd St
Jamaica, NY 11432
718 657-7200
Length: 3 Year(s) Total Positions: 7
Program ID: 141-35-22-069

Manhattan
North Shore University Hospital Program
North Shore University Hospital
Program Director: Stanley Katz, MD
North Shore University Hospital
Dept of Medicine
Manhattan, NY 11600
516 682-4100
Length: 3 Year(s) Total Positions: 13
Program ID: 141-35-21-201

Mineola
Winthrop-University Hospital Program
Winthrop-University Hospital
Program Director: Richard M Steingart, MD
Winthrop-University Hospital
259 First St
Mineola, NY 11501
516 682-2046
Length: 3 Year(s) Total Positions: 10
Program ID: 141-35-11-100

New Hyde Park
Albert Einstein College of Medicine at Long Island Jewish Medical Center Program
Long Island Jewish Medical Center
Program Director: Monty M Bodenheimer, MD
Long Island Jewish Medical Center
720-05 76th Avenue
New Hyde Park, NY 11040
718 767-7331
Length: 3 Year(s) Total Positions: 10
Program ID: 141-35-21-197

New York
Albert Einstein College of Medicine at Beth Israel Medical Center Program
Beth Israel Medical Center
Program Director: Steven T Hirsch, MD
Div of Cardiology
Beth Israel Medical Center
16th St at First Ave
New York, NY 10003
212 605-4600
Length: 3 Year(s) Total Positions: 8
Program ID: 141-35-11-080

Harlem Hospital Center Program*
Harlem Hospital Center
Program Director: Director Residency Training, Harlem Hospital Center
560 Lenox Ave at 135th St
New York, NY 10037
212 638-4701
Length: 3 Year(s) Total Positions: 11
Program ID: 141-35-11-206

Lenox Hill Hospital Program
Lenox Hill Hospital
Program Director: Nicholas P Depauwade, MD
100 E 77th St
New York, NY 10021-1883
212 434-2170
Length: 3 Year(s) Total Positions: 10
Program ID: 141-35-11-201

Mount Sinai School of Medicine (Elmhurst) Program
Mount Sinai School of Medicine
Elmhurst Hospital Center-Mount Sinai Services
Program Director: John E Madias, MD
Elmhurst Hospital Center
78-01 Broadway
Elmhurst, NY 11373
718 354-5005
Length: 3 Year(s) Total Positions: 9
Program ID: 141-35-11-141

* Updated Information not provided.
Mount Sinai School of Medicine
Mount Sinai School of Medicine
Mount Sinai Medical Center
Program Director: Andrew S Marks, MD
Mount Sinai Hospital
Div of Cardiology Box 1036
One Gustave L Levy Pl
New York, NY 10029
212-241-6009
Length: 3 Year(s) Total Positions: 21
Program ID: 14-35-21-103

Mount Sinai School of Medicine
Program 2
Mount Sinai School of Medicine
Englewood Hospital
Mount Sinai Medical Center
Queens Hospital Center
Program Director: Louis E Novickbolsky, MD
Div of Cardiology
One Gustave L. Levy Pl
New York, NY 10029
212-241-9856
Length: 3 Year(s)
Program ID: 14-35-31-257

New York Hospital/Cornell Medical Center Program
New York Hospital
Program Director: Stephen Scheidt, MD
Div of Cardiology
New York Hospital/Cornell Med Ctr
525 E 68th St
New York, NY 10021
212-746-2565
Length: 2 Year(s) Total Positions: 30
Program ID: 14-35-21-262

New York University Medical Center (Veterans) Program
New York University Medical Center
Bellevue Hospital Center
Veterans Affairs Medical Center (Manhattan)
Program Director: Steven Sengdila, MD
Dept of Veterans Affairs Medical Center (Manhattan)
425 E 23rd St
New York, NY 10010
212-951-3051
Length: 3 Year(s) Total Positions: 5
Program ID: 14-35-21-144

New York University Medical Center Program
New York University Medical Center
Bellevue Hospital Center
Program Director: Arthur C Fox, MD
New York University Medical Center
550 First Ave
New York, NY 10016
212-956-8406
Length: 2 Year(s) Total Positions: 13
Program ID: 14-35-21-143

Presbyterian Hospital in the City of New York Program
Presbyterian Hospital in the City of New York
Program Director: Paul J Cannon, MD
Presbyterian Hospital in the City of New York
202 W 168th St
New York, NY 10032
212-965-8993
Length: 3 Year(s) Total Positions: 14
Program ID: 14-35-31-961

St Luke’s-Roosevelt Hospital Center (St Luke’s) Program
St Luke’s-Roosevelt Hospital Center
St Luke’s-Roosevelt Hospital Center-St Luke’s Division
Program Director: Miles J Schwarz, MD
St Luke’s-Roosevelt Hospital Center
Div of Cardiology
1111 Amsterdam Ave
New York, NY 10025
212-225-8007
Length: 3 Year(s) Total Positions: 13
Program ID: 14-35-21-241

Rochester University of Rochester Program
Strong Memorial Hospital of the University of Rochester
Program Director: William B Hood Jr, MD
Strong Memorial Hospital
Cardiology Box 579
601 Elmwood Ave
Rochester, NY 14642-8679
716-275-7235
Length: 3 Year(s) Total Positions: 12
Program ID: 14-35-12-232

Stony Brook SUNY at Stony Brook Program
University Hospital-SUNY at Stony Brook Veterans Affairs Medical Center (Northport)
Program Director: Peter P Cohen, MD
Dept of Med Div of Cardiology
SUNY at Stony Brook Health Sciences Center (T17-050)
Stony Brook, NY 11794-0171
516-444-5669
Length: 3 Year(s) Total Positions: 12
Program ID: 14-35-21-014

Syracuse SUNY Health Science Center at Syracuse Program
University Hospital-SUNY Health Science Center at Syracuse
Crouse-Irving Memorial Hospital
Veterans Affairs Medical Center (Syracuse)
Program Director: Harold Smolinsky, MD
Dept of Medicine
SUNY Health Science Center
750 E Adams St
Syracuse, NY 13210
315-444-5463
Length: 3 Year(s) Total Positions: 6
Program ID: 14-35-21-128

Valhalla New York Medical College (Cabrini) Program
New York Medical College
Cabrini Medical Center
St Vincent’s Hospital and Medical Center of New York
Program Director: Phillip Varricchio, MD
Cabrini Medical Center
2272 1st Ave
New York, NY 10003
212-698-8124
Length: 3 Year(s) Total Positions: 3
Program ID: 14-35-21-134

New York Medical College (Metropolitan) Program*
New York Medical College
Metropolitan Hospital Center
WESTCHESTER COUNTY MEDICAL CENTER
Program Director: George Bouras, MD
Metropolitan Hospital Center
1001 First Ave
New York, NY 10029
212-266-2620
Length: 2 Year(s) Total Positions: 5
Program ID: 14-35-21-067

New York Medical College (Our Lady of Mercy) Program
New York Medical College
Our Lady of Mercy Medical Center
Westchester County Medical Center
Program Director: Salvatore Ghirardella, MD
Our Lady of Mercy Medical Center
660 E 238th St
Bronx, NY 10466
718-928-9498
Length: 5 Year(s) Total Positions: 4
Program ID: 14-35-21-101

New York Medical College (Richmond) Program
New York Medical College
St Vincent’s Medical Center of Richmond
Program Director: Richard S Grodman, MD
St Vincent’s Medical Center of Richmond
335 Bard Ave
Staten Island, NY 10301-1099
718-876-4643
Length: 3 Year(s) Total Positions: 6
Program ID: 14-35-11-170

New York Medical College at St Vincent’s Hospital and Medical Center of New York Program
New York Medical College
St Vincent’s Hospital and Medical Center of New York
Program Director: James T Mazzaro, MD
St Vincent’s Hospital and Medical Center of New York
152 W 11th St
New York, NY 10011
212-604-3244
Length: 3 Year(s) Total Positions: 7
Program ID: 14-35-11-083

New York Medical College at Westchester County Medical Center Program
New York Medical College
Westchester County Medical Center
Program Director: Mervin B Weis, MD
Westchester County Medical Center
Div of Cardiology
Valhalla, NY 10595
614-266-8185
Length: 3 Year(s) Total Positions: 9
Program ID: 14-35-11-015

* Updated information not provided.
North Carolina

Chapel Hill
University of North Carolina Hospitals Program
University of North Carolina Hospitals
Program Director: Park W Willis, MD
University of North Carolina School of Medicine
Div of Cardiology
CB 7075 340 Burnett-Womack Bldg
Chapel Hill, NC 27599-7075
919 966-5305
Length: 2 Year(s)  Total Positions: 12
Program ID: 141-38-21-197

Durham
Duke University Program
Duke University Medical Center
Program Director: Gary L Stiles, MD
Duke University Medical Center
Box 3581
Durham, NC 27710
919 681-6000
Length: 2 Year(s)  Total Positions: 14
Program ID: 141-38-21-198

Greenville
East Carolina University Program
East Carolina University School of Medicine
Pitt County Memorial Hospital
Program Director: Harry J DeAntonio, DO
Pitt County Memorial Hospital
East Carolina Univ Sch of Med
Dept of Med/Cardiology PCMH-TA 378
Greenville, NC 27834-4364
919 316-4651
Length: 2 Year(s)  Total Positions: 6
Program ID: 141-38-11-345

Winston-Salem
Bowman Gray School of Medicine Program
North Carolina Baptist Hospital
Program Director: Robert J Applegeta, MD
Bowman Gray School of Medicine
Secton on Cardiology
Medical Center Blvd
Winston-Salem, NC 27157-1045
336 716-2718
Length: 2 Year(s)  Total Positions: 14
Program ID: 141-38-21-196

Ohio

Cincinnati
University of Cincinnati Hospital Group Program
University of Cincinnati Hospital
Veterans Affairs Medical Center (Cincinnati)
Program Director: Richard A Walsh, MD
University of Cincinnati
331 Bethesda Ave
ML 542
Cincinnati, OH 45267-0542
513 558-4721
Length: 2 Year(s)  Total Positions: 12
Program ID: 141-38-21-197

Cleveland
Case Western Reserve University (MetroHealth) Program
MetroHealth Medical Center
Mount Sinai Medical Center of Cleveland
Program Director: Robert O Bakker, MD
MetroHealth Medical Center
Div of Cardiology
2500 MetroHealth Dr
Cleveland, OH 44109-1888
216 459-3875
Length: 2 Year(s)  Total Positions: 14
Program ID: 141-38-11-198

Cleveland Clinic Foundation/St Vincent Charity Hospital Program
Cleveland Clinic Foundation
Program Director: Brian Griffin, MD
Cleveland Clinic Foundation
Dept of Cardiovascular Diseases
9500 Euclid Ave 7712
Cleveland, OH 44195-5242
216 444-5690
Length: 2 Year(s)  Total Positions: 41
Program ID: 141-38-12-197

Dayton
Wright State University Program
Wright State University School of Medicine
Good Samaritan Hospital and Health Center
Veterans Affairs Medical Center (Dayton)
Program Director: Melson Sakaji, MD
Good Samaritan Hospital Medical Education
2222 Philadelphia Dr
Dayton, OH 45406
513 276-2512
Length: 3 Year(s)  Total Positions: 6
Program ID: 141-38-21-217

Toledo
Medical College of Ohio at Toledo Program*
Medical College of Ohio Hospital
Toledo Hospital
Program Director: Theodore D Praker, MD
Medical College of Ohio at Toledo
C S #1008 Dept of Medicine
Toledo, OH 43696
419 281-3097
Length: 3 Year(s)  Total Positions: 6
Program ID: 141-38-21-068

Oklahoma

Oklahoma City
University of Oklahoma Health Sciences Center Program
University of Oklahoma College of Medicine-Oklahoma City
University Hospital and Clinics
Veterans Affairs Medical Center (Oklahoma City)
Program Director: Dwight W Reynolds, MD
University of Oklahoma Health Sciences Center
PO Box 26901
ESP-300
Oklahoma City, OK 73190
405 271-4742
Length: 2 Year(s)  Total Positions: 19
Program ID: 141-38-21-103

Oregon

Portland
Oregon Health Sciences University Program*
Oregon Health Sciences University Hospital
Veterans Affairs Medical Center (Portland)
Program Director: Edward S Murphy, MD
3181 SW Sam Jackson Park Rd/L462
Portland, OR 97201-3980
503 494-9700
Length: 3 Year(s)  Total Positions: 7
Program ID: 141-40-31-198

* Updated information not provided.
Pennsylvania

Danville
Gelseinger Medical Center Program
Gelseinger Medical Center
Program Director:
Ellen K Smith, MD
Gelseinger Medical Center
100 N Academy Ave
Danville, PA 17222
717-271-8053
Length: 3 Year(s) Total Positions: 9
Program ID: 141-41-11-173

Hershey
Milton S Hershey Medical Center of Pennsylvania State University Program*
Penn State University Hospital Milton S Hershey Med Ctr
Program Director:
Joseph A Guzacho, MD
Div of Cardiology
Milton S Hershey Medical Center
PO Box 850
Hershey, PA 17033
717-531-8407
Length: 2 Year(s) Total Positions: 2
Program ID: 141-41-11-017

Philadelphia
Albert Einstein Medical Center Program
Albert Einstein Medical Center
Program Director:
Morris N Kotler, MD
Kleint Professional Bldg Suite 363
Albert Einstein Medical Center
5401 Old York Rd
Philadelphia, PA 19141-3008
215-456-7286
Length: 3 Year(s) Total Positions: 13
Program ID: 141-41-11-082

Episcopal Hospital Program
Episcopal Hospital
Program Director:
Vidyas S Banka, MD
Episcopal Hospital
100 E Lehigh Ave
MAD Rm 305
Philadelphia, PA 19123-1008
215-477-7247
Length: 3 Year(s) Total Positions: 11
Program ID: 141-41-11-082

Graduate Hospital Program
Graduate Hospital
Program Director:
Thomas H Kresen, MD
Graduate Hospital
Popper Pavilion Ste 151
Philadelphia, PA 19124-1407
215-883-2485
Length: 3 Year(s) Total Positions: 9
Program ID: 141-41-11-174

MCPI/Hahnemann University Hospital Program
Hahnemann University Hospital
Program Director:
Eric L Michelson, MD
Hahnemann University
Broad & Vine Sts
Mail Stop 313
Philadelphia, PA 19102-1192
215-762-8258
Length: 3 Year(s) Total Positions: 20
Program ID: 141-41-21-281

*Updated information not provided.

MCPHU/Medical College of Pennsylvania Hospital Program
Medical College of Pennsylvania Hospital
Program Director:
Steven G Moosbrugger, MD
Medical College of Pennsylvania Hospital
Dept of Cardiology
3300 Henry Ave
Philadelphia, PA 19129
215-842-9085
Length: 3 Year(s) Total Positions: 14
Program ID: 141-41-21-146

Presbyterian Medical Center of Philadelphia Program
Presbyterian Medical Center of Philadelphia
Program Director:
Steven J Nierenberg, MD
Presbyterian Medical Center of Philadelphia
35th & Market Sts
Philadelphia, PA 19104
215-562-8015
Length: 3 Year(s) Total Positions: 15
Program ID: 141-41-11-146

Temple University Hospital Program
Temple University Hospital
Program Director:
Alfred A Nove, MD
Temple University Hospital Dept of Medicine
Cardiology Section
3401 N Broad St
Philadelphia, PA 19140
215-707-3346
Length: 2 Year(s) Total Positions: 13
Program ID: 141-41-21-2488

Thomas Jefferson University Hospital Program
Thomas Jefferson University Hospital
Program Director:
Arnold J Greenspan, MD
Thomas Jefferson University Hospital
111 S 11th St
Room 6506
Philadelphia, PA 19107
215-555-8086
Length: 2 Year(s) Total Positions: 9
Program ID: 141-41-21-2488

University of Pennsylvania Program
Hospital of the University of Pennsylvania
Program Director:
Martin G St John Sutton, MD
Hospital of the University of Pennsylvania
Cardiovascular Div 9 Gates
3400 Spruce St
Philadelphia, PA 19104-4283
215-662-2885
Length: 2 Year(s) Total Positions: 23
Program ID: 141-41-11-233

Shady Side Hospital Program
Shady Side Hospital
Program Director:
Robert J Bitterman, MD
Shady Side Hospital
5200 Centre Ave
Pittsburgh, PA 15232
412-633-2380
Length: 2 Year(s) Total Positions: 9
Program ID: 141-41-21-069

University Health Center of Pittsburgh Program
University Health Center of Pittsburgh
Montefiore University Hospital (UPMC)
Presbyterian University Hospital/UPMC
Veterans Affairs Medical Center (Pittsburgh)
Program Director:
James A Shaver, MD
Presbyterian Univ Hosp
100 Pita St
DeSoto at O'Hara St
Pittsburgh, PA 15213
412-847-9439
Length: 3 Year(s) Total Positions: 22
Program ID: 141-41-21-249

Western Pennsylvania Hospital Program
Western Pennsylvania Hospital
Program Director:
Alan B Gradman, MD
Western Pennsylvania Hospital
4500 Friendship Ave
Ste 3411 N Tower
Pittsburgh, PA 15224
412-578-6804
Length: 3 Year(s) Total Positions: 6
Program ID: 141-41-11-083

Sayre
Guthrie Healthcare System Program
Robert Packer Hospital
Program Director:
John L Carmanaker, MD
Robert Packer Hospital
Guthrie Sq
Sayre, PA 18840
717-860-4007
Length: 3 Year(s) Total Positions: 2
Program ID: 141-41-21-249

Wynnewood
Lankenau Hospital Program*
Lankenau Hospital
Program Director:
James P Breck, MD
Lankenau Hospital Div of Cardiovascular Disease
100 Lancaster Ave W City Line
Rm 225 Medical Research Bldg
Wynnewood, PA 19096
215-645-2692
Length: 3 Year(s) Total Positions: 12
Program ID: 141-41-11-035

Pittsburgh
MCPHU/Allegheny General Hospital Program
Allegheny General Hospital
Program Director:
Nathan Daniel Reichek, MD
Div of Cardiology
Allegheny General Hospital
330 E North Ave
Pittsburgh, PA 15212-9886
412-268-8709
Length: 3 Year(s) Total Positions: 14
Program ID: 141-41-11-403
Puerto Rico
Ponce
Hospital de Dámas Program
Hospital de Dámas
Hospital San Lucas
Program Director:
Pérez Cortez, MD
Edif Parra Suite 407
Ponce Bypass
Ponce, PR 00711
809-840-8860
Length: 2 Year(s) Total Positions: 2 Program ID: 141-42-11-116

Río Piedras
San Juan City Hospital Program
San Juan City Hospital
University of Puerto Rico School of Medicine
Program Director:
Jorge B Lugo-Rodríguez, MD
San Juan City Hospital
PO Box 21455
Rio Piedras, PR 00938
809-766-2222
Length: 2 Year(s) Total Positions: 5 Program ID: 141-42-11-118

San Juan
University of Puerto Rico Program
University of Puerto Rico School of Medicine
University Hospital
Program Director:
Erica B Garcia-Palmieri, MD
University Hospital Puerto Rico Medical Center
Box 5697
San Juan, PR 00935
809-766-2326
Length: 3 Year(s) Total Positions: 148 Program ID: 141-42-21-114
Veterans Affairs Medical and Regional Office Center Program
Veterans Affairs Medical Center (San Juan)
Program Director:
Edgardo Hernandez-Lopez, MD
Cardiology Section
VA Medical Center
One Veterans Plaza
San Juan, PR 00927-5800
809-766-5620
Length: 3 Year(s) Total Positions: 7 Program ID: 141-42-31-117

Rhode Island
Providence
Brown University Program (Roger Williams)
Program
Roger Williams Medical Center
Memorial Hospital of Rhode Island
Miriam Hospital
Veterans Affairs Medical Center (Providence)
Program Director:
Peter L. Tilkemeier, MD
Division of Cardiology
The Miriam Hospital
164 Summit Ave
Providence, RI 02906
401-331-6500
Length: 2 Year(s) Total Positions: 16 Program ID: 141-43-31-655

Brown University Program
Rhode Island Hospital
Program Director:
Albert G Mott, MD
Div of Cardiology
Rhode Island Hospital
593 Eddy St
Providence, RI 02903
401-444-9544
Length: 3 Year(s) Total Positions: 10 Program ID: 141-43-11-149

South Carolina
Charleston
Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
MUSC Medical Center
Program Director:
Bruce W Uher, MD
Medical University of South Carolina
Cardiology Div
171 Ashley Ave.
Charleston, SC 29425-2221
803-796-4411
Length: 3 Year(s) Total Positions: 12 Program ID: 141-45-21-129

Columbia
Richland Memorial Hospital-University of South Carolina School of Medicine Program
Richland Memorial Hospital-Univ of South Carolina Sch of Med
Williams Jennings Bryan Dorn Veterans Hospital
Program Director:
Christine B Hopkins, MD
University of South Carolina/Richland Medical Hospital
Four Medical Park
Suite 204
Columbia, SC 29203
803-540-1100
Length: 3 Year(s) Total Positions: 6 Program ID: 141-45-31-110

Tennessee
Johnson City
East Tennessee State University Program
East Tennessee State University College of Medicine
Johnson City Medical Center Hospital
Veterans Affairs Medical Center (Mountain Home)
Program Director:
John E Douglas, MD
East Tennessee State University
Box 70622
Johnson City, TN 37644-0622
423-929-1171
Length: 3 Year(s) Total Positions: 6 Program ID: 141-47-21-104

Memphis
University of Tennessee Program*
University of Tennessee College of Medicine
Regional Medical Center at Memphis
Veterans Affairs Medical Center (Memphis)
Program Director:
Dale M Sullivan, MD
University of Tennessee
Dept of Medicine
951 Court Ave Bm 353-D
Memphis, TN 38163
901-528-5758
Length: 3 Year(s) Total Positions: 9 Program ID: 141-47-31-175

Nashville
Vanderbilt University Program*
Vanderbilt University Medical Center
Program Director:
Ronnie Marie Robertson, MD
Vanderbilt University School of Medicine
Div of Cardiology
5011 MCN
Nashville, TN 37232-2170
615-343-5245
Length: 2 Year(s) Total Positions: 18 Program ID: 141-47-31-018

Texas
Dallas
Baylor University Medical Center Program
Baylor University Medical Center
Program Director:
Peter J Wells, MD FACC
Baylor University Medical Center
3500 Gaston Ave
Dallas, TX 75246
214-820-3530
Length: 3 Year(s) Total Positions: 2 Program ID: 141-48-31-178
University of Texas Southwestern Medical School Program
University of Texas Southwestern Medical School
Dallas County Hospital District Parkland Memorial Hospital
Program Director:
Leslie D Hils, MD
University of Texas Southwestern Medical Center
Cardiology Div CST.102
5333 Harry Hines Blvd
Dallas, TX 75235-0107
214-648-5863
Length: 3 Year(s) Total Positions: 17 Program ID: 141-48-21-119

Fort Sam Houston
Brooke Army Medical Center Program
Brooke Army Medical Center
Program Director:
James K Gilman, MD
Cardiology Service
Brooke Army Medical Center
Fort Sam Houston
San Antonio, TX 78234-6062
210-941-9006
Length: 3 Year(s) Total Positions: 11 Program ID: 141-48-12-177

*Updated information not provided.
Galveston

University of Texas Medical Branch Hospitals Program
University of Texas Medical Branch Hospitals

Program Director:
Rusge S Marshall, MD PhD
University of Texas Medical Branch 6053
6109 John Sealy Hospital 6550
Galveston, TX 77555-5553
409 772-1533
Length: 3 Year(s) Total Positions: 12
Program ID: 141-48-21-070

Houston

Baylor College of Medicine Program 1
Baylor College of Medicine
Harris County Hospital District-Ben Taub General Hospital
Methodist Hospital
Veterans Affairs Medical Center (Houston)

Program Director:
Robert Roberts, MD
Baylor College of Medicine
Methodist Hospital
6555 Fannin MS P.905
Houston, TX 77030
713 790-4854
Length: 3 Year(s) Total Positions: 40
Program ID: 141-48-21-146

Baylor College of Medicine Program 2
Baylor College of Medicine
St Luke's Episcopal Hospital

Program Director:
Robert J Hall, MD
St Luke's Episcopal Hospital Dept of Cardiology
6720 Bertner Ave Sm P306
Mail Code 1-102
Houston, TX 77030-3004
713 791-4136
Length: 3 Year(s) Total Positions: 20
Program ID: 141-48-21-120

University of Texas at Houston Program
University of Texas Health Science Center at Houston
Hermann Hospital
Lyndon B Johnson General Hospital
Texas Heart Institute

Program Director:
Deborah Wolberte, MD
Univ of Texas Medical School
Dept of Medicine
PO Box 20708
Houston, TX 77225-0708
713 794-4117
Length: 2 Year(s) Total Positions: 26
Program ID: 141-48-21-019

Lackland AF

Wilford Hall USAF Medical Center Program*
Wilford Hall USAF Medical Center (SG)

Program Director:
David H Federson, MD
Wilford Hall USAF Medical Center
Dept of the Air Force
Lackland AFB, TX 78236-5300
512 770-7599
Length: 3 Year(s) Total Positions: 13
Program ID: 141-48-19-671

Lubbock

Texas Tech University (Lubbock) Program
Texas Tech University Health Sciences Center at Lubbock
University Medical Center

Program Director:
Jean S Liu, MD
Texas Tech University Health Sciences Center at Lubbock
Cardiology Div Internal Medicine
3901 Fourth St
Lubbock, TX 79430
906 743-3177
Length: 3 Year(s) Total Positions: 5
Program ID: 141-48-21-121

San Antonio

University of Texas Health Science Center at San Antonio Program
University of Texas Medical School at San Antonio
Audie L Murphy Memorial Veterans Hospital (San Antonio)
University Hospital-South Texas Medical Center

Program Director:
David McCull, MD PhD
University of Texas Health Science Center
Dept of Medicine/Cardiology
7700 Floyd Curl Dr
San Antonio, TX 78284-7872
210 567-4600
Length: 2 Year(s) Total Positions: 11
Program ID: 141-48-21-684

Temple

Texas A&M College of Medicine-Scott and White Program
Scott and White Memorial Hospital

Program Director:
D Scott Girst, DO
Texas A&M Scott and White Graduate Medical Education
2401 S 1st St
Temple, TX 76508-0001
903 298-4403
Length: 3 Year(s) Total Positions: 6
Program ID: 141-48-21-600

Utah

Salt Lake City

University of Utah Program
University of Utah Medical Center
Veterans Affairs Medical Center (Salt Lake City)

Program Director:
Jay WMason, MD
University of Utah Health Sciences Center
Cardiology Div
15 N Medical Dr
Salt Lake City, UT 84132-1001
801 581-7715
Length: 3 Year(s) Total Positions: 11
Program ID: 141-48-21-199

Vermont

Burlington Medical Center Hospital of Vermont Program
Burlington Medical Center Hospital of Vermont

Program Director:
Mark Capeless, MD
Cardiology Dept
Med Ctr Hosp of Vermont
Burlington, VT 05401
802 863-3734
Length: 3 Year(s)
Program ID: 141-54-21-300

Virginia

Charlottesville

University of Virginia Program
University of Virginia Medical Center

Program Director:
George A Beller, MD
University of Virginia Hospital Dep Medical
Box 158
Charlottesville, VA 22908
804 982-2134
Length: 2 Year(s) Total Positions: 15
Program ID: 141-51-21-021

Richmond

Medical College of Virginia/Virginia Commonwealth University Program
Medical College of Virginia/Virginia Commonwealth University
Medicine College of Virginia Hospitals

Program Director:
David W Richardson, MD
MCV/Virginia Commonwealth Univ
PO Box 890128
Richmond, VA 23298-0128
804 828-9869
Length: 3 Year(s) Total Positions: 18
Program ID: 141-51-21-022

Roanoke

University of Virginia (Roanoke-Salem) Program
Carrilion Health System
Veterans Affairs Medical Center (Salem)
Community Hospital of Roanoke Valley
University of Virginia Medical Center

Program Director:
Douglas C Quinell, MD
Cardiology Section
Veterans Affairs Med Ctr
Salem, VA 24153
703 882-2463
Length: 3 Year(s) Total Positions: 5
Program ID: 141-51-21-005

* Updated information not provided.
Washington
Seattle
University of Washington Program
University of Washington School of Medicine
University of Washington Medical Center
Veterans Affairs Medical Center (Seattle)
Program Director:
Catherine M Otto, MD
University of Washington
Cardiology 8G-22
1959 NE Pacific St
Seattle, WA 98109
206 256-3397
Length: 3 Year(s)  Total Positions: 12
Program ID: 141-06-31-105

Tacoma
Madigan Army Medical Center Program
Madigan Army Medical Center
Program Director:
Joseph A Paris, MD
Cardiology Service
Madigan Army Medical Center
Tacoma, WA 98431-6000
256 968-1090
Length: 3 Year(s)  Total Positions: 6
Program ID: 141-06-31-232

West Virginia
Huntington
Marshall University School of Medicine Program
Marshall University School of Medicine
Cabell Huntington Hospital
Charleston Area Medical Center
St Mary's Hospital
Veterans Affairs Medical Center (Huntington)
Program Director:
Richard G Stevenson, MD
Marshall University School of Medicine
Dept of Medicine
180, Sixth Ave
Huntington, WV 25705-0410
304 691-1166
Length: 3 Year(s)  Total Positions: 11
Program ID: 141-06-31-038

Morgantown
West Virginia University Program*
West Virginia University Hospitals
Program Director:
Abram C Jain, MD
West Virginia University
Health Sciences Center-S
Morgantown, WV 26506-1577
304 293-4066
Length: 3 Year(s)  Total Positions: 8
Program ID: 141-05-11-019

Wisconsin
Madison
University of Wisconsin Program
University of Wisconsin Hospital and Clinics
William J Middleton Veterans Hospital
Program Director:
Ford Ballantine III, MD
University of Wisconsin Hospitals and Clinics
600 Highland Ave Bm Hc 0414
Madison, WI 53792-5448
608 263-0861
Length: 3 Year(s)  Total Positions: 11
Program ID: 141-06-31-150

Milwaukee
Medical College of Wisconsin Program
Medical College of Wisconsin Affiliated Hospitals Inc
Clement J Zablocki Veterans Affairs Medical Center
John L Doyne Hospital
Program Director:
Donald D Tresch, MD
Medical College of Wisconsin
8700 W Wisconsin Ave
Box 123
Milwaukee, WI 53226-8110
414 957-6224
Length: 3 Year(s)  Total Positions: 12
Program ID: 141-06-31-066

University of Wisconsin (Milwaukee) Program
Sinai Samaritan Medical Center
Program Director:
Diane L Zweick, MD
Sinai Samaritan Medical Center
PO Box 342
965 N 12th St
Milwaukee, WI 53201-0342
414 383-7688
Length: 3 Year(s)  Total Positions: 18
Program ID: 141-06-31-072

Chemical Pathology (Pathology-Anatomic and Clinical)

Michigan
Royal Oak
William Beaumont Hospital Program
William Beaumont Hospital
Program Director:
Elizabeth Sykes, MB BS
William Beaumont Hospital
3601 W 13 Mile Rd
Royal Oak, MI 48073
810 651-6022
Length: 1 Year(s)  Total Positions: 1
Program ID: 306-25-21-008

Minnesota
Minneapolis
University of Minnesota Program
University of Minnesota Medical School
University of Minnesota Hospital and Clinic
Program Director:
John B Eckel, MD PhD
University of Minnesota Hospital
Box 609 UMC
420 Delaware St SE
Minneapolis, MN 55455-0385
612 626-3165
Length: 1 Year(s)  Total Positions: 1
Program ID: 306-25-21-001

North Carolina
Chapel Hill
University of North Carolina Hospitals Program
University of North Carolina Hospitals
Program Director:
William W McLendon, MD
Dept of Laboratories
Univ of North Carolina Hospitals
161 Manning Dr
Chapel Hill, NC 27514-7600
919 966-3017
Length: 1 Year(s)  Total Positions: 1
Program ID: 306-36-21-009

Pennsylvania
Philadelphia
Thomas Jefferson University Program
Thomas Jefferson University Hospital
Program Director:
William Z Borer, MD
Thomas Jefferson University Hospital
401 Pavilion
Philadelphia, PA 19107-4068
215 955-3407
Length: 1 Year(s)  Total Positions: 1
Program ID: 306-41-11-006

* Updated information not provided.
Accredited Programs in Chemical Pathology (Pathology-Anatomic and Clinical)

Pittsburgh
University Health Center of Pittsburgh Program
University Health Center of Pittsburgh
Children's Hospital of Pittsburgh
Presbyterian-University Hospital/UPMC
Program Director:
Joseph S Amceta, MD
Clinical Chemistry Laboratory CLSI
UPMC/Rm 6846 Main Tower
300 Lothrop St
Pittsburgh, PA 15213-3582
412 647-6522
Length: 1 Year(s)  Total Positions: 2
Program Id: 308-41-21-003

Texas
Houston
University of Texas M D Anderson Cancer Center Program
University of Texas M D Anderson Cancer Center
Program Director:
Frank L Liu, MD
The University of Texas M. D. Anderson Cancer Center
Lab Med Box 73
1515 Holcombe Blvd
Houston, TX 77030
713 706-4749
Length: 1 Year(s)  Total Positions: 2
Program Id: 308-48-21-004

Virginia
Richmond
Medical College of Virginia/Virginia Commonwealth University Program
Medical College of Virginia/Virginia Commonwealth University
Medical College of Virginia Hospitals
Program Director:
David Wilkinson, MD PhD
Greg Miller, PhD
VCU/Virginia Commonwealth Univ
PO Box 980652
Richmond, VA 23298-0652
804 289-0375
Length: 1 Year(s)  Total Positions: 1
Program Id: 308-51-21-003

California
Los Angeles
 Cedars-Sinai Medical Center Program
 Cedars-Sinai Medical Center
 Program Director:
 S Robert Moradi, MD
 Cedars-Sinai Medical Center
 8730 Alvarado Dr
 Los Angeles, CA 90048-0750
 310 856-2584
 Length: 2 Year(s)  Total Positions: 6
 Program Id: 405-05-11-008

 UCLA Medical Center Program
 UCLA School of Medicine
 UCLA Neuropsychiatric Hospital
 Program Director:
 Daziel Siegel, MD
 UCLA Neuropsychiatric Hospital
 790 Westwood Plaza
 RM CB 987
 Los Angeles, CA 90024-1769
 310 825-0077
 Length: 2 Year(s)  Total Positions: 12
 Program Id: 405-05-11-012

 University of Southern California Program
 Los Angeles County-USC Medical Center
 Program Director:
 Sidney Rumsak, MD PhD
 Psychiatric Hospital
 Los Angeles City-USC Med Ctr
 3677 Hospital Pl
 Los Angeles, CA 90033
 213 232-5388
 Length: 2 Year(s)  Total Positions: 18
 Program Id: 405-05-11-019

 Napa
 Napa State Hospital Program
 Napa State Hospital
 Program Director:
 Edwin P Brennan, MD
 Napa State Hospital
 2300 Napa Valley Hwy
 Napa, CA 94558-6503
 707 233-5661
 Length: 2 Year(s)  Total Positions: 14
 Program Id: 405-05-23-006

Orange
University of California (Irvine) Program
University of California (Irvine) Medical Center
Program Director:
Justin D Call, MD
University of California Irvine Medical Center
101 City Dr S
Bldg 3 R100
Orange, CA 92668
714 456-6023
Length: 2 Year(s)  Total Positions: 4
Program Id: 405-05-11-007

Child and Adolescent Psychiatry
(Psychiatry)

Alabama
Mobile
University of South Alabama Program
University of South Alabama Medical Center
Program Director:
Robert H Herrick, MD
University of South Alabama
Dept of Psychiatry
3841 Medical Park Dr W Ste 2
Mobile, AL 36603
205 664-5157
Length: 2 Year(s)  Total Positions: 4
Program Id: 405-01-21-155

Arizona
Tucson
University of Arizona Program
University of Arizona College of Medicine
Desert Hills Center for Youth
University Medical Center
Program Director:
Peter J Lashe, MD
Dept of Psychiatry
University of Arizona
College of Medicine
Tucson, AZ 85714
602 636-4075
Length: 2 Year(s)  Total Positions: 4
Program Id: 405-05-21-142

Arkansas
Little Rock
University of Arkansas for Medical Sciences Program*
University of Arkansas College of Medicine
Arkansas Children's Hospital
Arkansas State Hospital-Little Rock Hospital
University Hospital of Arkansas
Program Director:
Andre P Desjöys, MD
University of Arkansas for Medical Sciences
Dept of Psychiatry
4501 W Markham St Slot 554
Little Rock, AR 72205
501 370-4675
Length: 2 Year(s)  Total Positions: 4
Program Id: 405-04-21-146

* Updated information not provided.
Sacramento
University of California (Davis) Program
University of California (Davis) Medical Center
One County Mental Health Services
Program Director:
Kent Hart, MD
University of California (Davis) Medical Center
5215 Stockton Blvd
Sacramento, CA 95817
916 734-2614
Length: 2 Year(s) Total Positions: 6
Program ID: 446-06-11-066

San Diego
University of California (San Diego) Program
University of California (San Diego) Medical Center
Children’s Hospital and Health Center
Program Director:
Calvin A Colarusso, MD
Dept of Psychiatry (6060)
9500 Gilman Dr
La Jolla, CA 92093-0600
619 534-3684
Length: 2 Year(s) Total Positions: 6
Program ID: 446-06-21-614

San Francisco
University of California (San Francisco) Program
University of California (San Francisco) School of Medicine
University of California (San Francisco) Medical Center
Program Director:
Graeme Hansen, MD
Langley Porter Psychiatric Institute
401 Parnassus Ave
Box CAS
San Francisco, CA 94143-0894
415 476-7725
Length: 2 Year(s) Total Positions: 8
Program ID: 446-06-21-618

Stanford
Stanford University Program*
Stanford University Hospital
Program Director:
Han Stark, MD
Stanford University School of Medicine
Dept of Psychiatry
101 Quarry Rd
Stanford, CA 94305-5543
415 725-5501
Length: 2 Year(s) Total Positions: 11
Program ID: 446-06-21-619

Torrance
Los Angeles County-Harbor-UCLA Medical Center Program
Los Angeles County-Harbor-UCLA Medical Center
Program Director:
Zoe Nathan, MD PhD
Harbor-UCLA Medical Center
1000 W Carson St Box 406
PO Box 2810
Torrance, CA 90609-8823
310 205-3112
Length: 2 Year(s) Total Positions: 6
Program ID: 446-06-21-620

Colorado
Denver
University of Colorado Program*
University of Colorado School of Medicine
Program Director:
Donald W Bechtold, MD
University of Colorado School of Medicine
4200 E Ninth Ave Container C-250
Denver, CO 80220
303 270-7745
Length: 2 Year(s) Total Positions: 12
Program ID: 445-07-11-021

Connecticut
Farmington
Institute of Living/University of Connecticut Program
University of Connecticut School of Medicine
Institute of Living
Mount Sinai Hospital
Newington Children’s Hospital
Univ of Connecticut Health Center/John Dempsey Hospital
Program Director:
Kenneth R Robson, MD
Institute of Living
400 Washington St
Hartford, CT 06106
203 541-3631
Length: 2 Year(s) Total Positions: 6
Program ID: 446-06-21-623

New Haven
Yale-New Haven Medical Center Program
Yale-New Haven Hospital
New Haven Children's Hospital
New Haven, CT 06510-7900
203 785-2518
Length: 2 Year(s) Total Positions: 12
Program ID: 446-06-11-023

District of Columbia
Washington
Children's National Medical Center Program*
Children's National Medical Center
Program Director:
Kenneth R Tewlin, MD
Children's National Medical Center
 Dept of Psychiatry
111 Michigan Ave NW
Washington, DC 20010-2979
202 384-5240
Length: 2 Year(s) Total Positions: 8
Program ID: 446-10-21-024

Florida
Gainesville
University of Florida Program
University of Florida College of Medicine
Shands Hospital at the University of Florida
Program Director:
John P Kemp, MD
Dept of Psychiatry
PO Box 106244 DCAF
University of Florida College of Medicine
PO Box 106244
Gainesville, FL 32610-0234
904 382-3941
Length: 2 Year(s) Total Positions: 8
Program ID: 446-06-11-026

Miami
University of Miami-Jackson Memorial Medical Center Program*
University of Miami-Jackson Memorial Medical Center
University of Miami Hospital and Clinics
Program Director:
Douglas Felzman, MD
University of Miami School of Medicine
Dept of Psychiatry D-29
PO Box 106160
Miami, FL 33101
305 355-2505
Length: 2 Year(s) Total Positions: 12
Program ID: 446-11-21-027

Tampa
University of South Florida Program
University of South Florida College of Medicine
Tampa General Healthcare
USF University Psychiatry Center
Program Director:
Kailie R Shaw, MD
University of South Florida
3515 E Fletcher Ave
Tampa, FL 33613
813 972-7060
Length: 2 Year(s) Total Positions: 6
Program ID: 446-11-21-140

* Updated information not provided.


**Georgia**

**Atlanta**

**Emory University Program**

Emory University School of Medicine
Georgia Mental Health Institute
Grady Memorial Hospital
Kenneth Egleston Hospital for Children

Program Director:
Sandra Senou, MD
Emory University Medical School Dept of Psychiatry
2216 Ridgewood Dr NE
Atlanta, GA 30322
404 727-4007

Length: 2 Year(s)  Total Positions: 12
Program ID: 405-12-21-428

**Augusta**

**Medical College of Georgia Program**

Medical College of Georgia Hospital and Clinics
Dwight David Eisenhower Army Medical Center
Georgia Regional Hospital at Augusta

Program Director:
Allan M Josephson, MD
Medical College of Georgia
Dept of Psychiatry
Augusta, GA 30912-3800
706 721-6099

Length: 2 Year(s)  Total Positions: 8
Program ID: 405-12-21-148

**Hawaii**

**Honolulu**

**University of Hawaii Program**

University of Hawaii John A Burns School of Medicine
Kapiolani Medical Center for Women and Children
Leahi Hospital

Program Director:
John P McDermott Jr, MD
University of Hawaii Dept of Psychiatry Child Psychiatry
3101 Parnassus St Room 602
Honolulu, HI 96826
808 973-8375

Length: 2 Year(s)  Total Positions: 6
Program ID: 405-14-01-429

**Tripler AMC**

**Tripler Army Medical Center Program**

Tripler Army Medical Center
Kahi Mahala Hospital

Program Director:
Bernard J Lee, MD
Tripler Army Medical Center Child Psychiatry Serv
HIDKSC
Honolulu, HI 96850
808 435-4418

Length: 2 Year(s)  Total Positions: 4
Program ID: 405-14-11-148

**Illinois**

**Chicago**

**McGaw Medical Center of Northwestern University Program**

Northwestern University Medical School
Children's Memorial Medical Center
Northwestern Memorial Hospital

Program Director:
Carrie E Sylvester, MD MPH
Children's Memorial Medical Center
5300 Children's Plaza #10
Chicago, IL 60614-3394
312 890-4830

Length: 2 Year(s)  Total Positions: 4
Program ID: 405-16-21-035

**Rush-Presbyterian-St Luke's Medical Center Program**

Rush-Presbyterian-St Luke's Medical Center

Program Director:
Margery B Johnson, MD
Rush-Presbyterian-St Luke's Medical Center
Section of Child Psychiatry
1738 W Polk St
Chicago, IL 60612
312 942-5000

Length: 2 Year(s)  Total Positions: 4
Program ID: 405-16-21-153

**University of Chicago Program**

University of Chicago Hospitals
HCA Chicago Lakeshore Hospital

Program Director:
Kathleen M Kelley, MD
University of Chicago Hospitals
5841 S Maryland Ave
MC0797
Chicago, IL 60637-1470
312 722-8210

Length: 2 Year(s)  Total Positions: 6
Program ID: 405-16-21-034

**University of Illinois College of Medicine at Chicago Program**

University of Illinois College of Medicine at Chicago

Program Director:
Geoff Fox, MD
Dept of Psychiatry (M/C 913)
University of Illinois at Chicago
912 S Wood St
Chicago, IL 60612
312 559-7721

Length: 2 Year(s)  Total Positions: 8
Program ID: 405-16-21-030

**Iowa**

**Iowa City**

University of Iowa Hospitals and Clinics Program

University of Iowa Hospitals and Clinics
Program Director:
Samuel Kupperman, MD
University of Iowa Hospitals and Clinics
Dept of Psychiatry
300 Hawkins Dr
Iowa City, IA 52242-1567
319 356-1482

Length: 2 Year(s)  Total Positions: 6
Program ID: 405-16-11-009

**Kansas**

**Kansas City**

University of Kansas Medical Center Program
University of Kansas School of Medicine
University of Kansas Medical Center
Program Director:
Harold M Erickson Jr, MD
University of Kansas Medical Center
Dept of Child Psychiatry
3901 Rainbow Blvd
Kansas City, KS 66160-7341
913 588-0407

Length: 2 Year(s)  Total Positions: 4
Program ID: 405-19-11-040

**Topeka**

**Menninger School of Psychiatry Program**
Menninger Clinic
C P Menninger Memorial Hospital
Program Director:
Audra A Koonta, MD
Children's Hospital-Menninger Foundation
PO Box 828
Topeka, KS 66601
713 572-7560

Length: 2 Year(s)  Total Positions: 8
Program ID: 405-19-22-041

**Kentucky**

**Lexington**

University of Kentucky Medical Center Program
University Hospital-Albert B Chandler Medical Center
Chartier Ridge Hospital
Program Director:
Robert G Aug, MD
University of Kentucky Medical Center
Dept of Psychiatry
UKMC Annex 2 3m 214
Lexington, KY 40536-0800
606 268-2285

Length: 2 Year(s)  Total Positions: 4
Program ID: 405-20-21-043

*Updated information not provided.*
Louisville
University of Louisville Program
University of Louisville School of Medicine
Child Psychiatric Services (Bingham Child Guidance Clinic)
Kosair Children’s Hospital (Alliant Health System)
Program Director: Mohamad Shafi, MD
Div of Child and Adolescent Psychiatry
Bingham Child Guidance Center
200 E Chestnut St
Louisville, KY 40202
502 852-8921
Length: 2 Year(s)  Total Positions: 4
Program ID: 405-20-21-043

Louisiana
New Orleans
Louisiana State University Program
Louisiana State University School of Medicine
Medical Center of Louisiana at New Orleans-LSU Division
Program Director: William M Easton, MD
Louisiana State University Medical School at New Orleans
1542 Tulane Ave
New Orleans, LA 70112-2822
504 568-6001
Length: 2 Year(s)  Total Positions: 6
Program ID: 405-21-21-159

Tulane University Program
Tulane University School of Medicine
Tulane University Hospital and Clinics
Program Director: Marc A Forman, MD
Tulane University School of Medicine
1430 Tulane Ave
New Orleans, LA 70112-2699
504 588-5491
Length: 2 Year(s)  Total Positions: 6
Program ID: 405-21-21-045

Maine
Portland
Maine Medical Center Program
Maine Medical Center
Jackson Brook Institute
Program Director: Peter E Goldfine, MD
Maine Medical Center
22 Bramhall St
Portland, ME 04102
207 871-2160
Length: 2 Year(s)  Total Positions: 4
Program ID: 405-22-11-046

Maryland
Baltimore
Johns Hopkins University Program
Johns Hopkins University School of Medicine
Johns Hopkins Hospital
Program Director: John T Wallkop, MD
Children’s Medical Surgical Center
Johns Hopkins Hosp Bldg 345
Baltimore, MD 21287-3325
410 955-7874
Length: 2 Year(s)  Total Positions: 12
Program ID: 405-23-11-047

University of Maryland Program
University of Maryland Medical System
Sheppard and Enoch Pratt Hospital
Program Director: Richard Sutts, MD
Div of Child and Adolescent Psychiatry
Inst of Psychiatry & Human Behavior
645 W Redwood St
Baltimore, MD 21201-1547
410 328-5522
Length: 2 Year(s)  Total Positions: 10
Program ID: 405-23-21-048

Massachusetts
Boston
Boston University Program*
Boston City Hospital
Charles River Hospital
Somerville Hospital
Program Director: Jonathan N Bass, MD
Dept of Child Psychiatry Dowling 1 North
Boston City Hospital
818 Harrison Ave
Boston, MA 02118
617 584-5490
Length: 2 Year(s)  Program ID: 405-24-21-052

Children’s Hospital/Judge Baker Guidance Center Program*
Children’s Hospital
Judge Baker Guidance Center
Massachusetts Mental Health Center
Program Director: Stuart J Goldman, MD
Children’s Hospital
Judge Baker Children’s Center
265 Longwood Ave
Boston, MA 02115
617 292-8990
Length: 2 Year(s)  Total Positions: 10
Program ID: 405-24-21-053

Harvard Medical School Program
Massachusetts General Hospital
McLean Hospital
Program Director: Eugene V Berstein, MD
Massachusetts General Hospital
Dept of Psychiatry Building 4
55 Fruit St
Boston, MA 02114
617 726-8671
Length: 2 Year(s)  Total Positions: 12
Program ID: 405-24-21-167

New England Medical Center Hospitals Program
New England Medical Center Hospitals
Program Director: Joseph J Jankowski, MD
New England Medical Center
750 Washington St Box 38
Boston, MA 02111
617 635-5358
Length: 2 Year(s)  Total Positions: 3
Program ID: 405-24-21-056

Cambridge
Cambridge Hospital Program
Cambridge Hospital
New England Memorial Hospital
Program Director: Timothy F Dugan, MD
The Cambridge Hospital
Dept of Psychiatry
1493 Cambridge St
Cambridge, MA 02139
617 498-1216
Length: 2 Year(s)  Total Positions: 10
Program ID: 405-24-21-067

Worcester
University of Massachusetts Medical Center Program*
University of Massachusetts Medical Center
Program Director: W Peter Metz, MD
University of Massachusetts Medical Center
55 Lake Ave N 7th Fl
Worcester, MA 01655
508 856-5956
Length: 2 Year(s)  Total Positions: 4
Program ID: 405-24-21-158

Michigan
Ann Arbor
University of Michigan Program
University of Michigan Hospitals
Program Director: James E Dillon, MD
Child & Adolescent Psychiatric Hosp
1600 E Medical Center Dr
3817TMCB000
Ann Arbor, MI 48109-0300
313 764-0245
Length: 2 Year(s)  Total Positions: 12
Program ID: 405-25-11-069

Detroit
Wayne State University/Fairlawn Center Program
Wayne State University School of Medicine
Fairlawn Center
Program Director: William P Clark, MD
Fairlawn Center
140 Elizabeth Lake Rd
Pontiac, MI 48341
313 329-0361
Length: 2 Year(s)  Total Positions: 12
Program ID: 405-25-11-064

* Updated information not provided.
Wayne State University/Hawthorn Center Hospital Program
Wayne State University School of Medicine Hawthorn Center Hospital
Program Director: Thomas W. Udde, MD
9B University Health Center
4201 St Antoine
Detroit, MI 48201
313-577-1868
Length: 2 Year(s) Total Positions: 8
Program ID: 406-28-4-063

Minnesota
Minneapolis
University of Minnesota Program
University of Minnesota Medical School
University of Minnesota Hospital and Clinic
Program Director: Jonathan B. Jensen, MD
David Clinic, MD
University of Minnesota Medical School
Box 85 UMHC
440 Delaware St SE
Minneapolis, MN 55455
612-844-8777
Length: 2 Year(s) Total Positions: 8
Program ID: 406-28-4-066

Rochester
Mayo Graduate School of Medicine Program
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Rochester)
Rochester Methodist Hospital
St Mary's Hospital of Rochester
Program Director: Edmund Nieder, DO
MNSM Administration Office
Mayo Graduate School of Medicine
200 First St SW
Rochester, MN 55905
507-266-3365
Length: 2 Year(s) Total Positions: 6
Program ID: 406-28-4-067

Mississippi
Jackson
University of Mississippi Medical Center Program
University of Mississippi School of Medicine University Hospital
Program Director: Peter Dorrsett, MD
Univ of Mississippi Medical Center
2500 N State St
Jackson, MS 39216
601-844-5280
Length: 2 Year(s)
Program ID: 406-27-4-149

Missouri
Columbia
University of Missouri-Columbia Program
University of Missouri-Columbia School of Medicine
Charter Hospital of Columbia
Mid-Missouri Mental Health Center
Riverside Hospital and Counseling Center
University and Children's Hospital
Program Director: Anshad Hussain, MD
Mid-Missouri Mental Health Center
Three Hospital Dr
Columbia, MO 65201
314-882-3176
Length: 2 Year(s) Total Positions: 5
Program ID: 406-28-4-066

New Hampshire
Lebanon
Dartmouth-Hitchcock Medical Center Program
Mary Hitchcock Memorial Hospital
Brattleboro Retreat
Program Director: Robert J Racusin, MD
Dartmouth-Hitchcock Medical Center
One Medical Center Dr
Lebanon, NH 03756-0001
603-650-5535
Length: 2 Year(s) Total Positions: 4
Program ID: 406-28-4-073

New Jersey
Newark
UMDNJ-New Jersey Medical School Program
UMDNJ-New Jersey Medical School
UMDNJ-Community Mental Health Center of Newark
UMDNJ University Hospital
Program Director: Adrian Sondheimer, MD
UMDNJ-New Jersey Medical School
Child and Adolescent Psychiatry
215 S Orange Ave
Newark, NJ 07103-3700
201-999-4254
Length: 2 Year(s) Total Positions: 4
Program ID: 406-28-4-150

Piscataway
UMDNJ-Robert Wood Johnson Medical School Program
UMDNJ-Robert Wood Johnson Medical School Robert Wood Johnson University Hospital
UMDNJ-Community Mental Health Center at Piscataway
Program Director: Harris S Goldstein, MD DMedSc
UMDNJ-Robert Wood Johnson
675 Hoes Ln
Piscataway, NJ 08854-6036
908-235-4416
Length: 2 Year(s) Total Positions: 4
Program ID: 406-28-4-174

Nebraska
Omaha
Creighton University/University of Nebraska Program
Creighton/Nebraska University Health Foundation
AMT St Joseph Center for Mental Health
Program Director: Shashi K Bhatia, MD
Creighton-Nebraska Combined Dept of Psychiatry
819 Dorrance St
Omaha, NE 68108
402-449-6047
Length: 2 Year(s) Total Positions: 6
Program ID: 406-39-4-071

New Mexico
Albuquerque
University of New Mexico Program
University of New Mexico School of Medicine
Univ of New Mexico Children's Psychiatric Hospital
Program Director: Robert L Hendren, D9
University of New Mexico School of Medicine
2400 Tucker NE
Albuquerque, NM 87103
505-277-4002
Length: 2 Year(s) Total Positions: 8
Program ID: 406-24-4-214

* Updated information not provided.

322 Graduate Medical Education Directory
**New York**

**Bronx**

**Albert Einstein College of Medicine Program**
Albert Einstein College of Medicine of Yeshiva University
Bronx Children's Psychiatric Center
Bronx Municipal Hospital Center
Montefiore Medical Center-Henry and Lucy Moses Division

Program Director:
Edward Spering, MD
Bronx Municipal Hosp Ctr
Nurses Residence-SNT
Pulham Pkwy/Eastchester Rd
Bronx, NY 10461
718 818-3888

Length: 2 Year(s)  Total Positions: 10  Program Id: 405-35-21-077

**Brooklyn**

**Brookdale Hospital Medical Center Program**
Brookdale Hospital Medical Center

Program Director:
Manuel S Ibañez, MD
Brookdale Hospital Medical Center
Linden Blvd & Brookdale Plaza
Brooklyn, NY 11212
718 246-5997

Length: 2 Year(s)  Total Positions: 6  Program Id: 405-35-31-078

**SUNY Health Science Center at Brooklyn Program**
SUNY HSC at Brooklyn College of Medicine
Kings County Hospital Center
University Hospital-SUNY Health Science Center at Brooklyn

Program Director:
Lenore Engel, MD
Kings County Hospital Center
Child & Adolescent Psychiatry
451 Clarkson Ave
Brooklyn, NY 11203
718 770-1431

Length: 2 Year(s)  Total Positions: 6  Program Id: 405-35-31-094

**Buffalo**

**SUNY at Buffalo Graduate Medical-Dental Education Consortium Program**
SUNY at Buffalo Grad Medical-Dental Education Consortium
Children's Hospital of Buffalo
SUNY at Buffalo School of Medicine
Western New York Children's Psychiatric Center

Program Director:
David Kaye, MD
Children's Hospital of Buffalo
Div of Child/Adolescent Psychiatry
566 Franklin St
Buffalo, NY 14202
716 895-7111
Length: 2 Year(s)  Total Positions: 4  Program Id: 405-35-21-161

**Manhasset**

**North Shore University Hospital Program**
North Shore University Hospital

Program Director:
Victor M Fornari, MD
North Shore University Hospital
Dept of Psychiatry
Manhasset, NY 11030
616 662-3065

Length: 2 Year(s)  Total Positions: 6  Program Id: 405-35-11-076

**New Hyde Park**

**Albert Einstein College of Medicine at Long Island Jewish Medical Center Program**
Long Island Jewish Medical Center
Schneider Children's Hosp (Long Island Jewish Med Ctr)

Program Director:
Carmel A Foley, MD
Long Island Jewish Medical Center
Schneider Children's Hospital
269 01 76th Ave
New Hyde Park, NY 11042
718 470-3550

Length: 2 Year(s)  Total Positions: 10  Program Id: 405-35-35-11-082

**New York**

**Columbia University Program**
Presbyterian Hospital in the city of New York
New York State Psychiatric Institute

Program Director:
Clarice J Kestenbaum, MD
New York State Psychiatric Institute
722 W 168th St
New York, NY 10032
212 960-2323

Length: 2 Year(s)  Total Positions: 15  Program Id: 405-35-11-080

**Harlem Hospital Center Program**
Harlem Hospital Center
Rockland Children's Psychiatric Center

Program Director:
Sady Sultan, MD
Harlem Hospital Center
506 Lenox Ave
New York, NY 10032
212 938-3367

Length: 2 Year(s)  Program Id: 405-35-21-081

**Mount Sinai School of Medicine (Emirhurst) Program**
Mount Sinai School of Medicine
Emirhurst Hospital Center-Mount Sinai Services

Program Director:
Ruth Pach, MD
Emirhurst Hospital Center-Mount Sinai Services
79-01 Broadway
Emirhurst, NY 11373
718 334-3538

Length: 2 Year(s)  Total Positions: 8  Program Id: 405-35-11-079

**Mount Sinai School of Medicine Program**
Mount Sinai School of Medicine
Mount Sinai Medical Center

Program Director:
Jeffrey H Newcorn, MD
Mount Sinai Hospital
One Gustave L Levy Pl
Box 1268
New York, NY 10029
212 241-6208

Length: 2 Year(s)  Total Positions: 8  Program Id: 405-35-11-085

**New York Hospital-Westchester Division/Cornell Medical Center Program**
New York Hospital
New York Hospital-Westchester Division

Program Director:
Paulina F Kernberg, MD
New York Hospital-Cornell Medical Center-Westchester Div
21 Bloomingdale Rd
White Plains, NY 10605
914 997-0601

Length: 2 Year(s)  Total Positions: 6  Program Id: 405-35-21-098

**New York Hospital/Cornell Medical Center Program**
New York Hospital-Payne Whitney Psychiatric Clinic

Program Director:
Theodore Shapiro, MD
New York Hospital
525 E 68th St Box 147
New York, NY 10021
212 822-9774

Length: 2 Year(s)  Total Positions: 8  Program Id: 405-35-11-096

**New York University Medical Center Program**
New York University Medical Center
Bellevue Hospital Center

Program Director:
Paul Pomerantz, MD
New York University Medical Center
500 First Ave
New York, NY 10016
212 263-8123

Length: 2 Year(s)  Total Positions: 9  Program Id: 405-35-21-098

**St Luke's-Roosevelt Hospital Center Program**
St Luke's-Roosevelt Hospital Center
Mount Sinai Medical Center
St Luke's-Roosevelt Hospital Center-Roosevelt Division
St Luke's-Roosevelt Hospital Center-St Luke's Division

Program Director:
Leo L Kron, MD
Amsterdam Ave at 114th St
New York, NY 10025
212 533-3062

Length: 2 Year(s)  Total Positions: 6  Program Id: 405-35-31-186

**Rochester**

**University of Rochester Program**
Strong Memorial Hospital of the University of Rochester
Rochester Psychiatric Center

Program Director:
Stephen W Munson, MD
University of Rochester Medical Center
300 Crittenden Blvd
Rochester, NY 14642-8409
716 275-3137

Length: 2 Year(s)  Total Positions: 10  Program Id: 405-35-11-095

* Updated information not provided.

Graduate Medical Education Directory 323
Accredited Programs in Child and Adolescent Psychiatry (Psychiatry)

Stony Brook
SUNY at Stony Brook Program
University Hospital-SUNY at Stony Brook
Program Director:
Judith A. Crowell, MD
Dept of Psychiatry
Div of Child Psychiatry
Health Sciences Center E10
Stony Brook, NY 11794-8790
631 632-9640
Length: 2 Year(s) Total Positions: 6
Program ID: 406-35-21-158

Valhalla
New York Medical College (Metropolitan) Program
New York Medical College
Metropolitan Hospital Center
Program Director:
Yolette G. Jackson, MD
Metropolitan Hospital Center
Div of Child & Adolescent Psych
1901 First Ave Rm 4M14
New York, NY 10021
212 730-7900
Length: 2 Year(s) Total Positions: 5
Program ID: 406-35-11-13

New York Medical College at St Vincent's Hospital and Medical Center of New York Program
New York Medical College
St Vincent's Hospital and Medical Center of New York
Program Director:
Reese A. Bohn, MD
St Vincent's Hospital and Medical Center of New York
200 W 12th St O'Toole 5
New York, NY 10011
212 604-8213
Length: 2 Year(s) Total Positions: 6
Program ID: 406-35-22-253

New York Medical College at Westchester County Medical Center Program
New York Medical College
Westchester County Medical Center
Program Director:
Heather C. Schall, MD
Westchester County Medical Center
Div of Child/Adolescent Psychiatry
Psychiatric Invest B102
Valhalla, NY 10595
914 995-8200
Length: 2 Year(s) Total Positions: 6
Program ID: 406-35-21-109

North Carolina
Chapel Hill
University of North Carolina Hospitals Program
University of North Carolina Hospitals
Dorothea Dix Hospital
Program Director:
J. Artis Stoffel, MD
University of North Carolina
Dept of Psychiatry
CB# 7166 Medical Wing C Rm 246
Chapel Hill, NC 27599-7160
919 966-2217
Length: 2 Year(s) Total Positions: 10
Program ID: 406-35-21-100

Durham
Duke University Program
Duke University Medical Center
John Umstead Hospital
Program Director:
Charles Keith, MD
Div of Child and Adolescent Psychiatry
Box 2096
Duke University Medical Center
Durham, NC 27710
919 684-3144
Length: 2 Year(s) Total Positions: 10
Program ID: 406-36-31-101

Greenville
East Carolina University Program
East Carolina University School of Medicine
Cherry Hospital
Pitt County Mental Health-Mental Retardation and Sub Abuse Ctr
Pitt County Memorial Hospital
Program Director:
John M. Diamond, MD
Department of Psychiatry
East Carolina Univ School of Med
Greenville, NC 27834-4154
919 758-2613
Length: 2 Year(s) Total Positions: 6
Program ID: 406-35-21-162

Winston-Salem
Bowman Gray School of Medicine Program*
North Carolina Baptist Hospital
 Forsyth Memorial Hospital
Program Director:
Richard W. Brunsfeind, MD
Dept of Psychiatry and Behavioral Medicine
Medical Center Blvd
Winston-Salem, NC 27157-1097
919 745-6444
Length: 2 Year(s) Total Positions: 4
Program ID: 406-36-31-193

Ohio
Cincinnati
University of Cincinnati Hospital Group Program
University of Cincinnati Hospital
Children's Hospital Medical Center
Program Director:
Bryan J. Clevenger, MD
Univ of Cincinnati Coll of Medicine
Dept of Psychiatry
231 Bethesda Ave
Cincinnati, OH 45267-0559
513 636-8188
Length: 2 Year(s) Total Positions: 6
Program ID: 406-38-21-102

Cleveland
Case Western Reserve University Program
University Hospitals of Cleveland
Program Director:
Judith W. Dodi, MD
Case Western Reserve University
Div of Child & Adolescent Psych
11100 Euclid Ave
Cleveland, OH 44106
216 844-3249
Length: 2 Year(s) Total Positions: 6
Program ID: 406-38-11-104

Columbus
Ohio State University Program
Ohio State University Medical Center
Program Director:
Elizabeth B. Weiler, MD
Dept of Psychiatry
Child & Adolescent Div
1670 Upshur Dr Ste 560
Columbus, OH 43210-1250
614 293-8520
Length: 2 Year(s) Total Positions: 4
Program ID: 406-38-21-104

Dayton
Wright State University Program
Wright State University School of Medicine
Children's Medical Center
Good Samaritan Hospital and Health Center
St Elizabeth Medical Center
Program Director:
William M. Rhykio, MD
Div of Child & Adolescent Psychiatry
Wright State Univ School of Med
PO Box 927
Dayton, OH 45401-0927
937 276-3820
Length: 2 Year(s) Total Positions: 3
Program ID: 406-38-21-169

Toledo
Medical College of Ohio at Toledo Program
Medical College of Ohio Hospital
Program Director:
Charles W. Forrester, MD
Medical College of Ohio
PO Box 10008
Toledo, OH 43699-0008
419 531-3913
Length: 2 Year(s) Total Positions: 4
Program ID: 406-38-11-106

* Updated information not provided.

324 Graduate Medical Education Directory
Oklahoma

Oklahoma City

University of Oklahoma Health Sciences Center Program*
University of Oklahoma College of Medicine-Oklahoma City
Children's Hospital of Oklahoma

Program Director: James B. Allen, MD
OU Health Sciences Center
PO Box 25961 ESP-136
Oklahoma City, OK 73190-3048
405-271-4210

Length: 2 Year(s) Total Positions: 8
Program ID: 405-38-11-106

MCPHU/Hahnemann University Hospital Program

Hahnemann University Hospital

Program Director: John L. Fray, MD
Hahnemann Hospital
1427 Vine St 8th Fl
MS #650
Philadelphia, PA 19102-1102
215-762-8770

Length: 2 Year(s) Total Positions: 8
Program ID: 405-41-31-109

MCPHU/Medical College of Pennsylvania Hospital Program

Medical College of Pennsylvania Hospital

Program Director: Harris Rubinowitz, MD
Eastern Pennsylvania Psychiatric Inst
Hevy Ave and Abbotford Rd
Philadelphia, PA 19120
215-942-4429

Length: 2 Year(s) Total Positions: 8
Program ID: 405-41-31-110

Philadelphia Child Guidance Center Program

Philadelphia Child Guidance Center

Program Director: John Sargent, MD
Philadelphia Child Guidance Center
34th St and Civic Center Blvd
Philadelphia, PA 19104
215-344-8749

Length: 2 Year(s) Total Positions: 10
Program ID: 405-41-31-111

Thomas Jefferson University Program*

Thomas Jefferson University Hospital

Program Director: Gail A. Kedelioh, MD
Thomas Jefferson University Hospital
1201 Chestnut St #5101
Philadelphia, PA 19107
215-882-8180

Length: 2 Year(s) Total Positions: 4
Program ID: 405-41-31-113

Pittsburgh

University Health Center of Pittsburgh Program

University Health Center of Pittsburgh Presbyterian-University Hospital/UPMC
Western Psychiatric Institute and Clinic/UPMC

Program Director: Neal D Ryan, MD
Western Psychiatric Institute
3811 O'Hara St
Pittsburgh, PA 15213-2585
412-624-2676

Length: 2 Year(s) Total Positions: 36
Program ID: 405-41-31-114

Puerto Rico

San Juan

University of Puerto Rico Program

University of Puerto Rico School of Medicine

Program Director: Sarah Huertas-Dolman, MD
Dept of Psychiatry
09 Box 00067
San Juan, PR 00936
300-758-2525

Length: 2 Year(s) Total Positions: 4
Program ID: 405-45-31-116

Rhode Island

Providence

Brown University Program*

Brown University Hospital
Emma Pendleton Bradley Hospital

Program Director: Charles L Malone, MD
Thomas P Sanders, MD
Emma Pendleton Bradley Hospital
1011 Veterans Memorial Pkwy
East Providence, RI 02915
401-454-6460

Length: 2 Year(s) Total Positions: 11
Program ID: 405-45-31-117

South Carolina

Charleston

Medical University of South Carolina Program

Medical University of South Carolina College of Medicine
MUSC Medical Center

Program Director: Donald J Carrel, MD
Medical University Hospital
171 Ashley Ave
Charleston, SC 29425-0742
803-792-3951

Length: 2 Year(s) Total Positions: 14
Program ID: 405-45-31-118

Columbia

William S Hall Psychiatric Institute-University of South Carolina School of Medicine Program

William S Hall Psychiatric Inst-Univ of South Carolina Sch of Med

Program Director: Steven P Cuffe, MD
William S Hall Psychiatric Institute
1800 Colonial Dr
PO Box 202
Columbia, SC 29692
803-774-7267

Length: 2 Year(s) Total Positions: 8
Program ID: 405-45-31-119

* Updated information not provided.
South Dakota

Sioux Falls

University of South Dakota Program
University of South Dakota School of Medicine
Charter Hospital of Sioux Falls
Sioux Valley Hospital

Program Director:
Jessica Centerfield, MD
Department of Psychiatry
USD School of Medicine
800 E 21st St
Sioux Falls, SD 57101
605-355-2889

Length: 2 Year(s)  Total Positions: 4
Program ID: 405-48-21-164

Tennessee

Memphis

University of Tennessee Program
University of Tennessee College of Medicine
LeBonheur Children’s Medical Center
St. Joseph Hospital
University of Tennessee Medical Center

Program Director:
David Pruitt, MD
Univ of Tennessee Memphis
711 Jefferson St Ste 137
Memphis, TN 38163
901-448-5944

Length: 2 Year(s)  Total Positions: 4
Program ID: 405-47-21-120

Nashville

Vanderbilt University Program*
Vanderbilt University Medical Center
Vanderbilt Child and Adolescent Psychiatric Hospital

Program Director:
Barry Nunombe, MD
Vanderbilt University Hospital
1601 22nd Ave S
Nashville, TN 37212-8645
615-343-7009

Length: 2 Year(s)  Total Positions: 4
Program ID: 405-47-21-121

Texas

Austin

Austin State Hospital Program
Austin State Hospital
Brackenridge Hospital

Program Director:
Bevery J Sutton, MD
Austin Psychiatric Center
411 Guadalupe
Austin, TX 78701-4286
512-511-6814

Length: 2 Year(s)  Total Positions: 6
Program ID: 405-48-12-122

Dallas

Timberlawn Psychiatric Hospital Program*
Timberlawn Psychiatric Hospital

Program Director:
Larry G Shadid, MD
Timberlawn Psychiatric Hospital
4500 S Bummed Blvd
Dallas, TX 75216-6827
214-331-7181

Length: 2 Year(s)  Total Positions: 7
Program ID: 405-48-21-161

University of Texas Southwestern Medical School Program
University of Texas Southwestern Medical School
Children’s Medical Center of Dallas
Dallas County Hospital District-Parkland Memorial Hospital

Program Director:
Gail S Alexander, MD
University of Texas Southwestern Medical School
5323 Harry Hines Blvd
Dallas, TX 75390-0088
214-648-5300

Length: 2 Year(s)  Total Positions: 8
Program ID: 405-48-21-123

Galveston

University of Texas Medical Branch Hospitals Program
University of Texas Medical Branch Hospitals

Program Director:
Christopher Thomas, MD
Div of Child and Adolescent Psychiatry
Univ of Texas Medical Branch
Galveston, TX 77555-0425
409-772-1055

Length: 2 Year(s)  Total Positions: 8
Program ID: 405-48-11-124

San Antonio

University of Texas Health Science Center at San Antonio Program
University of Texas Medical School at San Antonio
Community Guidance Center of Bexar County
Southwest Neuropsychiatric Institute

Program Director:
Kenneth L. Matthews, MD
University of Texas Health Science Center
Dep of Psychiatry-Child/Adolescent
7703 Floyd Curl Dr
San Antonio, TX 78284-7792
210-397-5455

Length: 2 Year(s)  Total Positions: 8
Program ID: 405-48-21-125

Utah

Salt Lake City

University of Utah Program
University of Utah Medical Center
Children’s Center
Primary Children’s Medical Center
Valley Mental Health

Program Director:
Grant L. Burgert, MD
University of Utah School of Medicine
50 N Medical Dr
Salt Lake City, UT 84132
801-581-5006

Length: 2 Year(s)  Total Positions: 6
Program ID: 405-49-21-127

Virginia

Charlottesville

University of Virginia Program
University of Virginia Medical Center
DeJarv L. Birr Center

Program Director:
John J. Broderick-Cantwell, MD
University of Virginia Medical Center
Outpatient Psychiatric Serv
Blue Ridge Hospital 61215
Charlottesville, VA 22901
804-924-2251

Length: 2 Year(s)  Total Positions: 4
Program ID: 405-61-11-138

Richmond

Medical College of Virginia/Virginia Commonwealth University Program
Medical College of Virginia/Virginia Commonwealth University
MCV-Virginia Treatment Center for Children
Medical College of Virginia Hospitals

Program Director:
Aradhas Sood, MD
MCV/Virginia Commonwealth Univ
PO Box 800889
Richmond, VA 23298-0889
804-898-4088

Length: 2 Year(s)  Total Positions: 4
Program ID: 405-61-11-131

*Updated information not provided.
Washington
Seattle
University of Washington Program
University of Washington School of Medicine
Children's Hospital and Medical Center
University of Washington Medical Center
Program Director: Christopher K Varley, MD
Children's Hosp & Med Ctr
PO Box C-6417
4800 Sand Point Way NE
Seattle, WA 98105-6071
206 667-6949
Length: 2 Year(s) Total Positions: 8
Program Id: 406-64-21-132

West Virginia
Charleston
West Virginia University (Charleston Division) Program
Charleston Area Medical Center
Program Director: Peter B Edelman, MD
Child & Adolescent Psychiatry/Dept. of Behavioral Medicine
Robert C. Byrd HSC/VU/Charleston
PO Box 1647
Charleston, WV 25326
304 341-1000
Length: 2 Year(s) Total Positions: 4
Program Id: 406-55-21-170

Wisconsin
Madison
University of Wisconsin Program
University of Wisconsin Hospital and Clinics
HICA Psychiatry Hospital
Mental Health Institute
Program Director: Hugh P Johnston, MD
Univ Wisconsin Med Sch
Dep of Psychiatry
500 Highland Ave
Madison, WI 53792-2475
608 263-6084
Length: 2 Year(s) Total Positions: 6
Program Id: 406-56-21-134

Milwaukee
Medical College of Wisconsin Program
Medical College of Wisconsin Affiliated Hospitals Inc
Children's Hospital of Wisconsin
Milwaukee Psychiatric Hospital-Deevey Center
Program Director: Anthony D Meyers, MD
Milwaukee Psychiatric Hospital
1220 Devey Ave
Waukesha, WI 53186
414 449-5610
Length: 2 Year(s) Total Positions: 5
Program Id: 406-56-21-135

Child Neurology (Neurology)

Alaska

Arizona
Phoenix
Barrow Neurological Institute of St Joseph's Hospital and Medical Center Program
Barrow Neurological Institute of St Joseph's Hosp & Med Ctr
Program Director: Stanley D Johnson, MD
Barrow Neurological Institute
St Joseph's Hospital and Med Ctr
PO Box 2071
Phoenix, AZ 85001-2071
602 406-6310
Length: 3 Year(s) Total Positions: 3
Program Id: 185-01-21-024

California

Los Angeles

Loma Linda
Loma Linda University Program
Loma Linda University Medical Center
Program Director: Stephen Jha, MD
Loma Linda University School of Medicine
Div of Child Neurology
11525 Campus St West Hall B154
Loma Linda, CA 92354
909 824-0600
Length: 3 Year(s) Total Positions: 2
Program Id: 185-05-21-076

Sacramento

San Diego

UCLA Medical Center Program*
UCLA School of Medicine
UCLA Medical Center
Program Director: W Donald Shields, MD
UCLA Sch of Med
Div of Pediatric Neurology
Los Angeles, CA 90024-1792
310 825-8836
Length: 3 Year(s) Total Positions: 3
Program Id: 185-05-21-062

University of Southern California Program*
Los Angeles CountyUSC Medical Center
Children's Hospital of Los Angeles
Program Director: O Carrier Sneed, MD
University of Southern California School of Medicine
Children's Hospital of Los Angeles
PO Box 64700
Los Angeles, CA 90045-0700
213 638-4206
Length: 3 Year(s) Total Positions: 3
Program Id: 185-05-21-065

University of California (Irvine) Program*
University of California (Irvine) Medical Center
Program Director: Jra T Lott, MD
University of California Irvine Medical Center 212 City Dr S
Orange, CA 92866
714 455-5794
Length: 3 Year(s) Total Positions: 1
Program Id: 185-05-21-066

University of California (Davis) Program
University of California (Davis) Medical Center
Program Director: Sidney M Gopee Jr, MD PhD
Dep of Neurology
University of California Davis
3333 Stantoon Blvd
Sacramento, CA 95817
916 734-3523
Length: 3 Year(s) Total Positions: 1
Program Id: 185-05-21-082

University of California (San Diego) Program*
University of California (San Diego) Medical Center
Children's Hospital and Health Center
Veterans Affairs Medical Center (San Diego)
Program Director: Doris A Treasure, MD
University of California San Diego Medical Center
200 W Arbor Dr
San Diego, CA 92103-8467
619 544-4640
Length: 3 Year(s) Total Positions: 1
Program Id: 185-05-21-020

* Updated information not provided.
San Francisco
University of California (San Francisco)
Program
University of California (San Francisco) School of Medicine
San Francisco General Hospital Medical Center
University of California (San Francisco) Medical Center
Veterans Affairs Medical Center (San Francisco)
Program Director:
William G Mobley, MD PhD
Univ of California San Francisco Med Ctr
Dept of Neurolog
606 Pamunke Ave 4-704
San Francisco, CA 94143-0114
415 476-5969
Length: 3 Year(s) Total Positions: 3
Program ID: 185-05-21-046

Stanford
Stanford University Program
Stanford University Hospital
Santa Clara Valley Medical Center
Veterans Affairs Medical Center (Palo Alto)
Program Director:
Jim S Haehn, MD
Stanford University Medical Center
Dept of Child Neurology
Room 9-3160
Stanford, CA 94305-5255
415 725-0641
Length: 3 Year(s) Total Positions: 3
Program ID: 185-05-21-061

Torrance
Los Angeles County-Harbor-UCLA Medical Center Program
Los Angeles County-Harbor-UCLA Medical Center
Program Director:
Kenneth K Huff, MD
Harbor-UCLA Med Ctr
Dept of Pediatrics/Box 468
1000 W Carson St
Torrance, CA 90509
310 222-4169
Length: 3 Year(s) Total Positions: 3
Program ID: 185-05-21-017

Colorado
Denver
University of Colorado Program*
(University of Colorado Health Sciences Center Children’s Hospital
Program Director:
Alan R Seag, MD
University of Colorado School of Medicine Dept of Neurology
The Children’s Hospital
1056 E 18th Ave
Denver, CO 80218
303 394-8261
Length: 3 Year(s)
Program ID: 185-05-21-023

Georgia
Atlanta
Emory University Program
Emory University School of Medicine
Grady Memorial Hospital
Henepinva Hospital for Children
Program Director:
Nicolas S Krasnow, MD
Emory University School of Medicine
Div of Pediatric Neurology
2030 Edgewood Dr NE
Atlanta, GA 30322
404 727-5756
Length: 3 Year(s) Total Positions: 1
Program ID: 185-12-21-006

Augusta
Medical College of Georgia Program
Medical College of Georgia Hospital and Clinics
University Hospital
Veterans Affairs Medical Center (Augusta)
Program Director:
James B Carroll, MD
Section of Child Neurology
CJ 2103
Medical College of Georgia
Augusta, GA 30912-3255
706 721-3071
Length: 3 Year(s) Total Positions: 1
Program ID: 185-12-21-019

Illinois
Chicago
McGaw Medical Center of Northwestern University Program*
Northwestern University Medical School
Children’s Memorial Medical Center
Northwestern Memorial Hospital
Program Director:
Carolyn N Swisher, MD
Children’s Memorial Hospital
2300 Children’s Plaza
Chicago, IL 60614
312 996-3986
Length: 3 Year(s)
Program ID: 185-16-21-021

University of Chicago Program
University of Chicago Hospitals
Program Director:
Peter B Reutenlocher, MD
University of Chicago
Pediatrics & Neurology
5841 S Maryland McG06
Chicago, IL 60637-1470
312 755-5467
Length: 3 Year(s) Total Positions: 3
Program ID: 185-14-21-001

Maywood
Loyola University Program
Foster G McGaw Hospital-Loyola University of Chicago
Edward J Hines Jr Veterans Affairs Hospital
Program Director:
Steven B Coker, MD
Loyola University Stritch School of Medicine
Dept of Neurology
2160 S First Ave
Maywood, IL 60153
708 226-3407
Length: 3 Year(s) Total Positions: 1
Program ID: 185-12-21-045

* Updated information not provided.
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<th>City</th>
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<td>Indiana University Medical Center Program</td>
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<td>Shihwan P Garg, MD</td>
<td>8157577 702 Barnhill Dr Indiana, IN 46202-5200 317-274-1239</td>
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<td>William E Bell, MD</td>
<td>319-356-2383</td>
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<td>319-356-2383</td>
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<td>Kansas</td>
<td>University of Kansas Medical Center Program*</td>
<td>University of Kansas School of Medicine</td>
<td>Kansas City</td>
<td>Enrique Chavez-Carballo, MD</td>
<td>913-588-8371</td>
<td>3 Year(s)</td>
<td>2</td>
<td>Program ID: 186-19-21-073</td>
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<td>Kentucky</td>
<td>University of Louisville Program</td>
<td>University of Louisville</td>
<td>Louisville</td>
<td>David M. Reihman, MD</td>
<td>502-852-4800</td>
<td>3 Year(s)</td>
<td>3</td>
<td>Program ID: 186-20-21-040</td>
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<td>Louisiana</td>
<td>Louisiana State University Program</td>
<td>Louisiana State University School of Medicine</td>
<td>New Orleans</td>
<td>Margaret C Duncan, MD</td>
<td>504-588-4900</td>
<td>3 Year(s)</td>
<td>1</td>
<td>Program ID: 185-21-21-022</td>
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<td>Louisiana State University Program</td>
<td>Louisiana State University School of Medicine</td>
<td>New Orleans</td>
<td>Margaret C Duncan, MD</td>
<td>504-588-4900</td>
<td>3 Year(s)</td>
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<td>Program ID: 185-21-21-022</td>
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<td>New England Medical Center Hospitals Program</td>
<td>New England Medical Center Hospitals</td>
<td>Boston</td>
<td>R. G. Pasin, MD</td>
<td>617-795-5893</td>
<td>3 Year(s)</td>
<td>3</td>
<td>Program ID: 185-29-21-016</td>
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<td>Massachusetts</td>
<td>Harvard Medical School Program*</td>
<td>Children’s Hospital</td>
<td>Boston</td>
<td>John A. Bilezikian, MD</td>
<td>617-736-8385</td>
<td>3 Year(s)</td>
<td>3</td>
<td>Program ID: 186-24-21-061</td>
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<td>Massachusetts</td>
<td>Massachusetts General Hospital Program*</td>
<td>Massachusetts General Hospital</td>
<td>Boston</td>
<td>Joseph A. Bovbjerg, MD</td>
<td>617-736-8385</td>
<td>3 Year(s)</td>
<td>3</td>
<td>Program ID: 185-24-21-007</td>
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<td>Massachusetts</td>
<td>University of Massachusetts Medical Center Program*</td>
<td>University of Massachusetts Medical Center</td>
<td>Worcester</td>
<td>Israel A. Abramo, MD</td>
<td>508-856-3347</td>
<td>3 Year(s)</td>
<td>3</td>
<td>Program ID: 185-22-21-029</td>
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<td>Michigan</td>
<td>University of Michigan Program</td>
<td>University of Michigan Hospitals</td>
<td>Ann Arbor</td>
<td>Gihan I. Emre, MD</td>
<td>734-763-4397</td>
<td>3 Year(s)</td>
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<td>University of Michigan Program</td>
<td>University of Michigan Hospitals</td>
<td>Ann Arbor</td>
<td>Gihan I. Emre, MD</td>
<td>734-763-4397</td>
<td>3 Year(s)</td>
<td>2</td>
<td>Program ID: 185-25-21-030</td>
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* Updated information not provided.
Accredited Programs in Child Neurology (Neurology)

**New York**

**Bronx**

*Albert Einstein College of Medicine Program*

Albert Einstein College of Medicine of Yeshiva University
Bronx Municipal Hospital Center
Montefiore Medical Center-Henry and Lucy Moses Division
Montefiore Medical Center-Weiler Hospital
Program Director: Alfred J. Spiro, MD
Albert Einstein College of Medicine
1900 Morris Park Ave
Bronx, NY 10461
718 430-2923
Length: 3 Year(s) Total Positions: 6
Program ID: 185-35-21-002

**Brooklyn**

*SUNY Health Science Center at Brooklyn Program*

SUNY HSC at Brooklyn College of Medicine
Kings County Hospital Center
University Hospital-SUNY Health Science Center at Brooklyn
Program Director: Arthur L. Bose, MD
SUNY Health Science Center at Brooklyn
450 Clarkson Ave Box 118
Brooklyn, NY 11203-2086
718 270-2042
Length: 3 Year(s) Total Positions: 6
Program ID: 185-35-21-004

**West Virginia**

**Charleston**

*West Virginia University School of Medicine Program*

West Virginia University School of Medicine
Program Director: Michael R. Brannick, MD
West Virginia University Hospital
Charleston, WV 25314
304 696-3035
Length: 3 Year(s) Total Positions: 3
Program ID: 185-35-21-011

**Fresno**

*University of California, Davis Medical Center Program*

University of California, Davis Medical Center
Program Director: Stephen M. Hennessey, MD
University of California, Davis Medical Center
5000 X Street
Fresno, CA 93720
559 278-0400
Length: 3 Year(s) Total Positions: 6
Program ID: 185-35-21-056

**Los Angeles**

*University of California, Los Angeles (UCLA) School of Medicine Program*

University of California, Los Angeles (UCLA) School of Medicine
Program Director: Linda S. Berry, MD
University of California, Los Angeles (UCLA) School of Medicine
710-2801 Le Conte Ave
Los Angeles, CA 90095
310 825-7605
Length: 3 Year(s) Total Positions: 3
Program ID: 185-35-21-011

**New Haven**

*Yale University School of Medicine Program*

Yale University School of Medicine
Program Director: James R. Rapoport, MD
Yale University School of Medicine
333 Cedar St
New Haven, CT 06520
203 785-2306
Length: 3 Year(s) Total Positions: 3
Program ID: 185-35-21-011

**New York**

*Mount Sinai School of Medicine Program*

Mount Sinai School of Medicine
Mount Sinai Medical Center
Program Director: Alan M. Aron, MD
Mount Sinai School of Medicine
One Gustave L. Levy Pl
New York, NY 10029
212 853-4800
Length: 3 Year(s) Total Positions: 3
Program ID: 185-35-21-011

**Bloomington**

*Indiana University School of Medicine Program*

Indiana University School of Medicine
Program Director: Michael G. Greenberg, MD
Indiana University School of Medicine
733 East Tenth St
Bloomington, IN 47405
812 855-7702
Length: 3 Year(s) Total Positions: 3
Program ID: 185-35-21-011

**New York**

*New York Hospital/Cornell Medical Center Program*

New York Hospital
Program Director: Abe Chauhan, MD
Pediatric Neurology
525 E 68th St
New York, NY 10021
212 746-5276
Length: 3 Year(s) Total Positions: 3
Program ID: 185-35-21-011

**Long Island**

*University of Medicine and Dentistry of New Jersey Robert Wood Johnson Medical School Program*

University of Medicine and Dentistry of New Jersey Robert Wood Johnson Medical School
Program Director: Clifford N. Rosen, MD
University of Medicine and Dentistry of New Jersey Robert Wood Johnson Medical School
800 Hoes Lane
Piscataway, NJ 08854
732 235-9248
Length: 3 Year(s) Total Positions: 3
Program ID: 185-35-21-011

**Los Angeles**

*University of Southern California School of Medicine Program*

University of Southern California School of Medicine
Program Director: John P. O'Hare, MD
University of Southern California School of Medicine
10826 Le Conte Ave
Los Angeles, CA 90033
310 206-8420
Length: 3 Year(s) Total Positions: 3
Program ID: 185-35-21-011

**Buffalo**

*SUNY at Buffalo Graduate Medical-Dental Education Consortium Program*

SUNY at Buffalo Graduate Medical-Dental Education Consortium
Children's Hospital of Buffalo
Erie County Medical Center
Veterans Affairs Medical Center (Buffalo)
Program Director: Michael E. Cohen, MD
Children's Hospital of Buffalo
219 Bryant St
Buffalo, NY 14222
716 878-7468
Length: 3 Year(s) Total Positions: 3
Program ID: 185-35-21-011

**East Meadow**

*Nassau County Medical Center Program*

Nassau County Medical Center
Program Director: Gary N. McBee, DO
Nassau County Medical Center
2201 Hempstead Tpke
East Meadow, NY 11554-5400
516 577-5107
Length: 3 Year(s) Total Positions: 3
Program ID: 185-35-21-011

**New Hyde Park**

*Albert Einstein College of Medicine at Long Island Jewish Medical Center Program*

Long Island Jewish Medical Center
Queens Hospital Center
Schneider Children's Hosp (Long Island Jewish Med Ctr)
Program Director: Lydia Bivatar, MD
Schneider Children's Hospital
Pediatric Neurology
269-01 76th Ave
New Hyde Park, NY 11040
718 478-3450
Length: 3 Year(s) Total Positions: 6
Program ID: 185-35-21-011

**Missouri**

**St Louis**

*St Louis University School of Medicine Program*

St Louis University School of Medicine
Cardinal Glennon Children's Hospital
St Louis University Hospital
Program Director: Sundus K. Saleh, MB BS
Cardinal Glennon Children's Hospital
1485 South Grand Blvd
St Louis, MO 63104-1895
314 457-5538
Length: 3 Year(s) Total Positions: 3
Program ID: 185-35-21-011

**Washington University Program**

Washington University School of Medicine
Barnes Hospital
St Louis Children's Hospital
Program Director: Steven M. Rothman, MD
St Louis Children's Hospital
One Children's Pl
St Louis, MO 63110
314 454-6042
Length: 3 Year(s) Total Positions: 6
Program ID: 185-35-21-011

*Updated information not provided.*

Graduate Medical Education Directory
Accredited Programs in Child Neurology (Neurology)

New York University Medical Center Program
New York University Medical Center
Bellevue Hospital Center
Veterans Affairs Medical Center (Manhattan)
Program Director:
Richard N Reuben, MD
New York University Medical Center
550 First Ave
New York, NY 10016
212-263-6416
Length: 3 Year(s) Total Positions: 6
Program ID: 185-56-21-057

Presbyterian Hospital in the City of New York Program
Presbyterian Hospital in the City of New York
Program Director:
Darrell C De Vivo, MD
Presbyterian Hospital in the City of New York
510 W 168th St
New York, NY 10032
212-395-3244
Length: 3 Year(s) Total Positions: 4
Program ID: 185-56-21-059

Rochester University of Rochester Program
Strong Memorial Hospital of the University of Rochester
Program Director:
Leon G Epstein, MD
University of Rochester Medical Center
Child Neurology Rm 4-3266
601 Elmwood Ave Box 631
Rochester, NY 14642-8677
716-275-4785
Length: 3 Year(s) Total Positions: 2
Program ID: 185-56-21-019

Stony Brook SUNY at Stony Brook Program
University Hospital-SUNY at Stony Brook
Program Director:
Nicholas J Lenn, MD, PhD
SUNY at Stony Brook H rib Sci Ctr
LLG 609 Dept of Neurology
Stony Brook, NY 11794-8121
631-444-1493
Length: 3 Year(s) Total Positions: 1
Program ID: 185-56-21-081

North Carolina Chapel Hill
University of North Carolina Hospitals Program
University of North Carolina Hospitals
Program Director:
Robert S Greenwood, MD
UNC School of Medicine
Dept of Neurology
751 Burnett-Womack Bldg CB #7025
Chapel Hill, NC 27599-7025
919-962-5225
Length: 3 Year(s) Total Positions: 2
Program ID: 185-56-21-003

Durham Duke University Program
Duke University Medical Center
Program Director:
Darrell V Lewis, MD
Duke University Medical Center
Div of Pediatric Neurology
Durham, NC 27710
919-668-3919
Length: 3 Year(s) Total Positions: 3
Program ID: 185-56-21-040

Winston-Salem Bowman Gray School of Medicine Program
North Carolina Baptist Hospital
Program Director:
Raymond S Kandt, MD
North Carolina Baptist Hospital
Medical Center Blvd
Winston-Salem, NC 27157-1076
336-716-2151
Length: 3 Year(s) Total Positions: 3
Program ID: 185-56-21-037

Ohio Cincinnati University of Cincinnati Hospital Group Program
Children's Hospital Medical Center
University of Cincinnati Hospital
Program Director:
M H Popkin, MD
Children's Hospital Medical Center
3333 Burnet Ave
Cincinnati, OH 45229-3030
513-556-4222
Length: 3 Year(s) Total Positions: 7
Program ID: 185-56-21-038

Cleveland Case Western Reserve University Program*
University Hospitals of Cleveland
Program Director:
Samuel J Horwitz, MD
University Hospitals of Cleveland
2074 Abington Rd
Cleveland, OH 44106
216-844-3691
Length: 3 Year(s) Total Positions: 6
Program ID: 185-56-21-039

Cleveland Clinic Foundation Program
Cleveland Clinic Foundation
Program Director:
A David Rothner, MD
Cleveland Clinic Foundation
Dept of Child Neurology
9500 Euclid Ave TT22
Cleveland, OH 44195-5242
216-444-5099
Length: 3 Year(s) Total Positions: 8
Program ID: 185-56-21-040

Pennsylvania Philadelphia St Christopher's Hospital for Children Program*
St Christopher's Hospital for Children
Temple University Hospital
Program Director:
Warren D Grover, MD
St Christopher's Hospital for Children
Front Ave & Erie Ave
Philadelphia, PA 19144-1095
215-677-6840
Length: 3 Year(s)
Program ID: 185-41-21-040

Thomas Jefferson University Program
Thomas Jefferson University Hospital
Alfred I DuPont Institute of the Nemours Foundation
The Medical Center of Delaware
Program Director:
Leonard J Geratini, MD
Thomas Jefferson University Hospital
900 Walnut St
2nd Fl
Philadelphia, PA 19107
215-505-5310
Length: 3 Year(s) Total Positions: 3
Program ID: 185-41-21-072

University of Pennsylvania Program
Children's Hospital of Philadelphia
Hospital of the University of Pennsylvania
Program Director:
David B Pleasure, MD
Children's Hospital of Philadelphia
34th St & Civic Center Blvd
Philadelphia, PA 1914
215-500-2060
Length: 3 Year(s) Total Positions: 6
Program ID: 185-41-21-041

Pittsburgh University Health Center of Pittsburgh Program
University of Pittsburgh Medical Center
Children's Hospital of Pittsburgh
Presbyterian-University Hospitals/UPMC
Program Director:
Michael J Palatier, MD
Children's Hospital of Pittsburgh
3700 Fifth Ave
Pittsburgh, PA 15213
412-624-5530
Length: 3 Year(s) Total Positions: 6
Program ID: 185-41-21-012

Rhode Island Providence Brown University Program
Rhode Island Hospital
Program Director:
J Donald G Easton, MD
Rhode Island Hospital
Dept of Neurology RI Hospital
503 Eddy St Physicians Office #324
Providence, RI 02903
401-444-5789
Length: 3 Year(s) Total Positions: 2
Program ID: 185-43-21-074

* Updated information not provided.

Graduate Medical Education Directory 331
Tennessee

Memphis

University of Tennessee Program*
University of Tennessee College of Medicine
Baptist Memorial Hospital
LeBonheur Children’s Medical Center
Regional Medical Center at Memphis
Veterans Affairs Medical Center (Memphis)
Program Director:
Douglas F. Rose, MD
University of Tennessee College of Medicine
777 Washington Ave Ste F110
Memphis, TN 38105
901 528-6512
Length: 3 Year(s)
Program ID: 166-47-21-079

Nashville

Vanderbilt University Medical Program
Vanderbilt University Medical Center
Program Director:
Gerald M Fenichel, MD
Dept of Neurology
2100 Pierce Ave
Nashville, TN 37212
615 936-0669
Length: 3 Year(s) Total Positions: 3
Program ID: 166-47-21-042

Texas

Dallas

University of Texas Southwestern Medical School Program
University of Texas Southwestern Medical School
Children’s Medical Center of Dallas
Dallas County Hospital District-Farkland Memorial Hospital
Texas Scottish Rite Hospital for Children
Program Director:
E S Bosack, MD
Dept of Neurology
5323 Harry Hines Blvd
Dallas, TX 75335-9305
214 649-2751
Length: 3 Year(s) Total Positions: 6
Program ID: 166-48-21-043

University of Texas at Houston Program
University of Texas Medical School at Houston
Hermann Hospital
Shriners Hospital for Crippled Children (Houston)
University of Texas M D Anderson Cancer Center
Program Director:
Ian J Butler, MD
University of Texas Health Science Center
Dept of Neurology
Box 20708
Houston, TX 77225-0708
713 798-5777
Length: 3 Year(s) Total Positions: 1
Program ID: 185-48-31-076

Lubbock

Texas Tech University (Lubbock) Program
Texas Tech University Health Sciences Center at Lubbock
University Medical Center
Veterans Affairs Medical Center (Amarillo)
Program Director:
Judith E Hogg, MD
Texas Tech University Health Sciences Center
Dept of Neurology
5011 Fourth St
Lubbock, TX 79430
806 743-2730
Length: 2 Year(s) Total Positions: 1
Program ID: 185-48-21-076

Utah

Salt Lake City

University of Utah Program
University of Utah Medical Center
Primary Children’s Medical Center
Program Director:
Joel A Thompson, MD
Primary Children’s Hospital
Dept of Child Neurology
100 N Medical Dr
Salt Lake City, UT 84113-1100
801 581-1201
Length: 3 Year(s) Total Positions: 1
Program ID: 185-49-21-044

Virginia

Charlottesville

University of Virginia Program
University of Virginia Medical Center
Program Director:
W Dana Parker, MD
Div of Pediatric Neurology
Box 894
Univ of Virginia Med Ctr
Charlottesville, VA 22908
804 842-5548
Length: 3 Year(s) Total Positions: 3
Program ID: 165-51-11-066

Richmond

Medical College of Virginia/Virginia Commonwealth University Program*
Medical College of Virginia/Virginia Commonwealth University
Program Director:
Edwin C Myer, MD
MCV/Virginia Commonwealth Univ
PO Box 99211
Richmond, VA 23298-0211
804 786-0442
Length: 3 Year(s) Total Positions: 3
Program ID: 165-51-21-066

Washington

Seattle

University of Washington Program
University of Washington School of Medicine
Children’s Hospital and Medical Center
Harborview Medical Center
University of Washington Medical Center
Program Director:
Harvey B Sarnat, MD
Children’s Hospital and Medical Center
4590 Sand Point Way NS
CH-49
Seattle, WA 98118-0371
206 598-2078
Length: 3 Year(s) Total Positions: 3
Program ID: 165-54-21-047

West Virginia

Morgantown

West Virginia University Program
West Virginia University Hospitals
Program Director:
John Bodenstein, MD
Dept of Neurology
West Virginia University HSC
PO Box 9180
Morgantown, WV 26506-0180
304 293-2143
Length: 5 Year(s) Total Positions: 3
Program ID: 185-55-11-066

Wisconsin

Madison

University of Wisconsin Program
University of Wisconsin Hospital and Clinics
Meriter Hospital
Program Director:
Robert S East, MD MA
University of Wisconsin Hospital and Clinics
Dept of Neurology and Pediatrics
Madison, WI 53792-6132
608 265-8551
Length: 3 Year(s) Total Positions: 2
Program ID: 185-56-21-007

* Updated information not provided.
Milwaukee
Medical College of Wisconsin Program
Medical College of Wisconsin Affiliated Hospitals Inc
Children's Hospital of Wisconsin
Clement J Zablocki Veterans Affairs Medical Center
Procter Memorial Lutheran Hospital
Program Director:
Edward H Kornaz, MD
Children's Hospital of Wisconsin
Pediatrics Neurology
9000 W Wisconsin Ave
Milwaukee, WI 53226
414 655-4060
Length: 3 Year(s) Total Positions: 3
Program ID: 185-56-21-070

Clinical and Laboratory Immunology (Allergy and Immunology)

California

Orange

University of California (Irvine) Program*
University of California (Irvine) Medical Center
Program Director:
Sudhir Gupta, MD PhD
Univ of California
Irvine, CA 92717
714 856-3919
Length: 2 Year(s)
Program ID: 025-05-21-016

Florida

Tampa

University of South Florida (All Children's) Program*
University of South Florida College of Medicine
All Children's Hospital
Program Director:
Robert A Good, MD
All Children's Hospital
801 South St S
St Petersburg, FL 33701
813 892-4470
Length: 2 Year(s)
Program ID: 025-11-31-010

University of South Florida Program*
University of South Florida College of Medicine
All Children's Hospital
James A Haley Veterans Hospital
Tampa General Healthcare
Program Director:
Denise K Ledford, MD
Univ of South Florida College of Medicine
Div of Allergy-Immunology o/s VA/USC
11000 Bruce B Downs Blvd (1:ID)
Tampa, FL 33612
813 972-7391
Length: 2 Year(s) Total Positions: 1 (GVT: 1)
Program ID: 025-11-21-001

Colorado

Denver

University of Colorado Program*
University of Colorado Health Sciences Center
Immunological Associates of Denver
National Jewish Ctr for Immunology and Respiratory Medicine
Program Director:
Daniel L Hamilton, MD
National Jewish Center for Immunology and Respiratory Med
1400 Jackson St
Denver, CO 80206
303 893-2589
Length: 2 Year(s) Total Positions: 3
Program ID: 025-07-21-005

Georgia

Augusta

Medical College of Georgia Program
Medical College of Georgia Hospital and Clinics
Program Director:
William K Dolen, MD
Div of Allergy & Immunology HS-247
Medical College of Georgia
Augusta, GA 30912
706 721-2651
Length: 2 Year(s) Total Positions: 1
Program ID: 025-12-21-013

District of Columbia

Washington

Walter Reed Army Medical Center Program*
Walter Reed Army Medical Center
NIH Warren Grant Magnuson Clinical Center
Program Director:
Renata J M Engler, MD
Walter Reed Army Medical Center
Allergy/Immunology Services I-J
Washington, DC 20307-0001
302 576-1850
Length: 2 Year(s)
Program ID: 025-10-21-004

Illinois

Chicago

McGaw Medical Center of Northwestern University Program
Northwestern University Medical School
Northwestern Memorial Hospital
Program Director:
Paul A Greenberger, MD
Leslie C Grammer, MD
Div of Allergy/Immunology
360 E Chicago Ave 5207
Chicago, IL 60611-3008
312 946-8171
Length: 2 Year(s) Total Positions: 1
Program ID: 025-10-21-002

* Updated information not provided.

Graduate Medical Education Directory
Accredited Programs in Clinical and Laboratory Immunology (Allergy and Immunology)

Iowa

Iowa City
University of Iowa Hospitals and Clinics
Program**
University of Iowa Hospitals and Clinics
Program Director:
Tahjik A Balar, MD
Univ of Iowa Hosp 5736
Dept of Internal Med
Iowa City, IA 52242-1081
319-356-3997
Length: 2 Year(s)  Total Positions: 1
Program ID: 025-18-21-008

Maryland

Bethesda
National Institutes of Health Clinical Center Program
NIH Warren Grant Magnuson Clinical Center
Walsh Seed Army Medical Center
Program Director:
Thomas A Fleisher, MD
National Institutes of Health
Immunology Service
Bldg 10 Rm 5C 419
Bethesda, MD 20892
301-496-5880
Length: 2 Year(s)  Total Positions: 1
Program ID: 025-23-21-007

Massachusetts

Boston
Massachusetts General Hospital Program
Massachusetts General Hospital
Program Director:
Kurt J Bloch, MD
Massachusetts General Hospital
32 Fruit St
Boston, MA 02114-2596
617 739-4084
Length: 2 Year(s)  Total Positions: 1
Program ID: 025-34-21-004

Missouri

St Louis
St Louis University Group of Hospitals
Program**
St Louis University School of Medicine
St Louis University Hospital
Program Director:
Alan P Knezeon, MD
Raymond G Slavin, MD
Div of Allergy & Immunology
St Louis Univ Med Ctr
1465 S Grand Blvd
St Louis, MO 63104
314 577-5647
Length: 2 Year(s)  Program ID: 025-28-21-014

New York

East Meadow
Nassau County Medical Center, Program
Nassau County Medical Center
North Shore University Hospital
Program Director:
Marianne Prieto, MD PhD
Dept of Clin Immunopathology
Nassau County Med Ctr
2201 Hempstead Tpke
East Meadow, NY 11554
516 542-3214
Length: 2 Year(s)  Program ID: 025-35-21-015

North Carolina

Durham
Duke University Program
Duke University Medical Center
Program Director:
Rebecca H Buckley, MD
Duke Univ Med Ctr
Dept of Pediatrics & Immunology
Box 2588
Durham, NC 27710
919 684-3922
Length: 2 Year(s)  Total Positions: 1
Program ID: 025-36-21-009

Texas

Houston
Baylor College of Medicine Program
Baylor College of Medicine
Methodist Hospital
Texas Children's Hospital
Program Director:
David P Huston, MD
William T Shearer, MD PhD
Baylor Coll of Medicine
One Baylor Plaza
PHRN 5562
Houston, TX 77030-3468
713 790-6310
Length: 2 Year(s)  Total Positions: 1
Program ID: 025-48-21-012

Washington

Seattle
University of Washington Program
University of Washington School of Medicine
Children's Hospital and Medical Center
University of Washington Medical Center
Program Director:
Mark H Wener, MD
Univ of Washington 5B-10
Dept of Lab Med
1680 NE Pacific Ave
Seattle, WA 98195
206 548-6131
Length: 2 Year(s)  Total Positions: 1
Program ID: 025-54-21-011

* Updated information not provided.
Colons and Rectal Surgery

California

Los Angeles

Los Angeles County-University of Southern California Medical Center Program
Los Angeles County USC Medical Center
Kenneth Norris Jr Cancer Hospital and Research Institute
Program Director:
Robert W. Brent Jr, MD
Univ of Southern California
Div of Colon & Rectal Surgery
1510 San Pablo St Ste 614
Los Angeles, CA 90033-4612
213 342-2573
Length: 1 Year(s)
Program ID: 060-05-21-042

Santa Barbara

Samsun Medical Clinic/Santa Barbara Medical Foundation Clinic Program
Samsun Medical Clinic
Santa Barbara Cottage Hospital
Program Director:
Elliot Prager, MD
Samsun Medical Clinic
PO Box 1339
Santa Barbara, CA 93102
805 682-2021
Length: 1 Year(s) Total Positions: 1
Program ID: 060-05-21-087

Connecticut

Hartford

St. Francis Hospital and Medical Center Program
St. Francis Hospital and Medical Center
Program Director:
David L. Walters, MD
6 Northwester Dr
Ste 300
Bloomfield, CT 06002
203 342-5591
Length: 1 Year(s) Total Positions: 1
Program ID: 060-08-21-092

Florida

Orlando

Orlando Regional Healthcare System Program
Orlando Regional Medical Center
Florida Hospital
Program Director:
Sergio W. Lasich, MD
Ctr for Colon and Rectal Treatment
110 W Underwood St
Orlando, FL 32805
407 423-5700
Length: 1 Year(s) Total Positions: 2
Program ID: 060-11-21-087

Illinois

Chicago

Cook County Hospital Program
Cook County Hospital
Program Director:
Charles F. Orsay, MD
Cook County Hospital
1835 W Harrison St
Chicago, IL 60612
312 633-6600
Length: 1 Year(s) Total Positions: 2
Program ID: 060-18-12-001

Urbana

Carle Foundation Hospital Program
Carle Foundation Hospital
Program Director:
Lyn B. Nagle, MD
Carle Foundation Hospital
611 W Park St, PTC 4
Urbana, IL 61801
217 333-9386
Length: 1 Year(s) Total Jobs: 2
Program ID: 060-18-11-002

Louisiana

New Orleans

Alton Ochsner Medical Foundation Program
Alton Ochsner Medical Foundation
Program Director:
J. Byron Galbo, Jr, MD
Alton Ochsner Medical Foundation
Dept of Graduate Med Ed
1516 Jefferson Hwy
New Orleans, LA 70121
504 842-4000
Length: 1 Year(s) Total Positions: 2
Program ID: 060-31-12-008

Shreveport

Louisiana State University (Shreveport) Program
Louisiana State University Medical Center-Shreveport Medical Center
Program Director:
H. Whitman Boggs Jr, MD
Dept of Colon and Rectal Surgery
1801 Fairfield Ave
Ste 401
Shreveport, LA 71101-4474
318 674-5777
Length: 1 Year(s) Total Positions: 1
Program ID: 060-21-21-004

Maryland

Baltimore

Greater Baltimore Medical Center Program
Greater Baltimore Medical Center
Program Director:
Alan V. Abrams, MD
609 North Charles St #502
Baltimore, MD 21201
410 684-1101
Length: 1 Year(s) Total Positions: 1
Program ID: 060-28-12-005

Massachusetts

Burlington

Lahey Clinic Program
Lahey Clinic
Program Director:
John M. Corrigan, MD
Lahey Clinic Foundation
41 Mall Rd
Burlington, MA 01805
617 273-4880
Length: 1 Year(s) Total Positions: 3
Program ID: 060-24-12-007

Michigan

Grand Rapids

Blodgett Memorial Medical Center Program
Blodgett Memorial Medical Center
Program Director:
Martin A. Luchefeld, MD
Ferguson Clinic
75 Sheridan Blvd SE
Grand Rapids, MI 49503
616 456-0994
Length: 1 Year(s) Total Positions: 2
Program ID: 060-26-12-009

Royal Oak

William Beaumont Hospital Program
William Beaumont Hospital
Program Director:
William L. Beasrfig, MD
William Beaumont Hosp
3901 W 13 Mile Rd
Royal Oak, MI 48073
810 551-6426
Length: 1 Year(s) Total Positions: 1
Program ID: 060-25-12-010

* Updated information not provided.
Minneapolis

University of Minnesota Program*
University of Minnesota Medical School
Abbott-Northwestern Hospital
United Hospital
University of Minnesota Hospital and Clinic
Veterans Affairs Medical Center (Minneapolis)
Program Director:
W Douglas Wong, MD
Colo and Rectal Surgery Associates
Suite 312N Court International Blvd
2225 University Ave W
St Paul, MN 55114-1084
612-647-0126
Length: 1 Year(s) Total Positions: 4
Program ID: 060-26-21-011

Rochester

Mayo Graduate School of Medicine Program
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Rochester)
Mayo Clinic (Scottsdale)
Rochester Methodist Hospital
St Mary’s Hospital of Rochester
Program Director:
Richard M Derwin, MD
MSM Application Processing Center
Siebens 6th Fl
Mayo Graduate School of Medicine
Rochester, MN 55905
612-284-5860
Length: 1 Year(s) Total Positions: 4
Program ID: 060-26-21-012

Missouri

St Louis

St Louis University Group of Hospitals Program
St Louis University School of Medicine
St John’s Mercy Medical Center
St Louis University Hospital
Program Director:
Anthony M Vernava III, MD
St Louis University Medical Center
3333 Vista at Grand
PO Box 10250
St Louis, MO 63110-0250
314-577-8562
Length: 1 Year(s) Total Positions: 1
Program ID: 060-28-21-028

Washington University Program
Jewish Hospital of St Louis
Program Director:
James W Fleshman, MD
Jewish Hospital of St Louis
216 S Kingshighway
St Louis, MO 63110
314-454-7177
Length: 1 Year(s) Total Positions: 1
Program ID: 060-28-21-025

Nebraska

Omaha

Creighton University Program
Creighton/Nebraska University Health Foundation
AMR St Joseph Hospital at Creighton Univ Medical Center
Program Director:
Alan G Thordson, MD
681 N 30th St
Ste 1320
Omaha, NE 68131
402-280-4563
Length: 1 Year(s) Total Positions: 1
Program ID: 060-36-21-035

New Jersey

Piscataway

UMDNJ-Robert Wood Johnson Medical School Program
UMDNJ-Robert Wood Johnson Medical School
JFK Medical Center
Muhlenberg Regional Medical Center
Program Director:
Theodore Eisenstadt, MD
1010 Park Ave
Plainfield, NJ 07060
908-755-5540
Length: 1 Year(s) Total Positions: 3
Program ID: 060-38-12-013

New York

Buffalo

SUNY at Buffalo Graduate Medical-Dental Education Consortium Program*
SUNY at Buffalo Grad Medical-Dental Education Consortium
Buffalo General Hospital
Program Director:
Amalget S Singh, MD
SUNY Buffalo Grad Med-Dental Educ Consortium
85 High St
Buffalo, NY 14203
716-652-1200
Length: 1 Year(s) Total Positions: 1
Program ID: 060-35-12-014

Cleveland Clinic Foundation (Florida)

Program
Cleveland Clinic Foundation
Cleveland Clinic Hospital
Cleveland Clinic Florida
Program Director:
Steven H Weiss, MD
Cleveland Clinic Florida
Dept of Colon & Rectal Surgery
3000 W Cypress Creek Rd
Fort Lauderdale, FL 33309
954-786-5283
Length: 1 Year(s) Total Positions: 2
Program ID: 060-38-12-038

Cleveland Clinic Foundation Program
Cleveland Clinic Foundation
Program Director:
Ian C Lawry, MD
Cleveland Clinic Foundation
9500 Euclid Ave TT52
Dept of Colonrectal Surgery
Cleveland, OH 44195-5242
216-444-5690
Length: 1 Year(s) Total Positions: 4
Program ID: 060-38-12-016

Columbus

Grant Medical Center Program
Grant Medical Center
Program Director:
Pedro S Aguilar, MD
Grant Medical Center
Dept of Colon and Rectal Surgery
360 E Town St Ste 800
Columbus, OH 43215-4802
614-224-1634
Length: 1 Year(s) Total Positions: 2
Program ID: 060-38-13-017

Pennsylvania

Allentown

Lehigh Valley Hospital/Pennsylvania State University Program
Lehigh Valley Hospital
Program Director:
Lester Bosen, MD
Lehigh Valley Hospital
1275 S Cedar Crest Blvd
Allentown, PA 18103
610-433-7673
Length: 1 Year(s) Total Positions: 2
Program ID: 060-41-21-029

Erie

St Vincent Health Center Program
St Vincent Health Center
Hamot Medical Center
Program Director:
A Craig Brown, MD
St Vincent Health Center
220 W 26th St
Erie, PA 16544
814-453-6100
Length: 1 Year(s) Total Positions: 2
Program ID: 060-41-12-019

* Updated information not provided.
Philadelphia
Thomas Jefferson University Program
Thomas Jefferson University Hospital
Program Director:
Robert D Fry, MD
Thomas Jefferson University Hospital
1100 Walnut St Ste 701
Philadelphia, PA 19107
215 956-5890
Length: 1 Year(s)  Total Positions: 1
Program ID: 060-41-21-031

Texas
Dallas
Baylor University Medical Center Program
Baylor University Medical Center
Program Director:
R D Dignam, MD
Baylor University Medical Center
1200 Barnett Tower
3000 Gaston Ave
Dallas, TX 75246
214 456-3678
Length: 1 Year(s)  Total Positions: 2
Program ID: 060-48-21-021

Presbyterian Hospital of Dallas Program
Presbyterian Hospital of Dallas
Dallas County Hospital District Parkland Memorial Hospital
Program Director:
Philip J Huber Jr, MD
Dept of Surgery UT Southwestern Medical Center
5333 Harry Hines Blvd
Dallas, TX 75235-9031
214 458-2549
Length: 1 Year(s)  Total Positions: 1
Program ID: 060-48-21-022

Houston
University of Texas at Houston Program
University of Texas at Houston Medical School at Houston Hermann Hospital
Program Director:
H Randolph Bailey, MD
University of Texas at Houston
6550 Fannin Smith Tower, Ste 2007
Houston, TX 77030-2723
713 799-9250
Length: 1 Year(s)  Total Positions: 4
Program ID: 060-48-21-023

Washington
Seattle
Northwest Colon and Rectal Clinic Program
Northwest Colon and Rectal Clinic
Northwest Hospital
Swedish Medical Center - Seattle
Program Director:
Richard P Billingham, MD
600 Broadway
Ste 400
Seattle, WA 98122
206 286-6690
Length: 1 Year(s)  Total Positions: 1
Program ID: 060-54-21-040

Critical Care Medicine (Anesthesiology)

Arizona
Tucson
University of Arizona Program
University of Arizona College of Medicine-Maricopa Medical Center
University Medical Center
Program Director:
Charles W Otto, MD
Dept of Anesthesiology/Critical Care Program
Arizona Health Sciences Center
1501 N Campbell Ave
Tucson, AZ 85724
962 629-7221
Length: 1 Year(s)  Total Positions: 2
Program ID: 064-63-21-046

California
Orange
University of California (Irvine) Program
University of California (Irvine) College of Medicine
Veterans Affairs Medical Center (Long Beach)
Program Director:
David H Wong, MD
Dept of Anesthesiology (LBVA)
6611 E Seventh St (138)
Long Beach, CA 90822
310 494-5413
Length: 1 Year(s)  Total Positions: 2
Program ID: 064-65-21-011

San Francisco
San Francisco University Program
University of California (San Francisco) School of Medicine
San Francisco General Hospital Medical Center
University of California (San Francisco) Medical Center
Program Director:
Neal H Cohen, MD
Dept of Anesthesiology
505 Parnassus Ave, M917
San Francisco, CA 94143-0624
415 476-1116
Length: 1 Year(s)  Total Positions: 4
Program ID: 064-55-21-021

Stanford
Stanford University Program
Stanford University Hospital
Program Director:
Thomas W Feeley, MD
Dept of Anesthesiology
5353 Stanford University School of Medicine
390 Pasteur Dr
Stanford, CA 94305-5115
415 725-2727
Length: 1 Year(s)  Total Positions: 6
Program ID: 064-55-21-002

Connecticut
Hartford
Hartford Hospital Program
Hartford Hospital
Program Director:
James J Braconnot, MD
Hartford Hospital
Dept of Anesthesiology
Hartford, CT 06115
203 594-7022
Length: 1 Year(s)  Total Positions: 1
Program ID: 045-08-21-035

District of Columbia
Washington
George Washington University Program
George Washington University School of Medicine
George Washington University Hospital
Program Director:
Richard B Becker, MD
George Washington University Medical Center
901 22nd St NW
Washington, DC 20007
202 994-3837
Length: 1 Year(s)
Program ID: 045-10-21-039

Walter Reed Army Medical Center Program
Walter Reed Army Medical Center
Program Director:
Darrell W Randle, MD
Critical Care Medicine Serv
Walter Reed Army Med Ctr
6025 16th St NW
Washington, DC 20077-5001
202 576-4203
Length: 1 Year(s)  Total Positions: 2
Program ID: 045-10-21-042

Florida
Gainesville
University of Florida Program
University of Florida College of Medicine
Shands Hospital at the University of Florida
Veterans Affairs Medical Center (Gainesville)
Program Director:
T James Gallagher, MD
University of Florida
Box 100254/JHHIMC
Gainesville, FL 32610-0254
904 395-0653
Length: 1 Year(s)  Total Positions: 4
Program ID: 045-11-21-009

* Updated information not provided.
Accredited Programs in Critical Care Medicine (Anesthesiology)

Miami
University of Miami-Jackson Memorial Medical Center Program*
University of Miami-Jackson Memorial Medical Center
Program Director:
Albert J. Martin, MD
Univ of Miami-Jackson Memorial Med Ctr
Dept of Anesthesiology
1111 NW 12th Ave
Miami, FL 33136
305-960-9070
Length: 1 Year(s) Total Positions: 2
Program ID: 045-11-21-004

Tampa
University of South Florida Program*
University of South Florida College of Medicine
Tampa General Health Care
Veterans Affairs Medical Center (Bay Pines)
Program Director:
Roy D. Cane, MD
12011 Bruce B Downs Blvd
Tampa, FL 33612
813-351-7701
Length: 1 Year(s)
Program ID: 045-11-21-050

Illinois
Chicago
McGaw Medical Center of Northwestern University Program
Northwestern University Medical School
Northwestern Memorial Hospital
Veterans Affairs Lakeside Medical Center (Chicago)
Program Director:
Barry A Shapiro, MD
Northwestern Memorial Hospital
303 S Superior
Chicago, IL 60611
312-926-2528
Length: 1 Year(s) Total Positions: 1
Program ID: 045-18-21-014

Iowa
Iowa City
University of Iowa Hospitals and Clinics Program
University of Iowa Hospitals and Clinics
Program Director:
S. T. John Sun-Ping, MD
University of Iowa Hospitals and Clinics
Dept of Anesthesia
Iowa City, IA 52242-1600
319-356-8126
Length: 1 Year(s) Total Positions: 3
Program ID: 045-18-21-003

Maryland
Baltimore
Johns Hopkins University Program
Johns Hopkins University School of Medicine
Johns Hopkins Hospital
Program Director:
Tobi Dorman, MD
Johns Hopkins Hospital
Dept of Anesthesiology
Meyer 394
Baltimore, MD 21287-7294
410-955-9000
Length: 1 Year(s) Total Positions: 6
Program ID: 045-23-31-034

University of Maryland Program*
University of Maryland Medical System
Program Director:
Brian McGraith, MD
University of Maryland
25 S Green St, Bldg 811001
Baltimore, MD 21201
410-328-6120
Length: 1 Year(s) Total Positions: 1
Program ID: 045-23-31-029

Massachusetts
Boston
Beth Israel Hospital Program
Beth Israel Hospital
Children's Hospital
Program Director:
Alan Libon, MD
Beth Israel Hospital
Dept of Anesthesia & Critical Care
330 Brookline Ave
Boston, MA 02215
617-732-5238
Length: 1 Year(s) Total Positions: 2
Program ID: 045-24-11-001

Massachusetts General Hospital Program
Massachusetts General Hospital
Program Director:
Richard Teplick, MD
Massachusetts General Hospital
Fruit St
Boston, MA 02114
617-726-5322
Length: 1 Year(s) Total Positions: 4
Program ID: 045-24-31-015

Worcester
University of Massachusetts Medical Center Program*
University of Massachusetts Medical Center
Worcester City Hospital
Program Director:
Stephen O Hoard, MD
University of Massachusetts Medical Center
55 Lake Ave N
Worcester, MA 01605
508-856-3907
Length: 1 Year(s) Total Positions: 2
Program ID: 045-24-31-017

Michigan
Detroit
Henry Ford Hospital Program*
Henry Ford Hospital
Program Director:
Ben Guida, MD
7999 W Grand Blvd
Detroit, MI 48202-2889
313-876-2645
Length: 1 Year(s)
Program ID: 045-25-31-055

Sinai Hospital Program
Sinai Hospital
Program Director:
Robert Tawil, MD
Sinai Hospital
6787 W Outer Dr
Detroit, MI 48235-2889
313-482-5665
Length: 1 Year(s)
Program ID: 045-25-31-019

Minnesota
Rocheester
Mayo Graduate School of Medicine Program
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Rochester)
Program Director:
Martin L Dellaporter, MD
MGM Application Processing Center
Siebens 5th Fl
Mayo Graduate School of Medicine
Rochester, MN 55905
507-255-5275
Length: 1 Year(s) Total Positions: 6
Program ID: 045-26-21-024

Missouri
St Louis
Washington University Program*
Barnes Hospital
Program Director:
Walter A Boyle III, MD
Cumo Box 8064
600 S Euclid Ave
St Louis, MO 63110
314-362-8343
Length: 1 Year(s)
Program ID: 045-28-21-058

New Hampshire
Lebanon
Dartmouth-Hitchcock Medical Center Program
Mary Hitchcock Memorial Hospital
Program Director:
Andrew Gettlinger, MD
Dartmouth-Hitchcock Medical Center
One Medical Ctr Dr
Lebanon, NH 03756-0000
603-650-6462
Length: 1 Year(s) Total Positions: 3
Program ID: 045-22-21-030

* Updated information not provided.
Accredited Programs in Critical Care Medicine (Anesthesiology)

New Jersey

Camden
UMDNJ-Robert Wood Johnson Medical School (Camden) Program
Cooper Hospital/University Medical Center Program
Program Director: W Eric Scott, MD
Cooper Hospital/University Medical Center
3 Cooper Plaza Ste 312
Camden, NJ 08105
609 243-2498
Length: 1 Year(s)  Total Positions: 2
Program ID: 045-33-21-041

New York

Albany
Albany Medical Center Program
Albany Medical Center Hospital
Program Director: Philip D Lamb, MB B S
Albany Medical Center Hospital
Dept of Anesthesiology A-131
43 New Scotland Ave
Albany, NY 12208-3478
518 262-4065
Length: 1 Year(s)  Total Positions: 2
Program ID: 045-35-21-044

Bronx
Albert Einstein College of Medicine Program
Albert Einstein College of Medicine of Yeshiva University
Montefiore Medical Center-Henry and Lucy Moses Division
Program Director: Christopher W Bryan-Brown, MD
Montefiore Medical Center
Dept of Anesthesiology
111 W 210th St
Bronx, NY 10467
718 920-4176
Length: 1 Year(s)  Total Positions: 2
Program ID: 045-35-21-030

Brooklyn
SUNY Health Science Center at Brooklyn Program*
SUNY HSC at Brooklyn College of Medicine
Kings County Hospital Center
Long Island College Hospital
University Hospital SUNY Health Science Center at Brooklyn
Program Director: Ashraf Boutros, MD
Dept of Anesthesiology Critical Care
SUNY HSCB
400 Clarkson Ave
Brooklyn, NY 11203
718 270-1880
Length: 1 Year(s)
Program ID: 045-35-11-054

Buffalo
SUNY at Buffalo Graduate Medical-Dental Education Consortium Program
SUNY at Buffalo Grad Medical-Dental Education Consortium
Buffalo General Hospital
Children's Hospital of Buffalo
Erie County Medical Center
Roswell Park Cancer Institute
Veterans Affairs Medical Center (Buffalo)
Program Director: Roger E Kaiser Jr, MD
Dept of Anesthesiology
Erie County Medical Center
462 Grider St
Buffalo, NY 14215
716 898-3549
Length: 1 Year(s)  Total Positions: 2
Program ID: 045-35-21-001

New York
Mount Sinai School of Medicine Program*
Mount Sinai School of Medicine
Elmhurst Hospital Center-Mount Sinai Services
Mount Sinai Medical Center
Program Director: Andrew B Leibowitz, MD
Mount Sinai Hosp Surgical ICU (Box 2494)
One Gustavo Levy Pl
New York, NY 10029-6574
212 241-3096
Length: 1 Year(s)  Total Positions: 2
Program ID: 045-35-21-020

New York Hospital/Cornell Medical Center Program
Memorial Sloan-Kettering Cancer Center
New York Hospital
Program Director: Graziano C Carlson, MD
Memorial Sloan-Kettering Cancer Center
1275 York Ave #210A
New York, NY 10021
212 639-6673
Length: 1 Year(s)  Total Positions: 5
Program ID: 045-35-21-006

New York University Medical Center Program
New York University Medical Center
Bellevue Hospital Center
Program Director: Brian S Kaufman, MD
New York University Medical Center
550 First Ave
New York, NY 10016
212 263-6343
Length: 1 Year(s)  Total Positions: 2
Program ID: 045-35-21-016

Presbyterian Hospital in the City of New York Program
Presbyterian Hospital in the City of New York
Program Director: Charles D Weissman, MD
Presbyterian Hospital in the City of New York
522 W 168th St
New York, NY 10032-3784
212 330-3117
Length: 1 Year(s)  Total Positions: 2
Program ID: 045-35-11-007

Rochester
University of Rochester Program
Strong Memorial Hospital of the University of Rochester
Genesea Hospital
Rochester General Hospital
Program Director: Niels Lund, MD PhD
Dept of Anesthesiology Box 604
Univ of Rochester Medical Center
001 Elmwood Ave
Rochester, NY 14642
716 275-3141
Length: 1 Year(s)  Total Positions: 3
Program ID: 045-36-11-022

North Carolina

Durham
Duke University Program
Duke University Medical Center
Veterans Affairs Medical Center (Durham)
Program Director: Robert N Sladen, MD
Dept of Critical Care
PO Box 3094
Durham, NC 27710
919 681-5167
Length: 1 Year(s)  Total Positions: 1
Program ID: 045-36-21-652

Winston-Salem
Bowman Gray School of Medicine Program
North Carolina Baptist Hospital
Program Director: Roger L Royster, MD
Bowman Gray School of Medicine
Medical Center Blvd
Winston-Salem, NC 27107-1009
010 716-2712
Length: 1 Year(s)  Total Positions: 3
Program ID: 045-36-21-023

Ohio

Cleveland
Case Western Reserve University Program
University Hospitals of Cleveland
Program Director: Howard S Nearnman, MD
University Hospitals of Cleveland
1109 Euclid Ave
Cleveland, OH 44106-5900
216 444-7338
Length: 1 Year(s)  Total Positions: 2
Program ID: 045-38-21412

Cleveland Clinic Foundation Program
Cleveland Clinic Foundation
Program Director: William Hoffman, MD
Cleveland Clinic Foundation
Dept of Anesthes-Critical Care
6000 Euclid Ave F720
Cleveland, OH 44106-5942
216 444-5690
Length: 1 Year(s)  Total Positions: 6
Program ID: 045-38-21401

* Updated information not provided.
Columbus
Ohio State University Program
Ohio State University Medical Center
Arthur G James Cancer Hospital and Research Institute
Children's Hospital  
Program Director:  
Thomas E Bailey, MD  
The Ohio State University Hospitals  
Dept of Anesthesiology  
N416  
Columbus, OH 43210  
614-294-8487  
Length: 1 Year(s)  
Program ID: 045-38-21-049

University Health Center of Pittsburgh Program
University Health Center of Pittsburgh  
Procter-Eugene University Hospital/UPMC  
Program Director:  
Ake Grenvik, MD  
Univ Hlth Ctr of Pittsburgh  
Critical Care Medicine  
Rm 615 Scaife Hall  
Pittsburgh, PA 15261  
412-647-3135  
Length: 1 Year(s)  
Total Positions: 5  
Program ID: 045-41-21-026

Pennsylvania
Hershey
Milton S Hershey Medical Center of Pennsylvania State University Program  
Penn State University Hospital/Milton S Hershey Med Ctr  
Program Director:  
Julian F Biebuyck, MB DPhil  
The Milton S Hershey Med Ctr  
Dept of Anesthesiology  
PO Box 500  
Hershey, PA 17033  
717-531-6126  
Length: 1 Year(s)  
Total Positions: 2  
Program ID: 045-41-21-035

Philadephia
Temple University Program  
Temple University Hospital  
Fox Chase Cancer Center  
St Christopher's Hospital for Children  
Program Director:  
Rodger E Barnette, MD  
Critical-Care Residency Program  
Temple University Hospital  
3401 N Broad St  
Philadelphia, PA 19140  
215-707-5285  
Length: 1 Year(s)  
Total Positions: 2  
Program ID: 045-41-21-047

University of Pennsylvania Program  
Hospital of the University of Pennsylvania  
Children's Hospital of Philadelphia  
Lehigh Valley Hospital  
Program Director:  
Clifford S Deutschman, MD  
Andrew T Costarino Jr, MD  
Hosp of the Univ of Pennsylvania  
Dept of Anesthesiology  
3400 Spruce St  
Philadelphia, PA 19104  
215-662-5718  
Length: 1 Year(s)  
Total Positions: 3  
Program ID: 045-41-21-006

Pittsburgh
Mercy Hospital of Pittsburgh Program  
Mercy Hospital of Pittsburgh  
Program Director:  
Richard Kwik,M.D  
Mercy Hospital of Pittsburgh  
1400 Longue St  
Pittsburgh, PA 15210  
412-262-8006  
Length: 1 Year(s)  
Total Positions: 1  
Program ID: 045-41-21-038

Tennessee
Knoxville
University of Tennessee Medical Center at Knoxville Program  
University of Tennessee Graduate School of Medicine  
University of Tennessee Memorial Hospital  
Program Director:  
Steve A Morris, MD  
The University of Tennessee  
Graduate School of Medicine  
1924 Alcoa Hwy U-109  
Knoxville, TN 37909  
615-544-9220  
Length: 1 Year(s)  
Total Positions: 1  
Program ID: 045-47-21-045

Texas
Galveston
University of Texas Medical Branch Hospitals Program  
University of Texas Medical Branch Hospitals  
Program Director:  
Mall Mathur, MD  
Univ of Texas Med Branch  
Dept of Anesthesiology  
Galveston, TX 77555-5921  
409-772-1881  
Length: 1 Year(s)  
Total Positions: 1  
Program ID: 045-48-21-048

Houston
University of Texas at Houston Program  
University of Texas Medical School at Houston  
Hermann Hospital  
Program Director:  
Alan S Tornesen, MD  
University of Texas Medical School at Houston  
Dept of Anesthesiology  
6431 Fannin 5.020 MSB  
Houston, TX 77030  
713-792-5566  
Length: 1 Year(s)  
Total Positions: 1  
Program ID: 045-48-21-032

Lackland AFB
Wilford Hall USAF Medical Center Program  
Wilford Hall USAF Medical Center (SG)  
Brooke Army Medical Center  
Program Director:  
Thomas E Grisson, MD  
Wilford Hall Med Ctr/PSSA  
2200 Bergquist Dr Ste 1  
San Antonio, TX 78236-5100  
210-670-7677  
Length: 1 Year(s)  
Total Positions: 2  
Program ID: 045-48-21-033

Virginia
Charlottesville
University of Virginia Program  
University of Virginia Medical Center  
Program Director:  
Charles G Durbin, MD  
University of Virginia Health Sciences Center  
Box 238  
Dept of Anesthesiology  
Charlottesville, VA 22908  
804-982-5293  
Total Positions: 3  
Program ID: 045-51-11-027

Wisconsin
Madison
University of Wisconsin Program  
University of Wisconsin Hospital and Clinics  
William J Middleton Veterans Hospital  
Program Director:  
Douglas B Coursin, MD  
Univ of Wisconsin Clinical Sci Ctr  
Dept of Anesthesiology B0/319  
600 Highland Ave  
Madison, WI 53792-3272  
608-263-8105  
Length: 1 Year(s)  
Total Positions: 1  
Program ID: 045-56-21-069

Milwaukee
Medical College of Wisconsin Program  
Medical College of Wisconsin Affiliated Hospitals Inc  
Procter Memorial Lutheran Hospital  
Program Director:  
Eugene Ch Cheng, MD  
Procter Memorial Lutheran Hospital  
Anesthesiology Dept  
920 W Wisconsin Ave  
Milwaukee, WI 53226  
414-279-7215  
Length: 1 Year(s)  
Total Positions: 2  
Program ID: 045-56-21-025

* Updated Information not provided.
Accredited Programs in Critical Care Medicine (Internal Medicine)

Critical Care Medicine (Internal Medicine)

Alabama

Birmingham
University of Alabama Medical Center Program
University of Alabama Hospital
Veterans Affairs Medical Center (Birmingham)
Program Director:
K. Randall Young Jr, MD
Dick D Griego Jr, MD
University of Alabama
215 Tusculum Harrison Tower
1900 University Blvd UAB Station
Birmingham, AL 35294
205 884-5800
Length: 1 Year(s)  Total Positions: 1
Program ID: 145-01-21-001

California

Los Angeles
Cedars-Sinai Medical Center Program
Cedars-Sinai Medical Center
Program Director:
Lawrence S Maldonado, MD
Michael E Lewis, MD
Cedars-Sinai Medical Center
2280 Beverly Blvd Bn B114
Los Angeles, CA 90044-1985
310 855-4658
Length: 2 Year(s)  Total Positions: 2
Program ID: 145-01-21-001

UCLA Medical Center Program
UCLA School of Medicine
UCLA Medical Center
Program Director:
Paul E Bellamy, MD
UCLA Dept of Med
37-131 CHS
10833 Le Conte Ave
Los Angeles, CA 90024-1686
213 825-2965
Length: 1 Year(s)  Total Positions: 8
Program ID: 145-01-1437

Sacramento
University of California (Davis) Program
University of California (Davis) Medical Center
Program Director:
Gibbe Parsons, MD
University of California (Davis) Medical Center
4300 X St
PO Box 2130
Sacramento, CA 95817
916 734-9564
Length: 2 Year(s)  Total Positions: 6
Program ID: 145-05-21-009

San Diego
Naval Medical Center (San Diego) Program
Naval Medical Center (San Diego)
Program Director:
Dennis S Amundson, DO
Naval Hospital
Box 213
San Diego, CA 92134-5000
619 632-8627
Length: 2 Year(s)  Total Positions: 3
Program ID: 145-05-21-117

San Francisco
University of California (San Francisco) Program
University of California (San Francisco) School of Medicine
San Francisco General Hospital Medical Center
University of California (San Francisco) Medical Center
Program Director:
Michael A Matthay, MD
John M Luce, MD
University of California at San Francisco
Dept of Medicine
Box 0210
San Francisco, CA 94143-0210
415 476-2807
Length: 2 Year(s)  Total Positions: 4
Program ID: 145-05-21-011

Stanford
Stanford University Program
Stanford University Hospital
Program Director:
Thomas A Rabin, MD
Stanford University Medical Center
3600 Palo Alto Ave
Stanford, CA 94305-5236
415 725-6291
Length: 2 Year(s)  Total Positions: 11
Program ID: 145-05-21-013

Torrance
Los Angeles County-Harbor-UCLA Medical Center Program
Los Angeles County-Harbor-UCLA Medical Center
Program Director:
Darrel Y Suen, MD
Harbor-UCLA Medical Center
Box 20
10900 W Carson St
Torrance, CA 90308-2519
310 223-3901
Length: 1 Year(s)  Total Positions: 6
Program ID: 145-05-11-014

Colorado

Denver
University of Colorado Program
University of Colorado Health Sciences Center
Denver Health and Hospitals
Boise Medical Center
Veterans Affairs Medical Center (Denver)
Program Director:
Edward Abraham, MD
University of Colorado Medical Center
4200 E Ninth Ave
Box C-373
Denver, CO 80262
303 270-7047
Length: 1 Year(s)
Program ID: 145-07-21-106

Connecticut

New Haven
Yale-New Haven Medical Center Program
Yale-New Haven Hospital
Hospital of St Raphael
Program Director:
Richard A Matthay, MD
Yale Univ School of Medicine Dept of Med
Pulmonary/Critical Care (LCT 105)
333 Cedar St PO Box 209057
New Haven, CT 06520-8057
203 784-1196
Length: 1 Year(s)  Total Positions: 1
Program ID: 145-08-21-120

District of Columbia

Washington
George Washington University Program
George Washington University School of Medicine
George Washington University Hospital
Program Director:
Michael Benet, MD
George Washington University Medical Center
901 23rd St NW
Washington, DC 20057
202 944-2936
Length: 2 Year(s)
Program ID: 145-10-21-103

George Washington University Program 2
George Washington University School of Medicine
George Washington University Hospital
NIH Warren Grant Magnuson Clinical Center
Veterans Affairs Medical Center (Washington DC)
Washington Hospital Center
Program Director:
Herbert N Friedman, MD
Washington Hospital Center
Dept of Pulmonary & Crit Care Med
110 Irving St NW Bn 2A-58
Washington, DC 20010-2915
202 777-756
Length: 1 Year(s)  Total Positions: 2
Program ID: 145-10-31-151

* Updated information not provided.
Accredited Programs in Critical Care Medicine (Internal Medicine)

Howard University Program* Howard University Hospital
Program Director: Richard G Adams, MD
Howard University Hospital
3041 Georgia Ave NW
Washington, DC 20059-5200
202-855-1490
Length: 2 Year(s)
Program ID: 142-10-21-110

Walter Reed Army Medical Center Program
Walter Reed Army Medical Center
Program Director: Kathryn L Belsis, MD
Critical Care Medicine Service
Walter Reed Army Medical Center
Washington, DC 20007-0001
202-750-2430
Length: 2 Year(s) Total Positions: 6
Program ID: 142-10-21-125

Florida

Miami
University of Miami-Jackson Memorial Medical Center Program
University of Miami-Jackson Memorial Medical Center
Mount Sinai Medical Center of Greater Miami Veterans Affairs Medical Center (Miami)
Program Director: Roland M H Schein, MD
Dept of Veterans Affairs Medical Center Critical Care Medicine (111)
1201 NW 16th St.
Miami, FL 33125
305-358-3153
Length: 2 Year(s) Total Positions: 1
Program ID: 142-11-21-026

Tampa
University of South Florida Program
University of South Florida College of Medicine
James A Haley Veterans Hospital
Tampa General Healthcare
Program Director: Allan J Goldman, MD
Univ of South Florida
Div of Pulmonary/Critical Care 111C
13000 Bruce B Downs Blvd
Tampa, FL 33612-4708
813-972-7543
Length: 1 Year(s) Total Positions: 3
Program ID: 142-11-21-110

Illinois

Chicago
Rush-Presbyterian-St Luke’s Medical Center Program*
Rush-Presbyterian-St Luke’s Medical Center
Program Director: Joseph E Farrillo, MD
Rush-Presbyterian-St Luke’s Medical Center
1553 W Congress Pkwy
Chicago, IL 60612
312-942-3200
Length: 2 Year(s) Total Positions: 3
Program ID: 142-11-11-027

University of Chicago Program
University of Chicago Hospitals
Program Director: Gregory A Schmidt, MD
The University of Chicago Hospitals
Dept of Medicine
5841 S Maryland Ave MCB26
Chicago, IL 60637-1479
312-753-1454
Length: 2 Year(s) Total Positions: 13
Program ID: 142-16-11-014

North Chicago
Fitch University of Health Sciences/Chicago Medical School Program
Fitch University of Health Sciences/Chicago Medical School
Cook County Hospital
Mount Sinai Hospital Medical Center of Chicago
Veterans Affairs Medical Center (North Chicago)
Program Director: Eric H Gluck, MD
Univ of Illinois/Chicago Med Sch
Dept of Medicine
3333 Green Bay Rd
North Chicago, IL 60064-3095
708-578-2001
Length: 2 Year(s) Total Positions: 6
Program ID: 142-14-21-029

Kentucky

Lexington
University of Kentucky Medical Center Program
University Hospital-Albert B Chandler Medical Center
Veterans Affairs Medical Center (Lexington)
Program Director: Richard Glassock, MD
University Hospital Albert B Chandler Medical Center
800 Ross Rd
Lexington, KY 40511
606-228-5645
Length: 1 Year(s)
Program ID: 142-20-21-126

Louisiana

New Orleans
Tulane University Program*
Tulane University School of Medicine
Tulane University Hospital and Clinic
Veterans Affairs Medical Center-Tulane Service (New Orleans)
Program Director: Kevin L Kortitz, MD
Dept of Medicine
1430 Tulane Ave SL9
New Orleans, LA 70112-3249
504-868-2250
Length: 1 Year(s) Total Positions: 3
Program ID: 142-21-21-158

Shreveport
Louisiana State University (Shreveport) Program
Louisiana State University Medical Center-Shreveport
Overton Brooks Veterans Affairs Medical Center
Program Director: Steven A Czandza, MD
Louisiana State University Medical Center
Department of Med Ed (Medicine)
1501 Kings Hwy PO Box 39002
Shreveport, LA 71130-3922
318-674-5020
Length: 2 Year(s) Total Positions: 3
Program ID: 142-21-21-032

Maryland

Baltimore
Harbor Hospital Center Program*
Harbor Hospital Center
University of Maryland Medical System
Program Director: John Britten, MD
Medical Institute For Emergency Medical Services Systems
22 S Greene St
Baltimore, MD 21201
301-358-3902
Length: 2 Year(s) Total Positions: 2
Program ID: 142-23-31-008

Johns Hopkins University Program
Johns Hopkins University School of Medicine
Johns Hopkins Hospital
Program Director: Roy G Brower, MD
Michael Brenton, MD
The Johns Hopkins University School of Medicine
720 Rutland Ave
Rush Bldg Ste 658
Baltimore, MD 21205-2136
410-955-3467
Length: 1 Year(s) Total Positions: 6
Program ID: 142-23-11-087

University of Maryland Program
University of Maryland Medical System
Veterans Affairs Medical Center (Baltimore)
Program Director: Lewis J Rubin, MD
Henry J Silverman, MD
University of Maryland Medical Center
Div of Pulmonary & Critical Care
10 S Pine St Ste 900
Baltimore, MD 21201-1192
410-706-3044
Length: 1 Year(s) Total Positions: 9
Program ID: 142-23-21-088

Bethesda
National Institutes of Health Clinical Center Program*
NIH Warren Grant Magnuson Clinical Center
Washington Hospital Center
Program Director: Robert E Cusenlow, MD
Bldg 10 Room 7-D-43
National Institutes of Health
Bethesda, MD 20892
301-480-2200
Length: 2 Year(s) Total Positions: 12
Program ID: 142-23-21-128

* Updated information not provided.
Michigan
Detroit
Henry Ford Hospital Program
Program Director: John Popovich Jr, MD
Henry Ford Hospital
Internal Medicine-Critical Care
2700 W Grand Blvd
Detroit, MI 48202
313-876-3428
Length: 2 Year(s) Total Positions: 3
Program ID: 143-28-11-045

Wayne State University/Detroit Medical Center Program
Wayne State University School of Medicine
Detroit Receiving Hospital and University Health Center Harper Hospital
Program Director: Marilyn T. Haupt, MD
Detroit Receiving Hospital
Dep't of Medicine 55A-10
4001 St Antoine
Detroit, MI 48201
313-745-2998
Length: 2 Year(s) Total Positions: 12
Program ID: 143-28-21-043

Minnesota
Minneapolis
Hennepin County Medical Center Program*
Hennepin County Medical Center
Methodist Hospital
Program Director: James W Leidner, MD
Hennepin County Medical Center
701 Park Ave
Minneapolis, MN 55415
612-847-2825
Length: 2 Year(s) Total Positions: 4
Program ID: 143-28-21-118

University of Minnesota Program*
University of Minnesota Medical School
Hennepin County Medical Center
St Paul-Ramsey Medical Center
University of Minnesota Hospital and Clinic
Veterans Affairs Medical Center (Minneapolis)
Program Director: David H Ingbar, MD
Univ of Minnesota Hosp and Clinics
Box 270 UMMC
420 Delaware St SE
Minneapolis, MN 55455
612-624-0669
Length: 1 Year(s) Total Positions: 11
Program ID: 143-28-21-144

New Hampshire
Lebanon
Dartmouth-Hitchcock Medical Center Program
Mary Hitchcock Memorial Hospital
Program Director: Howard L. Corwin, MD
One Medical Center Dr
Lebanon, NH 03766
603-650-5900
Length: 2 Year(s) Total Positions: 3
Program ID: 143-28-31-140

New Jersey
Camden
UMDNJ-Robert Wood Johnson Medical School (Camden) Program
Cooper Hospital-University Medical Center
Program Director: Bruce O. Friedman, MD
Cooper Hospital-University Medical Center
Three Cooper Plaza
Ste 312
Camden, NJ 08103
609-941-2407
Length: 2 Year(s) Total Positions: 4
Program ID: 143-38-21-061
Newark
UMDNJ-New Jersey Medical School Program
UMDNJ-New Jersey Medical School
Newark Beth Israel Medical Center
UMDNJ University Hospital
Program Director:
Matthew G Martin, MD
UMDNJ-University Hospital
160 Bergen St
Pulmonary/Crit Care 1 354
Newark, NJ 07110-2406
201-951-6111
Length: 2 Year(s) Total Positions: 3
Program ID: 143-33-21-135

Piscataway
UMDNJ-Robert Wood Johnson Medical School Program
UMDNJ-Robert Wood Johnson Medical School
Deborah Heart and Lung Center
Robert Wood Johnson University Hospital
Program Director:
Anthony T Scardella, MD
UMDNJ-Robert Wood Johnson Medical School
One Robert Wood Johnson PI CN19
New Brunswick, NJ 08903-0619
908-295-7840
Length: 2 Year(s) Total Positions: 2
Program ID: 143-33-21-137

South Orange
Seton Hall University School of Graduate Medical Education Program
Seton Hall University School of Graduate Medical Education
Elizabeth General Medical Center
St Michael's Medical Center (Cathedral Health Services Inc.)
Program Director:
Marc R Adelman, MD
St Michael's Medical Center
305 Martin Luther King Blvd
Newark, NJ 07102
201-577-5200
Length: 2 Year(s) Total Positions: 2
Program ID: 143-33-11-050

New York
Bronx
Albert Einstein College of Medicine Program
Albert Einstein College of Medicine of Yeshiva University
Bronx Municipal Hospital Center
Montefiore Medical Center-Henry and Lucy Moses Division
Program Director:
Vladimir Kvetan, MD
Montefiore Medical Center
Div of Critical Care Medicine
111 E 210th St
Bronx, NY 10467
718-920-6440
Length: 2 Year(s) Total Positions: 10
Program ID: 143-35-21-1007

Brooklyn
Maimonides Medical Center Program
Maimonides Medical Center
Program Director:
Sidney Thaler, MD
Maimonides Medical Center
4902 Tenth Ave
Brooklyn, NY 11219
718-283-8300
Length: 1 Year(s) Total Positions: 4
Program ID: 143-35-11-056

SUNY Health Science Center at Brooklyn Program
SUNY Health Science Center at Brooklyn
University Hospital
Veterans Affairs Medical Center (Brooklyn)
Program Director:
Linda S Effron, MD
SUNY Health Science Center at Brooklyn
450 Clarkson Ave
Brooklyn, NY 11205-2088
718-270-1770
Length: 1 Year(s) Total Positions: 4
Program ID: 143-35-21-148

Manhasset
North Shore University Hospital Program
North Shore University Hospital
Program Director:
Peter M Reiser, MD FACC
North Shore University Hospital
Program Director:
Howard Levy, MD
University of Medicine and Dentistry of New Jersey
Department of Medicine
300 Community Dr
Manhasset, NY 11030
516-562-4763
Length: 2 Year(s) Total Positions: 3
Program ID: 143-35-21-082

New York
Beth Israel Medical Center Program
Beth Israel Medical Center
Program Director:
Mark J Rosen, MD
Beth Israel Medical Center
One Ave at 16th St
New York, NY 10003
212-420-2007
Length: 1 Year(s)
Program ID: 143-35-21-146

Mount Sinai School of Medicine Program
Mount Sinai School of Medicine
Mount Sinai hospital Center
Mount Sinai Hospital
Program Director:
John M Oropello, MD
Mount Sinai Medical Center
Queens Hospital Center
Program Director:
Ernest Benjamin, MD
Mount Sinai Medical Center
Surgical ICU (Box 3254)
Joseph Brattner, MD
New York, NY 10029-6747
212-242-7381
Length: 2 Year(s) Total Positions: 8
Program ID: 143-35-21-069

New York Hospital/Cornell Medical Center Program
New York Hospital/Cornell Medical Center
Program Director:
Jeffrey S Granger, MD
Memorial Sloan-Kettering Cancer Center
1275 York Ave
New York, NY 10021
212-746-8114
Length: 2 Year(s) Total Positions: 5
Program ID: 143-35-11-064

New York Hospital/Cornell Medical Center Program
New York Hospital
Program Director:
Ronald G Crystal, MD
New York Hospital/Cornell Medical Center
1275 York Ave
New York, NY 10021
212-746-2250
Length: 1 Year(s) Total Positions: 9
Program ID: 143-35-21-083

Presbyterian Hospital in the City of New York Program
Presbyterian Hospital in the City of New York
Program Director:
Glenda J Garvey, MD
Columbia University
878 York Ave
New York, NY 10021
212-305-0723
Length: 1 Year(s) Total Positions: 3
Program ID: 143-35-11-148

Rochester
University of Rochester Program
University of Rochester
Program Director:
Carole B Ortiz, MD
Genessee Hospital
Fulminant and Critical Care Div
277 Alexander St.
Rochester, NY 14607
716-257-0077
Length: 2 Year(s) Total Positions: 5
Program ID: 143-35-21-141

*Updated information not provided.
Stony Brook

SUNY at Stony Brook Program
University Hospital-SUNY at Stony Brook
Veterans Affairs Medical Center (Northport)
Program Director:
Adam Hurwitz, MD
SUNY at Stony Brook
RSC 17-540
Stony Brook, NY 11794-8172
516 444-1775
Length: 2 Year(s)  Total Positions: 2
Program ID: 142-35-21-100

Syracuse

SUNY Health Science Center at Syracuse Program
University Hospital-SUNY Health Science Center at Syracuse
Crouse-Irving Memorial Hospital
Program Director:
Leo C Botello, MD
SUNY Health Science Center
750 E Adams St
Syracuse, NY 13210
315 464-5320
Length: 2 Year(s)  Total Positions: 4
Program ID: 142-35-21-108

Valhalla

New York Medical College (Lincoln) Program
New York Medical College
Lincoln Medical and Mental Health Center
Westchester County Medical Center
Program Director:
Anita Soni, MD
Lincoln Medical and Mental Health Center
234 E 149th St
Bronx, NY 10451
212 578-0874
Length: 2 Year(s)  Total Positions: 2
Program ID: 142-35-21-106

New York Medical College at St Vincent's Hospital and Medical Center of New York Program
New York Medical College
St Vincent's Hospital and Medical Center of New York
Program Director:
Mark E Astia, MD
St Vincent's Hospital and Medical Center of New York
Dept of Medicine
153 W 11th St
New York, NY 10011
212 790-6236
Length: 2 Year(s)  Total Positions: 5
Program ID: 142-35-11-658

North Carolina

Durham

Duke University Program
Duke University Medical Center
Program Director:
William J Fulkeron Jr, MD
Duke University Medical Center
Box 3121
Durham, NC 27710
919 681-5850
Length: 1 Year(s)  Total Positions: 4
Program ID: 142-35-21-068

Winston-Salem

Bowman Gray School of Medicine Program
North Carolina Baptist Hospital
Program Director:
David L Bowton, MD
Bowman Gray School of Medicine
Medical Center Blvd
Winston-Salem, NC 27157-1054
910 715-4649
Length: 2 Year(s)  Total Positions: 4
Program ID: 142-35-21-089

Virginia

University of Virginia Program
University Medical Center
Program Director:
Seymour Weinberger, MD
701 Christ Hospital
Charlottesville, VA 22908
434 825-7144
Length: 1 Year(s)  Total Positions: 1
Program ID: 142-35-21-090

Ohio

Cleveland

Case Western Reserve University Program
University Hospitals of Cleveland
Program Director:
E Regia McFadden Jr, MD
Pulmonary/Critical Care Division
University Hospitals of Cleveland
11900 Euclid Ave
Cleveland, OH 44106-4389
216 844-3591
Length: 2 Year(s)
Program ID: 142-35-21-072

Oregon

Portland

Oregon Health Sciences University Program
Oregon Health Sciences University Hospital
Veterans Affairs Medical Center (Portland)
Program Director:
Stephen B Hall, MD PhD
Oregon Health Science University
3181 SW Sam Jackson Park Rd
UNR-67
Portland, OR 97201-3068
503 494-7580
Length: 2 Year(s)  Total Positions: 2
Program ID: 142-48-21-139

Pennsylvania

Hershey

Milton S Hershey Medical Center of Pennsylvania State University Program
Penn State University Hospital-Milton S Hershey Med Ctr
Program Director:
Clifford W Zwillich, MD
Milton S Hershey Medical Center
Pennsylvania State University
PO Box 850
Hershey, PA 17033
717 531-6535
Length: 1 Year(s)  Total Positions: 3
Program ID: 142-41-11-079

Philadelphia

University of Pennsylvania Program*
Hospital of the University of Pennsylvania
Veterans Affairs Medical Center (Philadelphia)
Program Director:
John Hansen-Flaschen, MD
Hospital of the University of Pennsylvania
Pulmonary/Critical Care Fellowship
3600 Spruce St 622 W Gates
Philadelphia, PA 19104-4283
215 541-5464
Length: 1 Year(s)
Program ID: 142-41-21-078

Pittsburgh

University Health Center of Pittsburgh Program 1
University Health Center of Pittsburgh
Presbyterian University HospitalUPMC
Veterans Affairs Medical Center (Pittsburgh)
Program Director:
David J Powner, MD
Critical Care Med
612 Moffett Hall
Pittsburgh, PA 15223
412 647-3300
Length: 2 Year(s)  Total Positions: 22
Program ID: 142-41-21-114

Rhode Island

Providence

Brown University (Miriam) Program
Miriam Hospital
Rhode Island Hospital
Program Director:
William Kaye, MD
Miriam Hospital
164 Summit AVE
Div of Critical Care Med
Providence, RI 02906
401 331-5650
Length: 2 Year(s)  Total Positions: 3
Program ID: 142-43-11-048

Brown University Program
Rhode Island Hospital
Roger Williams Medical Center
Veterans Affairs Medical Center (Providence)
Program Director:
Sidney S Bransan, MD
Rhode Island Hospital
663 Eddy St
Providence, RI 02902
401 777-5206
Length: 1 Year(s) Total Positions: 2
Program ID: 142-43-11-082

* Updated information not provided.
Tennessee

Memphis
University of Tennessee Program
University of Tennessee College of Medicine
Regional Medical Center at Memphis
Veterans Affairs Medical Center (Memphis)
Program Director:
Richard G. Wunderink, MD
The University of Tennessee Memphis
954 Court Ave RM H114
Memphis, TN 38163
901 448-5757
Length: 1 Year(s)
Program ID: 145-47-21-123

Texas

Fort Sam Houston
Brooke Army Medical Center Program
Brooke Army Medical Center
Program Director:
Gerald R Harrington, MD
Brooke Army Medical Center
Dept of Surgery
Critical Care Med Service
Fort Sam Houston, TX 78234
210 916-1550
Length: 2 Year(s) Total Positions: 3
Program ID: 145-48-13-087

Houston

 Baylor College of Medicine Program
 Baylor College of Medicine
 Methodist Hospital
 Program Director:
 AJ O Dao, MD
 Baylor College of Medicine Methodist Hospital
 6550 Fannin Ste 1233
 Houston, TX 77030
 713 796-2328
 Length: 2 Year(s) Total Positions: 3
 Program ID: 145-48-21-091

Lackland AFB

Wilford Hall USAF Medical Center Program
Wilford Hall USAF Medical Center (SG)
Program Director:
Stephen D. Rakaczki, DO
58th Medical Wing (FSMP)
2200 Bergquist Dr Ste 1
Lackland AFB, TX 78236-5800
210 796-6257
Length: 1 Year(s) Total Positions: 2
Program ID: 145-48-12-088

Utah

Salt Lake City
University of Utah Program
University of Utah Medical Center
LDS Hospital
Program Director:
James P. Orme Jr, MD
LDS Hospital
Eighth Ave and C St
Salt Lake City, UT 84143
801 321-3651
Length: 1 Year(s) Total Positions: 4
Program ID: 142-49-21-092

Virginia

Charlottesville
University of Virginia Program
University of Virginia Medical Center
Program Director:
Jonathan D. Truwit, MD
University of Virginia Health Sciences Center
Box 540
Charlottesville, VA 22908-0001
804 924-5210
Length: 2 Year(s) Total Positions: 2
Program ID: 145-41-21-107

Washington

Seattle
University of Washington Program
University of Washington School of Medicine
University of Washington Medical Center
Program Director:
Leonard D. Hudson, MD
Harborview Medical Center
325 Ninth Ave
Seattle, WA 98104
206 225-3356
Length: 2 Year(s) Total Positions: 10
Program ID: 142-64-21-084

Wisconsin

Milwaukee
Medical College of Wisconsin Program
Medical College of Wisconsin Affiliated Hospitals Inc
Procdert Memorial Lutheran Hospital
John J. Doyne Hospital
St Lukes Medical Center
Program Director:
Kenneth W. Persons, MD
Medical College of Wisconsin
Pulmonary/Critical Care
4006 W Wisconsin Ave
Milwaukee, WI 53226
414 454-5250
Length: 1 Year(s) Total Positions: 4
Program ID: 145-46-21-116

Cytopathology
(Pathology-Anatomic and Clinical)

Alabama

Birmingham
University of Alabama Medical Center Program
University of Alabama Hospital
Veterans Affairs Medical Center (Birmingham)
Program Director:
William H Rodgers, MD PhD
Dept of Pathology University of Alabama Hospital
1922 7th Ave B
Kracke Bldg Rm 522A
Birmingham, AL 35233-1924
205 975-8886
Length: 1 Year(s) Total Positions: 1
Program ID: 307-04-21-041

Arkansas

Little Rock
University of Arkansas for Medical Sciences Program
University of Arkansas College of Medicine
John L. McClellan Memorial Veterans Hospital
Program Director:
Michael W Stanley, MD
University of Arkansas for Medical Sciences
4301 W Markham Slot 517
Little Rock, AR 72205-7199
501 686-5171
Length: 1 Year(s) Total Positions: 1
Program ID: 307-04-21-084

California

Los Angeles
UCLA Medical Center Program
UCLA School of Medicine
UCLA Medical Center
Program Director:
Dorothy L. Rosenblum, MD
A3-231T
UCLA Center for the Health Sciences
10855 Le Conte Ave
Los Angeles, CA 90024-1732
310 206-8688
Length: 1 Year(s) Total Positions: 1
Program ID: 974-46-21-019

* Updated information not provided.
<table>
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<tr>
<th>State</th>
<th>Program Details</th>
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<tbody>
<tr>
<td><strong>Connecticut</strong>&lt;br&gt;Hartford&lt;br&gt;<strong>Hartford Hospital Program</strong>&lt;br&gt;Hartford Hospital&lt;br&gt;Program Director: William E Clark II, MD&lt;br&gt;Div of Anatomic Pathology&lt;br&gt;Hartford Hospital&lt;br&gt;Hartford, CT 06114-5037&lt;br&gt;203 545-5500&lt;br&gt;Length: 1 Year(s) Total Positions: 1&lt;br&gt;Program ID: 307-08-21-038</td>
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<tr>
<td><strong>District of Columbia</strong>&lt;br&gt;Washington&lt;br&gt;<strong>George Washington University Program</strong>&lt;br&gt;George Washington University School of Medicine&lt;br&gt;Washington Hospital Center&lt;br&gt;Program Director: Herschel Sidorinsky, MD&lt;br&gt;2300 Eye St NW&lt;br&gt;Washington, DC 20037&lt;br&gt;202 954-2991&lt;br&gt;Length: 1 Year(s) Total Positions: 2&lt;br&gt;Program ID: 307-10-21-005</td>
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<td><strong>Florida</strong>&lt;br&gt;Gainesville&lt;br&gt;<strong>University of Florida Program</strong>&lt;br&gt;University of Florida College of Medicine&lt;br&gt;Shands Hospital at the University of Florida&lt;br&gt;Veterans Affairs Medical Center (Gainesville)&lt;br&gt;Program Director: Edward J Wilkinson, MD&lt;br&gt;Dept of Pathology&lt;br&gt;PO Box 100725&lt;br&gt;Gainesville, FL 32610&lt;br&gt;352 385-6088&lt;br&gt;Length: 1 Year(s) Total Positions: 1&lt;br&gt;Program ID: 307-11-21-047</td>
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<td><strong>Georgia</strong>&lt;br&gt;Atlanta&lt;br&gt;<strong>Emory University Program</strong>&lt;br&gt;Emory University School of Medicine&lt;br&gt;Emory University Hospital&lt;br&gt;Grady Memorial Hospital&lt;br&gt;Ninestita Egleston Hospital for Children&lt;br&gt;Program Director: Ted Gisler, MD&lt;br&gt;Dept of Pathology&lt;br&gt;1512 Clifton Rd NE&lt;br&gt;Atlanta, GA 30322-8110&lt;br&gt;404 727-7392&lt;br&gt;Length: 1 Year(s) Total Positions: 3&lt;br&gt;Program ID: 307-12-21-058</td>
<td></td>
</tr>
<tr>
<td><strong>Illinois</strong>&lt;br&gt;Chicago&lt;br&gt;<strong>McGaw Medical Center of Northwestern University Program</strong>&lt;br&gt;Northwestern University Medical School&lt;br&gt;Veterans Affairs Medical Center (Chicago)&lt;br&gt;Program Director: Denise Fries-Hideväg, MD&lt;br&gt;Director of Cytopathology Laboratories&lt;br&gt;303 E Superior Passavant Pavilion&lt;br&gt;Chicago, IL 60611&lt;br&gt;312 926-8860&lt;br&gt;Length: 1 Year(s) Total Positions: 3&lt;br&gt;Program ID: 307-18-21-087</td>
<td></td>
</tr>
<tr>
<td><strong>Louisiana</strong>&lt;br&gt;<strong>Auburn University College of Medicine Program</strong>&lt;br&gt;Auburn, AL 36849&lt;br&gt;Length: 1 Year(s) Total Positions: 1&lt;br&gt;Program ID: 307-19-21-001</td>
<td></td>
</tr>
<tr>
<td><strong>Louisiana</strong>&lt;br&gt;<strong>University of Louisiana Program</strong>&lt;br&gt;University of Louisiana School of Medicine&lt;br&gt;Program Director: James P Parker, MD&lt;br&gt;University of Louisiana School of Medicine&lt;br&gt;Houma Hospital—University of Louisville&lt;br&gt;730 S Jackson St&lt;br&gt;Louisville, KY 40202&lt;br&gt;262 585-6398&lt;br&gt;Length: 1 Year(s) Total Positions: 1&lt;br&gt;Program ID: 307-20-21-036</td>
<td></td>
</tr>
</tbody>
</table>

* Updated information not provided.
Accredited Programs in Cytopathology (Pathology-Anatomic and Clinical)

Louisiana

New Orleans

Louisiana State University Program*
Louisiana State University School of Medicine
Medical Center of Louisiana at New Orleans-LSU Division
Program Director:
Lester Vital Jr, MD
Dept of Pathology
LSU School of Medicine
1001 Perdido St
New Orleans, LA 70112
504 586-8031
Length: 1 Year(s)
Program ID: 307-31-061

Maryland

Bethesda

National Institutes of Health Clinical Center Program*
NIH Warren Grant Magnuson Clinical Center
National Naval Medical Center (Bethesda)
Program Director:
Andrea Ablah, MD
NIH/National Cancer Institute - Cytopathology Section
9000 Rockville Pike
Bldg 10 Rm 2A19
Bethesda, MD 20892
301 496-6355
Length: 1 Year(s)
Program ID: 307-31-032

National Naval Medical Center (Bethesda) Program
National Naval Medical Center (Bethesda)
National Cancer Institute
Program Director:
Michael Henry, MD
C MC USN Cytopathology Branch National Naval Medical Ctr
Lab Dept Bldg 9
8801 Wisconsin Ave
Bethesda, MD 20889-6666
301 286-6192
Length: 1 Year(s) Total Positions: 1
Program ID: 307-33-033

Mississippi

Jackson

University of Mississippi Medical Center Program*
University of Mississippi School of Medicine
Veterans Affairs Medical Center (Jackson)
Program Director:
Luciano B Lemus, MD
University of Mississippi Medical Center
2500 N State St
Jackson, MS 39216-4506
601 894-1069
Length: 1 Year(s) Total Positions: 1
Program ID: 307-31-057

Michigan

Ann Arbor

University of Michigan Program
University of Michigan Hospitals
Program Director:
Bernard Naylor, MD
University Hospitals 20332/0054
1500 E Medical Center Dr
Ann Arbor, MI 48109-0054
313 856-6775
Length: 1 Year(s) Total Positions: 1
Program ID: 307-35-019

Detroit

Henry Ford Hospital Program
Henry Ford Hospital
Program Director:
Sutha R Rani, MD
Henry Ford Hospital
Div of Cytopathology
2788 W Grand Blvd
Detroit, MI 48202
313 870-2302
Length: 1 Year(s) Total Positions: 2
Program ID: 307-35-020

Wayne State University/Detroit Medical Center Program
Wayne State University School of Medicine
Harpers Hospital
Hutzel Hospital
Program Director:
Carlos W M Bedrossian, MD
Dept of Cytopathology
Detroit Medical Center
4707 St Antoine Blvd
Detroit, MI 48201
313 745-6854
Length: 1 Year(s)
Program ID: 307-35-046

Royal Oak

William Beaumont Hospital Program
William Beaumont Hospital
Program Director:
Edward G Bernacki Jr, MD
Dept of Anatomic Pathology
William Beaumont Hospital
3601 W 12 Mile Rd
Royal Oak, MI 48073
810 561-0060
Length: 1 Year(s) Total Positions: 1
Program ID: 307-35-015

Missouri

St Louis

St Louis University Group of Hospitals Program
St Louis University School of Medicine
St Louis University Hospital
Program Director:
Lorenzo M Galindo, MD
3625 Vista at Grand Blvd
PO Box 1256
St Louis, MO 63110-0205
314 577-0400
Length: 1 Year(s) Total Positions: 1
Program ID: 307-39-040

*Updated information not provided.
New York

SUNY Health Science Center at Syracuse Program
University Hospital-SUNY Health Science Center at Syracuse

Valhalla

New York Medical College at Westchester County Medical Center Program

Mount Sinai School of Medicine Program*

New York Hospital/Cornell Medical Center Program*

Rochester

University of Rochester Program*

Syracuse

Greenville

East Carolina University Program
East Carolina University School of Medicine
Pitt County Memorial Hospital

Ohio

Akron

Akron City Hospital (Summa Health System)/NEUOCOM Program

Cincinnati

University of Cincinnati Hospital Group Program

Cleveland

Case Western Reserve University (MetroHealth) Program

Pennsylvania

Danville

Geisinger Medical Center Program*
Accredited Programs in Cytopathology (Pathology-Anatomic and Clinical)

Philadelphia
MCPH/Medical College of Pennsylvania Hospital Program
Medical College of Pennsylvania Hospital Veterans Affairs Medical Center (Philadelphia)
Program Director:
Pamela R. Edmonds, MD
Medical College of Pennsylvania
Dept of Cytotechnology
3300 Henry Ave
Philadelphia, PA 19129
215 842-7713
Length: 1 Year(s)  Total Positions: 3
Program ID: 307-41-31-028

Thomas Jefferson University Program
Thomas Jefferson University Hospital
Program Director:
Marcia Bibo, MD
Thomas Jefferson University Hospital
260 A Main Bldg
135 S. 10th St
Philadelphia, PA 19107
215 893-2871
Length: 1 Year(s)  Total Positions: 15 (GYI: 5)
Program ID: 307-41-31-009

University of Pennsylvania Program
Hospital of the University of Pennsylvania
Program Director:
Prabodh K. Gupta, MD
University of Pennsylvania Medical Center
4th Fl Foundations Pavilion
3400 Spruce St
Philadelphia, PA 19104-4233
215 662-2323
Length: 1 Year(s)  Total Positions: 2
Program ID: 307-41-31-004

Pittsburgh
University Health Center of Pittsburgh Program
University Health Center of Pittsburgh Magee-Women’s Hospital
Program Director:
Anisah I. Explain, MD
David Dussin, MD
Dept of Pathology
Magee-Women’s Hospital
300 11th St
Pittsburgh, PA 15213
412 641-6667
Length: 1 Year(s)  Total Positions: 1
Program ID: 307-41-31-049

Wynnewood
Lankenau Hospital Program*
Lankenau Hospital
Program Director:
Tisha S. Kline, MD
Lankenau Hospital
100 Lancaster Ave West of City Line
Wynnewood, PA 19096
215 664-3023
Length: 1 Year(s)
Program ID: 307-41-21-010

South Carolina
Charleston
Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
Program Director:
Mary M. Wilson, MD
Medical University of South Carolina
171 Ashley Ave
Dept of Pathology/Anatomic Medicine
Charleston, SC 29425
803 792-2171
Length: 1 Year(s)  Total Positions: 1
Program ID: 307-48-21-012

San Antonio
University of Texas at San Antonio Program
University of Texas Medical School at San Antonio Audie L. Murphy Memorial Veterans Hospital (San Antonio)
University Hospital-South Texas Medical Center Program
Program Director:
Philip T. Valentine, MD
University of Texas Health Science Center
Dept of Cytotechnology
7703 Floyd Crull Dr
San Antonio, TX 78284-7750
210 657-3134
Length: 1 Year(s)  Total Positions: 1
Program ID: 307-48-21-018

Texas
Fort Sam Houston
Brooke Army Medical Center Program
Brooke Army Medical Center
Wilford Hall USAF Medical Center (SB)
Program Director:
Hanaa B. Raval, MD
Cytotechnology Fellowship Program
Brooke Army Medical Center
Fort Sam Houston, TX 78234-3286
210 916-1023
Length: 1 Year(s)  Total Positions: 1 (GYI: 1)
Program ID: 307-48-31-017

Houston
Baylor College of Medicine Program
Baylor College of Medicine
Harris County Hospital District/Ben Taub General Hospital
Methodist Hospital Veterans Affairs Medical Center (Houston)
Program Director:
Ibrahim Rassu, MD
Baylor College of Medicine
Div of Cytotechnology
One Baylor Plaza
Houston, TX 77030-3408
713 798-4608
Length: 1 Year(s)  Total Positions: 2
Program ID: 307-48-21-023

University of Texas M D Anderson Cancer Center Program*
University of Texas M D Anderson Cancer Center
Program Director:
Ruiz E. Katz, MD
University of Texas M D Anderson Cancer Center
1515 Holcombe Blvd
Houston, TX 77030
713 794-6025
Length: 1 Year(s)
Program ID: 307-48-21-054

Wisconsin
Madison
University of Wisconsin Program
University of Wisconsin Hospital and Clinics
Program Director:
Daniel F. Krumpeck, MD
University of Wisconsin State Laboratory of Hygiene
465 Henry Mall
Madison, WI 53706
608 263-8491
Length: 1 Year(s)  Total Positions: 1 (GYI: 0)
Program ID: 307-48-21-082

* Updated information not provided.
Dermatology

Alabama

Birmingham
University of Alabama Medical Center Program
University of Alabama Hospital
Veterans Affairs Medical Center (Birmingham)
Program Director:
W Mitchel Sams Jr, MD
Dept of Dermatology
UAB/Univ Station
SDB 76
Birmingham, AL 35294-0007
205 934-4141
Length: 3 Year(s) Total Positions: 6 (GYI: 0)
Subspecialties: DMP
Program ID: 060-01-21-010

Arizona

Tucson
University of Arizona Program
University of Arizona College of Medicine
Kino Community Hospital
University Medical Center
Veterans Affairs Medical Center (Tucson)
Program Director:
Ronald C Hansen, MD
Univ of Arizona Hlth Sci Ctr Section of Dermatology
1501 N Campbell
Tucson, AZ 85724
922 629-7183
Length: 3 Year(s) Total Positions: 5 (GYI: 0)
Program ID: 060-03-21-012

Arkansas

Little Rock
University of Arkansas for Medical Sciences Program
University of Arkansas College of Medicine
John L McCollum Memorial Veterans Hospital
University Hospital of Arkansas
Program Director:
Jere D Gun, MD
Univ of Arkansas College of Medicine
4301 W Markham
Slot 579
Little Rock, AR 72205
501 686-6110
Length: 3 Year(s) Total Positions: 9 (GYI: 2)
Program ID: 060-04-21-013

California

Loma Linda
Loma Linda University Program
Loma Linda University Medical Center
Jerry I Potts Memorial Veterans Hospital
Program Director:
Abel Torres, MD
Loma Linda University Faculty Medical Offices
Dermatology Ste 2600
13797 Anderson St
Loma Linda, CA 92354
909 798-4842
Length: 3 Year(s) Total Positions: 3 (GYI: 0)
Program ID: 060-06-21-111

Los Angeles
Charles R Drew University Program*
Charles R Drew University Of Medicine And Science
LAC-Kings/Drew Medical Center
Program Director:
A Paul Kelly, MD
Martin Luther King Jr-Drew Med Ctr
12001 S Wilmering Ave
Los Angeles, CA 90096
310 603-4571
Length: 3 Year(s) Total Positions: 6 (GYI: 0)
Program ID: 060-06-12-216

UCLA Medical Center Program
UCLA School of Medicine
UCLA Medical Center
Veterans Affairs Medical Center (West Los Angeles)
Program Director:
Ronald M Roeser, MD
UCLA Sch of Med
Div of Dermatology
CHS S2-121
Los Angeles, CA 90095-1750
310 825-7144
Length: 3 Year(s) Total Positions: 9 (GYI: 3)
Program ID: 060-06-21-017

University of Southern California Program
Los Angeles County-USC Medical Center
Program Director:
Thomas H Box, MD
Los Angeles County- USC Medical Center
1200 N State St
RM 8440
Los Angeles, CA 90033
213 229-3273
Length: 3 Year(s) Total Positions: 10 (GYI: 0)
Program ID: 060-05-11-015

Orange
University of California (Irvine) Program
University of California (Irvine) Medical Center
Veterans Affairs Medical Center (Long Beach)
Program Director:
Edward Weinstein, MD
Dept of Dermatology
University of California Irvine
Med Sci I C 340
Irvine, CA 92717
714 856-5515
Length: 3 Year(s) Total Positions: 9 (GYI: 0)
Subspecialties: DMP
Program ID: 060-05-21-014

Sacramento
University of California (Davis) Program
University of California (Davis) Medical Center
Program Director:
Edward C Gomez, MD PhD
Dept of Dermatology
1600 Alhambra Blvd #2500
Sacramento, CA 95816
916 734-6705
Length: 3 Year(s) Total Positions: 6 (GYI: 0)
Program ID: 060-06-21-101

San Diego
Naval Medical Center (San Diego) Program*
Naval Medical Center (San Diego)
Program Director:
Capt James H Kerr, MD
Nava Medical Center
Code 43 Dept of Dermatology
San Diego, CA 92134-5000
619 632-9266
Length: 3 Year(s)
Subspecialties: DMP
Program ID: 060-05-21-006

University of California (San Diego) Program
University of California (San Diego) Medical Center
Veterans Affairs Medical Center (San Diego)
Program Director:
Irma Gigli, MD
Div of Dermatology/5429
UCSD Medical Center
200 W Arbor Dr
San Diego, CA 92103-9420
619 543-5580
Length: 3 Year(s) Total Positions: 6 (GYI: 0)
Program ID: 060-05-21-018

San Francisco
University of California (San Francisco) Program
University of California (San Francisco) School of Medicine
San Francisco General Hospital Medical Center
University of California (San Francisco) Medical Center
Veterans Affairs Medical Center (San Francisco)
Program Director:
Richard B Odum, MD
Univ of California (San Francisco) Medical Center
400 Parnassus Ave Rm A-328
San Francisco, CA 94143-0015
415 476-2066
Length: 3 Year(s) Total Positions: 10 (GYI: 0)
Subspecialties: DMP
Program ID: 060-05-21-019

Stanford
Stanford University Program*
Stanford University Hospital
Santa Clara Valley Medical Center
Veterans Affairs Medical Center (Palo Alto)
Program Director:
A Eugene A Bauer, MD
Stanford University School of Medicine
Dept of Dermatology
800 Blake Wilbur Dr Rm W0069
Palo Alto, CA 94304-2205
415 723-7803
Length: 3 Year(s) Total Positions: 13 (GYI: 0)
Program ID: 060-06-21-020

* Updated information not provided.
Accredited Programs in Dermatology

Torrance
Los Angeles County-Harbor-UCLA Medical Center Program
Los Angeles County-Harbor-UCLA Medical Center
Program Director: Arnold W. Guerzitch, MD
LAC-Harbor UCLA Med Ctr
Div of Dermatology
1000 W Carson St Box 9
Torrance, CA 90609-2290
310 222-2466
Length: 3 Year(s)  Total Positions: 4  (GYI: 0)
Program ID: 080-06-11-021

Colorado
Aurora
Fitzsimons Army Medical Center Program
Fitzsimons Army Medical Center
Program Director: Col James E. Fitzpatrick, MD
Fitzsimons Army Medical Center
Dermatology Service
Aurora, CO 80045-5021
303 361-8647
Length: 3 Year(s)  Total Positions: 4  (GYI: 0)
Program ID: 080-07-11-003

Denver
University of Colorado Program
University of Colorado Health Sciences Center
Denver Health and Hospitals
Veterans Affairs Medical Center (Denver)
Program Director: William L. Watson, MD
University of Colorado Health Sci Ctr
4200 E Ninth Ave Box E151
Denver, CO 80262
303 270-7728
Length: 3 Year(s)  Total Positions: 9  (GYI: 0)
Program ID: 080-07-21-022

District of Columbia
Washington
George Washington University Program
George Washington University School of Medicine
George Washington University Hospital
Program Director: Mervyn L. Elgart, MD
George Washington University Hospital
2150 Pennsylvania Ave NW
Washington, DC 20037
202 994-9496
Length: 3 Year(s)  Total Positions: 3  (GYI: 0)
Subspecialties: DMP
Program ID: 080-19-21-024

Howard University Program
Howard University Hospital
Veterans Affairs Medical Center (Washington DC)
Program Director: Belal M. Haldar, MD
Howard Univ Hosp
Dept of Dermatology
2641 Georgia Ave NW
Washington, DC 20050
202 866-6726
Length: 3 Year(s)  Total Positions: 5  (GYI: 0)
Program ID: 080-10-21-025

Walter Reed Army Medical Center Program
Walter Reed Army Medical Center
Program Director: Col William D. Javen, MD
Walter Reed Army Med Ctr
Dept of Dermatology
1701 16th St NW
Washington, DC 20006
202 777-6241
Length: 3 Year(s)  Total Positions: 11  (GYI: 0)
Program ID: 080-10-12-004

Washington Hospital Center Program
Washington Hospital Center
Program Director: Thomas P. Njogu, MD
Washington Hospital Center
110 Irving St NW 2B-44
Washington, DC 20010-2975
202 877-6654
Length: 3 Year(s)  Total Positions: 5  (GYI: 0)
Program ID: 080-10-21-108

Florida
Gainesville
University of Florida Program
University of Florida College of Medicine
Shands Hospital at the University of Florida
Veterans Affairs Medical Center (Gainesville)
Program Director: Franklin P. Flowers, MD
Div of Dermatology
Box 100277 JHMHC
Gainesville, FL 32610
904 392-4894
Length: 3 Year(s)  Total Positions: 6  (GYI: 0)
Program ID: 080-11-21-115

Miami
University of Miami-Jackson Memorial Medical Center Program
University of Miami-Jackson Memorial Medical Center
Mount Sinai Medical Center of Greater Miami
Veterans Affairs Medical Center (Miami)
Program Director: William H. English, MD
Univ of Miami Sch of Med
Dept of Dermatology
PO Box 01620 (B-250)
Miami, FL 33101-6256
305 547-6734
Length: 3 Year(s)  Total Positions: 20  (GYI: 0)
Program ID: 080-11-21-026

Tampa
University of South Florida Program
University of South Florida College of Medicine
James A Haley Veterans Hospital
Tampa General Healthcare
Program Director: Neil A. Pennese, MD
USF Coll of Med
Div of Dermatology MDC Box 19
12001 Bruce B Downs Blvd
Tampa, FL 33612-4790
813 974-2854
Length: 3 Year(s)  Total Positions: 9  (GYI: 0)
Program ID: 080-11-21-096

Georgia
Atlanta
Emory University Program
Emory University School of Medicine
Emory University Hospital
Grady Memorial Hospital
Veterans Affairs Medical Center (Atlanta)
Program Director: Mark S. Ingl, MD
Dept of Dermatology
6001 Woodruff Memorial Building
Emory University School of Medicine
Atlanta, GA 30322
404 727-5872
Length: 3 Year(s)  Total Positions: 15  (GYI: 0)
Program ID: 080-13-21-028

Augusta
Medical College of Georgia Program
Medical College of Georgia Hospital and Clinics
Dwight David Eisenhower Army Medical Center
Veterans Affairs Medical Center (Augusta)
Program Director: Donald C. Abele, MD
Sect of Dermatology
Medical College of Georgia
1120 15th St S
Augusta, GA 30901-3100
706 731-6228
Length: 3 Year(s)  Total Positions: 0  (GYI: 0)
Program ID: 080-13-11-029

* Updated information not provided.
Illinois

Chicago
Cook County Hospital Program
Cook County Hospital
Program Director: Darrel L Bronson, MD
Cook County Hospital
720 S Wolcott Ave
Karl Meyer Hall Rm #104
Chicago, IL 60612-9995
312-508-6300
Length: 3 Year(s) Total Positions: 8 (GY: 0)
Program ID: 080-16-12-030

McGaw Medical Center of Northwestern University Program
Northwestern University Medical School
Children's Memorial Center
Northwestern Memorial Hospital
Veterans Affairs Lakeside Medical Center (Chicago)
Program Director: David Woodley, MD
Dept of Dermatology
363 E Chicago Ave
Chicago, IL 60611
312-696-5173
Length: 3 Year(s) Total Positions: 8 (GY: 0)
Program ID: 080-16-21-031

Rush-Presbyterian-St Luke's Medical Center Program*
Rush-Presbyterian-St Luke's Medical Center
Program Director: Roger W Pearson, MD
Dept of Dermatology
Rush-Presbyterian-St Luke's Med Ctr
1653 W Congress Pkwy
Chicago, IL 60612-3835
312-942-0606
Length: 3 Year(s) Total Positions: 4 (GY: 0)
Program ID: 080-16-11-032

University of Chicago Program
University of Chicago Hospitals
Program Director: Kayuma Solante, MD
Sect of Dermatology
MC3067
5841 S Maryland Ave
Chicago, IL 60637-1470
312-722-6559
Length: 3 Year(s) Total Positions: 8 (GY: 0)
Program ID: 080-16-11-033

University of Illinois College of Medicine at Chicago Program
University of Illinois College of Medicine at Chicago
Edward J Hines Jr Veterans Affairs Hospital
University of Illinois Hospital and Clinics
Veterns Affairs Westside Medical Center (Chicago)
Program Director: Lawrence M Solomon, MD
University of Illinois Hospital
944 S Wood St MC 675
Chicago, IL 60616-7338
312-996-2693
Length: 3 Year(s) Total Positions: 12 (GY: 0)
Program ID: 080-16-21-034

Indiana

Indianapolis
Indiana University Medical Center Program
Indiana University Medical Center
Richard L Roudebush Veterans Affairs Medical Center
William N Winship Memorial Hospital
Program Director: Evan R Farmer, MD
Indiana University Medical Center
550 N University Blvd Ste 2249
Indianapolis, IN 46202-5257
317-274-7741
Length: 3 Year(s) Total Positions: 6 (GY: 0)
Subspeciality: DMP
Program ID: 080-17-21-035

Iowa

Iowa City
University of Iowa Hospitals and Clinics Program
University of Iowa Hospitals and Clinics
Program Director: John S Strauss, MD
University of Iowa Hospitals and Clinics
910 N 20th St
200 Hawkins Dr
Iowa City, IA 52242-1000
319-356-2274
Length: 3 Year(s) Total Positions: 12 (GY: 0)
Program ID: 080-16-21-036

Kansas

Kansas City
University of Kansas Medical Center Program
University of Kansas School of Medicine
University of Kansas Medical Center
Program Director: Donald V Beliso, MD
University of Kansas Medical Center Dept of Int Med
Dermatology Div
2901 Rainbow
Kansas City, KS 66160-7319
913-586-6258
Length: 3 Year(s) Total Positions: 3 (GY: 0)
Program ID: 080-10-11-037

Kentucky

Louisville
University of Louisville Program
University of Louisville School of Medicine
University of Louisville Hospital
Veterans Affairs Medical Center (Louisville)
Program Director: Jeffrey P Callen, MD
Univ of Louisville Hlth Sc Ctr
Div of Dermatology
Louisville, KY 40292
502-852-7287
Length: 3 Year(s) Total Positions: 4 (GY: 0)
Program ID: 080-20-21-038

Louisiana

New Orleans
Louisiana State University Program
Louisiana State University School of Medicine
Medical Center of Louisiana at New Orleans-LSU Division
Overton Brooks Veterans Affairs Medical Center
Veterans Affairs Medical Center-LSU Service (New Orleans)
Program Director: Lee T Neubitz Jr, MD
Louisiana State University School of Medicine
Dept of Dermatology
1542 Tulane Avenue Rm 634
New Orleans, LA 70112-2822
504-588-7110
Length: 3 Year(s) Total Positions: 12 (GY: 0)
Program ID: 080-21-21-109

Tulane University Program
Tulane University School of Medicine
Alton Ochsner Medical Foundation
Medical Center of Louisiana at New Orleans-Tulane Division
Tulane University Hospital and Clinics
Program Director: Larry E Millikan, MD
Tulane Univ Sch Med Dept of Dermatology
1430 Tulane Ave
Box 5175
New Orleans, LA 70111
504-588-5114
Length: 3 Year(s) Total Positions: 11 (GY: 1)
Program ID: 080-21-21-108

Maryland

Baltimore
Johns Hopkins University Program
Johns Hopkins University School of Medicine
Johns Hopkins Bayview Medical Center
Johns Hopkins Hospital
Program Director: Roxanne O'Brien, MD
Johns Hopkins Med Inst
600 N Wolfe St
Dept of Dermatology Block 920
Baltimore, MD 21205-4915
410-955-6043
Length: 3 Year(s) Total Positions: 9 (GY: 0)
Program ID: 080-29-21-040

University of Maryland Program
University of Maryland Medical System
Veterans Affairs Medical Center (Baltimore)
Program Director: Mark H Lowitt, MD
Univ of Maryland Med System
405 W Redwood St 6th Fl
Baltimore, MD 21201
410-328-5766
Length: 3 Year(s) Total Positions: 5 (GY: 0)
Program ID: 080-23-21-041

* Updated information not provided.
Accredited Programs in Dermatology

Bethesda
National Institutes of Health Clinical Center Program
NIH Warren Grant Magruder Clinical Center
Program Director: Stephen S Katz, MD
National Institutes of Health
Bldg 10 Rm 12N 238
National Cancer Institute
Bethesda, MD 20893-1908
301-496-2641
Length: 3 Year(s) Total Positions: 3 (GYI: 0)
Program ID: 080-23-12-008
National Naval Medical Center (Bethesda) Program
National Naval Medical Center (Bethesda)
Program Director: Dennis A Vidmar, MD
National Naval Medical Center
Dept of Dermatology
Bethesda, MD 20889-5000
301-255-5494
Length: 3 Year(s) Total Positions: 9 (GYI: 0)
Program ID: 080-23-11-007

Massachusetts
Boston
Boston University/Tufts University Program
Boston University Medical Center-Tufts University Hospital
Boston City Hospital
New England Medical Center Hospitals
Veterans Affairs Medical Center (Boston)
Program Director: Barbara A Gilchrist, MD
David S Feinberg, MD
Boston Univ Sch of Med
Dept of Dermatology J-100
80 E Concord St
Boston, MA 02118-2304
617-638-5000
Length: 3 Year(s) Total Positions: 16 (GYI: 0)
Program ID: 080-24-21-044

Harvard Medical School Program
Massachusetts General Hospital
Beth Israel Hospital
Brigham and Women's Hospital
Children's Hospital
Lahaye Clinic
New England Deaconess Hospital
Program Director: Howard P Baden, MD
Massachusetts General Hospital
Dept of Dermatology
32 Patient St Warren 601
Boston, MA 02114
617 726-6254
Length: 3 Year(s) Total Positions: 18 (GYI: 0)
Program ID: 080-24-21-043

Worcester
University of Massachusetts Medical Center Program*
University of Massachusetts Medical Center
Program Director: Thomas G Croot, MD
Univ of Massachusetts Med Ctr
Div of Dermatology
55 Lake Ave N
Worcester, MA 01655
508-856-2156
Length: 3 Year(s) Total Positions: 2 (GYI: 0)
Program ID: 080-24-21-114

Michigan
Ann Arbor
University of Michigan Program
University of Michigan Hospitals
Veterans Affairs Medical Center (Ann Arbor)
Program Director: Charles N Ellis, MD
University of Michigan Medical Center
Dermatology Residency
550 E Medical Center Dr 1910 TC
Ann Arbor, MI 48109-0314
313-988-4004
Length: 3 Year(s) Total Positions: 18 (GYI: 0)
Program ID: 080-23-31-046

Detroit
Henry Ford Hospital Program
Henry Ford Hospital
Program Director: Edward A Kroll, MD
Henry Ford Hospital
Dep of Dermatology
2799 W Grand Blvd
Detroit, MI 48202
313-876-2170
Length: 3 Year(s) Total Positions: 18 (GYI: 0)
Program ID: 080-25-12-046

Wayne State University/Detroit Medical Center Program
Wayne State University School of Medicine
Children's Hospital of Michigan
Detroit Receiving Hospital and University Health Center
Harper Hospital
Veterans Affairs Medical Center (Allen Park)
Program Director: Ken Hashimoto, MD
Wayne State University/Detroit Medical Center
4231 S Antoinette
Detroit, MI 48201
313-577-5007
Length: 3 Year(s) Total Positions: 11 (GYI: 0)
Program ID: 080-25-21-047

Minnesota
Minneapolis
University of Minnesota Program*
University of Minnesota Medical School
Hennepin County Medical Center
St Paul-Ramsey Medical Center
University of Minnesota Hospital and Clinic
Veterans Affairs Medical Center (Minneapolis)
Program Director: Mary Meighen, MD
Univ Hosp 500 5th Ave S
420 Delaware St SE
Minneapolis, MN 55455
612-626-5625
Length: 3 Year(s) Total Positions: 16 (GYI: 1)
Program ID: 080-26-31-048

Rochester
Mayo Graduate School of Medicine Program
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Rochester)
Rochester Methodist Hospital
St Mary's Hospital of Rochester
Program Director: Arnold L Schroeter, MD
MGSM Application Processing Ctr
Siebens Sch Fl
Mayo Graduate Sch of Med
Rochester, MN 55905
507-284-3108
Length: 3 Year(s) Total Positions: 18 (GYI: 0)
Program ID: 080-26-21-049

Missouri
Columbia
University of Missouri-Columbia Program
University of Missouri-Columbia School of Medicine
Harry S Truman Memorial Veterans Hospital
University and Children's Hospital
Program Director: Philip C Anderson, MD
Univ of Missouri Columbia
1 Hospital Rd Rm #M173
Columbia, MO 65212
314-962-5141
Length: 3 Year(s) Total Positions: 3 (GYI: 0)
Program ID: 080-26-21-050

St Louis
Barnes Hospital Group Program
Barnes Hospital
Program Director: Arthur Z Eisen, MD
Washington Univ Sch of Med
Div of Dermatology
660 S Euclid Ave Box 8133
St Louis, MO 63110
314-962-8109
Length: 3 Year(s) Total Positions: 16 (GYI: 0)
Subspeciality: DMP
Program ID: 080-26-21-051

* Updated information not provided.
New Mexico

Albuquerque

University of New Mexico Program
University of New Mexico School of Medicine
University Hospital
Veterans Affairs Medical Center (Albuquerque)
Program Director:
Ronald G. Wheeland, MD
Univ of New Mexico
Dept of Dermatology
2701 Frontier NE #260
Albuquerque, NM 87101
505-277-4775
Length: 3 Year(s) Total Positions: 4 (GY: 0)
Program ID: 080-34-21-064

New Hampshire

Lebanon

Dartmouth-Hitchcock Medical Center Program
Mary Hitchcock Memorial Hospital
Veterans Affairs Medical Center (White River Junction)
Program Director:
Daniel Collison, MD
Dartmouth-Hitchcock Medical Ctr
One Medical Center Dr
Lebanon, NH 03756
603-650-5180
Length: 3 Year(s) Total Positions: 6 (GY: 0)
Program ID: 080-32-21-053

New Jersey

Camden

UMDNJ Robert Wood Johnson Medical School Program
Cooper Hospital University Medical Center
Program Director:
Warren R. Hoymann, MD
Cooper Hosp Univ Med Ctr
Div of Dermatology
Three Cooper Plaza Ste 15
Camden, NJ 08103
609-526-0111
Length: 3 Year(s) Total Positions: 1 (GY: 0)
Program ID: 080-33-21-117

Newark

UMDNJ New Jersey Medical School Program
UMDNJ New Jersey Medical School
Dept of Veterans Affairs Medical Center (East Orange)
UMDNJ University Hospital
Program Director:
Robert A. Schwartz, MD
UMDNJ New Jersey Med Schl
186 S Orange Ave
Newark, NJ 07103-2714
201-958-3005
Length: 3 Year(s) Total Positions: 4 (GY: 0)
Program ID: 080-33-21-107

New York

Bronx

Albert Einstein College of Medicine Program
Albert Einstein College of Medicine of Yeshiva University
Bronx Municipal Hospital Center
Montefiore Medical Center-Henry and Lucy Moses Division
Montefiore Medical Center-Weiler Hospital
North Central Bronx Hospital
Program Director:
Michael Fisher, MD
Albert Einstein College of Medicine
Div of Dermatology
1300 Morris Park Ave
Bronx, NY 10461
718-458-2221
Length: 3 Year(s) Total Positions: 13 (GY: 0)
Program ID: 080-35-31-058

Brooklyn

SUNY Health Science Center at Brooklyn Program
SUNY HSC at Brooklyn College of Medicine
Kings County Hospital Center
University Hospital SUNY Health Science Center at Brooklyn
Veterans Affairs Medical Center (Brooklyn)
Program Director:
Alan R Shalita, MD
SUNY Health Science Center at Brooklyn
Dept of Dermatology
450 Clarkson Ave
Brooklyn, NY 11203
718-230-3629
Length: 3 Year(s) Total Positions: 14 (GY: 0)
Program ID: 080-35-21-065

Buffalo

SUNY at Buffalo Graduate Medical-Dental Education Consortium Program
SUNY at Buffalo Grad Medical-Dental Education Consortium
Buffalo General Hospital
Erie County Medical Center
Veterans Affairs Medical Center (Buffalo)
Program Director:
Stephanie H. Pleses, MD
SUNY at Buffalo Dept of Dermatology
100 High St
Ste C318
Buffalo, NY 14203
716-845-1566
Length: 3 Year(s) Total Positions: 10 (GY: 0)
Program ID: 080-35-21-067

New York

Columbia University Program
Presbyterian Hospital in the City of New York St Luke’s - Roosevelt Hospital Center
Program Director:
Vincent A DeLeo, MD
Columbia-Presbyterian Med Ctr
Dept of Dermatology
630 W 168th St NC 15-206
New York, NY 10032-3784
212-305-6715
Length: 3 Year(s) Total Positions: 12 (GY: 0)
Program ID: 080-35-21-104

Mount Sinai School of Medicine Program
Mount Sinai School of Medicine
Both Israel Medical Center
Elmhurst Hospital Center-Mount Sinai Services
Mount Sinai Medical Center
Veterans Affairs Medical Center (Brown)
Program Director:
Raul Fleischer, MD
Mount Sinai Medical Center
1 Gustave L Levy PI Box 1047
New York, NY 10029
212-844-8181
Length: 3 Year(s) Total Positions: 8 (GY: 0)
Program ID: 080-35-21-001

New York Hospital/Cornell Medical Center Program
New York Hospital
Program Director:
George W Hambrick Jr, MD
New York Hospital
525 E 68th St, F-340
New York, NY 10021
212-746-7374
Length: 3 Year(s) Total Positions: 9 (GY: 0)
Program ID: 080-35-21-002

New York University Medical Center Program
New York University Medical Center Bellevue Hospital Center
Veterans Affairs Medical Center (Manhattan)
Program Director:
Irwin M Freedberg, MD
New York University Medical Center
550 First Ave
New York, NY 10016
212-263-0245
Length: 3 Year(s) Total Positions: 30 (GY: 0)
Program ID: 080-35-21-064

* Updated information not provided.
Rochester
University of Rochester Program
Strong Memorial Hospital of the University of Rochester
Program Director:
Lowell A Goldsmith, MD
Strong Memorial Hospital Dept of Dermatology
601 Elmwood Ave
Box 667
Rochester, NY 14642
716 275-3871
Length: 3 Year(s)    Total Positions: 7    (GYI: 0)
Program ID: 080-35-21-102

Stony Brook
SUNY at Stony Brook Program
University Hospital-SUNY at Stony Brook
Veterans Affairs Medical Center (Northport)
Program Director:
Richard A Clark, MD
SUNY at Stony Brook
Dept of Dermatology
Health Science Center T-56-669
Stony Brook, NY 11794-8165
631 444-3843
Length: 3 Year(s)    Total Positions: 6    (GYI: 0)
Program ID: 080-35-21-119

Valhalla
New York Medical College at Westchester County Medical Center Program
New York Medical College
Bayley Seton Hospital
Lincoln Medical and Mental Health Center
Metropolitan Hospital Center
Westchester County Medical Center
Program Director:
Hijan Safai, MD, Dile
Dept of Dermatology
New York Medical College
Vosburgh Pavilion Rm 217
Valhalla, NY 10595-8110
914 993-6566
Length: 3 Year(s)    Total Positions: 12    (GYI: 0)
Program ID: 080-35-21-063

North Carolina
Chapel Hill
University of North Carolina Hospitals Program
University of North Carolina Hospitals
Program Director:
Robert A Briggman, MD
UNC School of Medicine
Dept of Dermatology
157 UNC Hospitals CB#7690
Chapel Hill, NC 27514
919 966-4606
Length: 3 Year(s)    Total Positions: 10    (GYI: 0)
Program ID: 080-36-11-066

Durham
Duke University Program
Duke University Medical Center
Veterans Affairs Medical Center (Durham)
Program Director:
Shelton R Pinzoll, MD
Duke University Medical Center
PO Box 3135
Durham, NC 27710
919 696-5337
Length: 3 Year(s)    Total Positions: 9    (GYI: 0)
Subspecialities: DMP
Program ID: 080-36-21-067

Winston-Salem
Bowman Gray School of Medicine Program
North Carolina Baptist Hospital
Program Director:
Joseph J Jerizzo, MD
Bowman Gray Sch of Med of Wake Forest Univ
Dept of Dermatology
Medical Center Blvd
Winston-Salem, NC 27157-1071
336 716-2768
Length: 3 Year(s)    Total Positions: 8    (GYI: 0)
Program ID: 080-36-21-110

Ohio
Cincinnati
University of Cincinnati Hospital Group Program
University of Cincinnati Hospital
Program Director:
James J Nordlund, MD
Dept of Dermatology
University of Cincinnati
PO Box 676892
Cincinnati, OH 45267-0892
513 698-6242
Length: 3 Year(s)    Total Positions: 12    (GYI: 3)
Subspecialities: DMP
Program ID: 080-38-21-065

Cleveland
Case Western Reserve University (MetroHealth) Program
MetroHealth Medical Center
Program Director:
Bryan R Davis, MD
MetroHealth Med Ctr
2500 MetroHealth Dr
Cleveland, OH 44109-1998
216 458-3029
Length: 3 Year(s)    Total Positions: 8    (GYI: 0)
Program ID: 080-38-11-071
Case Western Reserve University Program
University Hospitals of Cleveland
Veterans Affairs Medical Center (Cleveland)
Program Director:
William S Lynch, MD
Univ Hosp of Cleveland
11100 Euclid Ave
Cleveland, OH 44106-0025
216 844-3111
Length: 3 Year(s)    Total Positions: 10    (GYI: 0)
Program ID: 080-36-21-069

Cleveland Clinic Foundation Program
Cleveland Clinic Foundation
Program Director:
Charles Camisa, MD
Cleveland Clinic Foundation
9500 Euclid Ave Y322
Dept of Dermatology
Cleveland, OH 44195-5242
216 444-5666
Length: 4 Year(s)    Total Positions: 16    (GYI: 4)
Program ID: 080-35-12-070

Columbus
Ohio State University Program
Ohio State University Medical Center
Program Director:
Arthur E Felligereini, MD
Ohio State University Division of Dermatology
4731 University Hospitals Clinic
456 W 10th Ave
Columbus, OH 43210-1282
614 292-8111
Length: 3 Year(s)    Total Positions: 6    (GYI: 0)
Subspecialities: DMP
Program ID: 080-34-11-187

Dayton
Wright State University Program
Wright State University School of Medicine
Children’s Medical Center
St Elizabeth Medical Center
USA Medical Center (Wright-Patterson)
Veterans Affairs Medical Center (Dayton)
Program Director:
Teumzi Liang, MD
Wright State University School of Medicine
Dept of Dermatology
PO Box 927
Dayton, OH 45401-0927
513 292-2034
Length: 3 Year(s)    Total Positions: 6    (GYI: 0)
Program ID: 080-38-21-073

Oklahoma
Oklahoma City
University of Oklahoma Health Sciences Center Program
University of Oklahoma College of Medicine-Oklahoma City
Children’s Hospital of Oklahoma
University Hospital and Clinics
Veterans Affairs Medical Center (Oklahoma City)
Program Director:
Mark A Everett, MD
Univ of Oklahoma Health Sciences Center
619 NE 26th St
Oklahoma City, OK 73104
405 271-6600
Length: 3 Year(s)    Total Positions: 7    (GYI: 3)
Program ID: 080-39-21-074

* Updated information not provided.
Oregon

Portland
Oregon Health Sciences University Program
Oregon Health Sciences University Hospital
Veterans Affairs Medical Center (Portland)

Program Director:
Neil A Swanson, MD
3181 SW Sam Jackson Park Rd
Mail Stop L-645
Portland, OR 97201-3065
503 494-4713
Length: 3 Year(s) Total Positions: 11 (GYI: 0)
Program ID: 080-44-21-075

Pennsylvania

Danville
Geisinger Medical Center Program
Geisinger Medical Center

Program Director:
C Fred Miller III, MD
Geisinger Med Ctr
Dept of Dermatology
Danville, PA 17822
717 271-6810
Length: 3 Year(s) Total Positions: 6 (GYI: 0)
Program ID: 080-44-11-070

Hershey
Milton S Hershey Medical Center of Pennsylvania State University Program
Penn State University Hospital-Milton S Hershey Med Ctr

Program Director:
Donald P Lockinghill, MD
(UPC 11) Rm 4850
500 University Dr
PO Box 860
Hershey, PA 17033
717 531-8807
Length: 3 Year(s) Total Positions: 5 (GYI: 0)
Program ID: 080-44-21-103

Philadelphia

MCMPH/Hahnemann University Hospital Program
Hahnemann University Hospital

Program Director:
Richard L Spivakogol, MD
Medical College of Pennsylvania and Hahnemann University
Dept of Dermatology MS#401
Bread & Vines Sts
Philadelphia, PA 19102-1192
215 746-8320
Length: 3 Year(s) Total Positions: 8 (GYI: 0)
Subspecialties: DMP
Program ID: 080-44-21-077

Thomas Jefferson University Program
Thomas Jefferson University Hospital

Program Director:
Joon J Uitto, MD PhD
Thomas Jefferson University Hospital
Dept of Dermatology
233 S Tenth St Rm 450
Philadelphia, PA 19107
215 696-5786
Length: 3 Year(s) Total Positions: 11 (GYI: 0)
Program ID: 080-44-11-070

University of Pennsylvania Program
Hospital of the University of Pennsylvania
Children's Hospital of Philadelphia
Graduate Hospital
Pennsylvania Hospital
Veterans Affairs Medical Center (Philadelphia)

Program Director:
Bernard J. Johnson Jr, MD
University of Pennsylvania School of Medicine
Dept of Dermatology
211 Clinical Research Bldg
Philadelphia, PA 19104-6442
215 696-2760
Length: 3 Year(s) Total Positions: 10 (GYI: 0)
Subspecialties: DMP
Program ID: 080-44-21-080

Pittsburgh

University Health Center of Pittsburgh Program
University Health Center of Pittsburgh
Children's Hospital of Pittsburgh
Presbyterian University Hospital/UPMC
Veterans Affairs Medical Center (Pittsburgh)

Program Director:
Brian V. Jegasothy, MD
Univ Dermatology Assoc
3601 Fifth Ave
Pittsburgh, PA 15213
412 648-2850
Length: 3 Year(s) Total Positions: 9 (GYI: 0)
Subspecialties: DMP
Program ID: 080-44-11-081

South Carolina

Charleston
Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
MUSC Medical Center
Naval Hospital (Charleston)
Veterans Affairs Medical Center (Charleston)

Program Director:
John C Maize, MD
Med Univ of South Carolina
171 Ashley Ave
Charleston, SC 29425-2215
803 792-5883
Length: 3 Year(s) Total Positions: 7 (GYI: 0)
Program ID: 080-44-21-099

Tennessee

Memphis
University of Tennessee Program
University of Tennessee College of Medicine
Baptist Memorial Hospital
Regional Medical Center at Memphis
University of Tennessee Medical Center
Veterans Affairs Medical Center (Memphis)

Program Director:
S Williams Rosenberg, MD
Univ of Tennessee Memphis
Dept of Dermatology
956 Court Ave Rm E302
Memphis, TN 38115
901 448-5795
Length: 3 Year(s) Total Positions: 8 (GYI: 2)
Program ID: 080-44-21-084

Nashville
Vanderbilt University Program
Vanderbilt University Medical Center
Metropolitan Nashville General Hospital
Veterans Affairs Medical Center (Nashville)

Program Director:
Lloyd E King Jr, MD PhD
Vanderbilt University School of Medicine
1211 21st Ave S
620 Medical Arts Bldg
Nashville, TN 37212-1226
615 343-1185
Length: 3 Year(s) Total Positions: 5 (GYI: 0)
Program ID: 080-44-21-098

Rhode Island

Providence
Brown University Program
Roger Williams Medical Center
Memorial Hospital of Rhode Island
Rhode Island Hospital
Veterans Affairs Medical Center (Providence)

Program Director:
Charles J McDonald, MD
Roger Williams Med Ctr
Dept of Dermatology
50 Maude St
Providence, RI 02906-9735
401 456-2350
Length: 3 Year(s) Total Positions: 10 (GYI: 0)
Subspecialties: DMP
Program ID: 080-44-21-083

* Updated information not provided.
Texas

Dallas

University of Texas Southwestern Medical School Program
University of Texas Southwestern Medical School
Children's Medical Center of Dallas
Dallas County Hospital District-Parkland Memorial Hospital
Veterans Affairs Medical Center (Dallas)
Zale-Lipshy University Hospital

Program Director:
Ponciano D. Cruz Jr, MD
Univ of Texas Southwestern Med Ctr at Dallas
5323 Harry Hines Blvd
Dallas, TX 75390-8666
214 648-8898
Length: 3 Year(s)  Total Positions: 10  (GYF: 0)
Program Id: 080-48-21460

Fort Sam Houston

Brooke Army Medical Center Program

Brooke Army Medical Center

Program Director:
James H. Kesling, MD
Brooke Army Medical Center Dermatology Service
Bldg 1053
Fort Sam Houston, TX 78234-6200
210 916-6120
Length: 3 Year(s)  Total Positions: 15  (GYF: 0)
Program Id: 080-48-21460

Galveston

University of Texas Medical Branch Hospitals Program

University of Texas Medical Branch Hospitals

Program Director:
Edgar B. Smith, MD
Univ of Texas Medical Branch Hospitals
Dept of Dermatology
301 University
Galveston, TX 77555-5783
409 772-1611
Length: 3 Year(s)  Total Positions: 2  (GYF: 0)
Subspecialties: DMP
Program Id: 080-48-11486

Houston

Baylor College of Medicine Program*

Baylor College of Medicine
Harris County Hospital District-Ben Taub General Hospital
Methodist Hospital
Veterans Affairs Medical Center (Houston)

Program Director:
John S. Wolf, Jr, MD
Baylor College of Medicine Dept of Dermatology
147 Baylor Plaza
Houston, TX 77054-3498
713 798-4546
Length: 3 Year(s)  Total Positions: 10  (GYF: 0)
Program Id: 080-48-21487

University of Texas at Houston Program

University of Texas Medical School at Houston
Hermann Hospital
Lyndon B. Johnson General Hospital
University of Texas M D Anderson Cancer Center

Program Director:
Robert E. Kerut, MD
The University of Texas-Houston Medical School
Dept of Dermatology
6431 Fannin MSB 1304
Houston, TX 77030
713 798-5115
Length: 3 Year(s)  Total Positions: 9  (GYF: 0)
Subspecialties: DMP
Program Id: 080-48-21460

Lackland AFB

Wilford Hall USAF Medical Center Program

Wilford Hall USAF Medical Center (SG)

Program Director:
Col Ronald E. Singwood, MD
Wilford Hall USAF Medical Center/FSMSD
Dept of Dermatology
2230 Bergquist Dr Ste 1
Lackland AFB, TX 78236-5000
210 916-6120
Length: 3 Year(s)  Total Positions: 9  (GYF: 0)
Program Id: 080-48-21460

Lubbock

Texas Tech University (Lubbock) Program

Texas Tech University Health Sciences Center at Lubbock University Medical Center

Program Director:
Ronald P. Rupini, MD
Texas Tech University Health Sciences Center at Lubbock University Medical Center
3801 Fourth St
Lubbock, TX 79439
915 743-2433
Length: 3 Year(s)  Total Positions: 6  (GYF: 0)
Program Id: 080-48-21486

San Antonio

University of Texas Health Science Center at San Antonio Program

University of Texas Medical School at San Antonio
Audie L. Murphy Memorial Veterans Hospital (San Antonio)
University Hospital-South Texas Medical Center

Program Director:
Richard L. DeVille, MD
University of Texas Health Science Center at San Antonio
Div of Dermatology
7703 Floyd Curl Dr
San Antonio, TX 78284-7876
210 867-4887
Length: 3 Year(s)  Total Positions: 3  (GYF: 0)
Program Id: 080-48-21488

Utah

Salt Lake City

University of Utah Program

University of Utah Medical Center
Veterans Affairs Medical Center (Salt Lake City)

Program Director:
Mark J. Petersen, MD
University of Utah School of Medicine
Div of Dermatology
50 N Medical Dr
Salt Lake City, UT 84132
801 581-7837
Length: 3 Year(s)  Total Positions: 3  (GYF: 0)
Program Id: 080-48-21489

Virginia

Charlottesville

University of Virginia Program

University of Virginia Medical Center

Program Director:
Kenneth B. Gregor, MD
University of Virginia
Dept of Dermatology Box 134
Charlottesville, VA 22908
804 982-5155
Length: 3 Year(s)  Total Positions: 6  (GYF: 0)
Program Id: 080-61-11480

Richmond

Medical College of Virginia/Virginia Commonwealth University Program

Medical College of Virginia/Virginia Commonwealth University

Program Director:
Algin B. Garrett, MD
MC/Virginia Commonwealth Univ
PO Box 90164
Richmond, VA 23298-0164
804 828-9361
Length: 3 Year(s)  Total Positions: 6  (GYF: 0)
Program Id: 080-61-21480

Washington

Seattle

University of Washington Program

University of Washington School of Medicine
University of Washington Medical Center

Program Director:
Gregory J. Raatz, MD/PHD
Univ of Washington Med Ctr
1959 NE Pacific St
Mailstop Rm 3-A
Seattle, WA 98195
206 543-5300
Length: 3 Year(s)  Total Positions: 7  (GYF: 0)
Program Id: 080-61-21480

* Updated information not provided.
West Virginia
Morgantown
West Virginia University Program*
West Virginia University Hospitals
Program Director:
William A. Welton, MD
West Virginia University Medical Center
Section of Dermatology Box 5158
WVU HSC Sci Ctr 4083 HSB
Morgantown, WV 26506-0158
304-293-6618
Length: 3 Year(s) Total Positions: 3 (GYI: 9)
Subspecialty: DMP
Program ID: 000-06-11-092

Wisconsin
Madison
University of Wisconsin Program
University of Wisconsin Hospital and Clinics
Medical School Clinic-St Joseph's Hospital
William S Middleton Veterans Hospital
Program Director:
Darrel G. Clappes, MD
University Station Clinics
2880 University Ave
PO Box 6862
Madison, WI 53705
608-263-2330
Length: 3 Year(s) Total Positions: 4 (GYI: 9)
Program ID: 000-06-21-093

Milwaukee
Medical College of Wisconsin Program
Medical College of Wisconsin Affiliated Hospitals Inc
Clement J Zablocki Veterans Affairs Medical Center
Froedtert Memorial Lutheran Hospital
John L Doane Hospital
Program Director:
Janel A. Fairley, MD
Thomas J Rusie, MD
MCW Clinics A Froedtert
Dept of Dermatology
8220 W Wisconsin Ave
Milwaukee, WI 53226
414-456-3990
Length: 3 Year(s) Total Positions: 12 (GYI: 9)
Program ID: 000-06-21-095

Dermatopathology
(Dermatology and Pathology)

Alabama
Birmingham
University of Alabama Medical Center Program
University of Alabama Hospital
Birmingham Baptist Medical Center-Montclair
Veterans Affairs Medical Center (Birmingham)
Program Director:
Emily Osuna, MD
University of Alabama in Birmingham
University Station PO Box 76
Birmingham, AL 35294
205-934-3354
Length: 1 Year(s) Total Positions: 1
Program ID: 100-01-21-024

California
Orange
University of California (Irvine) Program*
University of California (Irvine) Medical Center
Veterans Affairs Medical Center (Long Beach)
Program Director:
Ronald J. Barr, MD
Dermatopathology Laboratory - Rm 98
UCI Med Ctr
101 City Dr S
Irvine, CA 92668
714-456-3467
Length: 1 Year(s) Total Positions: 1
Program ID: 100-06-21-083

San Diego
Naval Medical Center (San Diego) Program*
Naval Medical Center (San Diego)
Scripps Clinic and Research Foundation
Program Director:
Barrett, MD
Dept of Graduate Med Educ 403C
Scripps Clinic and Research Pd
10666 N Torrey Pines Rd
La Jolla, CA 92037-1093
619-554-8836
Length: 1 Year(s) Total Positions: 1
Program ID: 100-06-21-038

San Francisco
University of California (San Francisco) Program
University of California (San Francisco) School of Medicine
Program Director:
Philip E. Leboit, MD
University of California (San Francisco) School of Medicine
Dept of Pathology
513 Farmaus Ave
San Francisco, CA 94143-0606
415-476-1543
Length: 1 Year(s) Total Positions: 1
Program ID: 100-06-21-035

Stanford
Stanford University Program
Stanford University Hospital
Program Director:
Bruce S Smoller, MD
Stanford Med Ctr
333 Pasteur Dr H-2110
Stanford, CA 94305
415-725-5182
Length: 1 Year(s) Total Positions: 2
Program ID: 100-06-21-041

Colorado
Denver
University of Colorado Program*
University of Colorado Health Sciences Center
Denver Health and Hospitals
Veterans Affairs Medical Center (Denver)
Program Director:
Loren E Golitz, MD
Denver General Hospital Dept of Dermatology
777 Bannock St
Denver, CO 80224-6007
303-438-5778
Length: 1 Year(s) Total Positions: 2
Program ID: 100-07-21-022

Connecticut
New Haven
Yale-New Haven Medical Center Program
Yale-New Haven Hospital
Program Director:
Philip E Shapiro, MD
Yale University School of Medicine
Box 206066
333 Cedar St
New Haven, CT 06520-6066
203-785-7688
Length: 1 Year(s) Total Positions: 1
Program ID: 100-06-21-045

District of Columbia
Washington
Armed Forces Institute of Pathology Program
Armed Forces Institute of Pathology
Walter Reed Army Medical Center
Program Director:
George P. Lupton, MD
Armed Forces Inst of Pathology
Dept of Dermatopathology
6255 16th Street NW
Washington, DC 20016-6000
202-576-2145
Length: 1 Year(s) Total Positions: 4
Program ID: 100-10-21-019

* Updated information not provided.
<table>
<thead>
<tr>
<th>State</th>
<th>Program</th>
<th>Program Type</th>
<th>Program Description</th>
<th>Program Director</th>
<th>Program Contact</th>
<th>Program ID</th>
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<tr>
<td>Florida</td>
<td>George Washington University Program</td>
<td>Dermatopathology</td>
<td>George Washington University School of Medicine</td>
<td>Carmen Myrie Williams, MD</td>
<td>George Washington Hospital</td>
<td>100-10-21-066</td>
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<tr>
<td>Florida</td>
<td>University of South Florida Program</td>
<td>Dermatopathology</td>
<td>University of South Florida College of Medicine</td>
<td>L. Frank Glass, MD</td>
<td>James A. Haley Veterans Hospital</td>
<td>100-11-21-042</td>
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<td>Georgia</td>
<td>Emory University Program</td>
<td>Dermatopathology</td>
<td>Emory University School of Medicine</td>
<td>Abhin B. Soloman, MD</td>
<td>Emory University Hospital</td>
<td>100-12-21-044</td>
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<td>Illinois</td>
<td>University of Chicago Program</td>
<td>Dermatopathology</td>
<td>University of Chicago Hospitals</td>
<td>Kovunmasi Selani, MD</td>
<td>Michael Reese Hospital and Medical Center</td>
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<td>Indiana</td>
<td>Indiana University Medical Center Program</td>
<td>Dermatopathology</td>
<td>Indiana University Medical Center</td>
<td>Richard L. Roulseth, MD</td>
<td>William N. Wissman Memorial Hospital</td>
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<td>Louisiana</td>
<td>Tulane University Program</td>
<td>Dermatopathology</td>
<td>Tulane University School of Medicine</td>
<td>Aiken J. Marrogi, MD</td>
<td>Tulane University Medical Center</td>
<td>100-21-21-052</td>
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<td>Maryland</td>
<td>Johns Hopkins University Program</td>
<td>Dermatopathology</td>
<td>Johns Hopkins University School of Medicine</td>
<td>Thomas D. Horn, MD</td>
<td>Johns Hopkins Hospital</td>
<td>100-23-21-028</td>
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<td>Massachusetts</td>
<td>Boston University/Mallory Institute of Pathology Program</td>
<td>Dermatopathology</td>
<td>Boston University Medical Center-Mallory Institute of Pathology Foundation</td>
<td>Jag Bhawan, MD</td>
<td>Boston University</td>
<td>100-33-21-034</td>
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<td>Massachusetts</td>
<td>Harvard Medical School Program</td>
<td>Dermatopathology</td>
<td>Massachusetts General Hospital</td>
<td>Lynne A. M. Densa, MD</td>
<td>Brigham and Women's Hospital</td>
<td>100-24-31-002</td>
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<tr>
<td>Minnesota</td>
<td>Mayo Graduate School of Medicine Program</td>
<td>Dermatopathology</td>
<td>Mayo Clinic (Rochester)</td>
<td>Arnold L. Schneider, MD</td>
<td>Mayo Clinic</td>
<td>100-25-21-004</td>
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<td>Missouri</td>
<td>Barnes Hospital Group Program</td>
<td>Dermatopathology</td>
<td>Barnes Hospital</td>
<td>Louis P. Dehner, MD</td>
<td>Barnes Hospital</td>
<td>100-26-21-036</td>
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* Updated information not provided.
Accredited Programs in Dermatopathology (Dermatology and Pathology)

New York

New York

New York Hospitals/Cornell Medical Center Program
New York Hospital
Memorial Sloan-Kettering Cancer Center
Rockefeller University Hospital
Program Director:
N Scott McVut, MD
New York Hosp
Div of Dermatopathology 4-209
525 5th Ave
New York, NY 10017-5297
212 746-8454
Length: 1 Year(s) Total Positions: 2
Program ID: 160-38-21-027

New York University Medical Center Program
New York University Medical Center
Bellevue Hospital Center
Veterans Affairs Medical Center (Manhattan)
Program Director:
Hidekt Tanaka, MD
New York University Medical Center
530 First Ave
New York, NY 10016
212 263-7250
Length: 1 Year(s) Total Positions: 2
Program ID: 160-38-21-000

North Carolina

Durham

Duke University Program
Duke University Medical Center
Veterans Affairs Medical Center (Durham)
Program Director:
Roba Gulliver, MD
Duke University Medical Center
Box 5712
Durham, NC 27110
919 684-2000
Length: 1 Year(s) Total Positions: 1
Program ID: 160-38-21-006

Winston-Salem

Bowman Gray School of Medicine Program*
North Carolina Baptist Hospital
Program Director:
Walt W Way, MD
Bowman Gray School of Medicine
Medical Center Blvd
Winston-Salem, NC 27157-1072
336 749-2506
Length: 1 Year(s) Total Positions: 1
Program ID: 160-38-21-039

Ohio

Cincinnati

University of Cincinnati Hospital Group Program
University of Cincinnati Hospital
Veterans Affairs Medical Center (Cincinnati)
Program Director:
James J Nordlund, MD
Dermatopathology
University of Cincinnati
PO Box 670682
Cincinnati, OH 45268-0682
513 692-6242
Length: 1 Year(s) Total Positions: 1
Program ID: 160-38-11-408

Cleveland

Cleveland Clinic Foundation Program
Cleveland Clinic Foundation
Program Director:
Wilma E Bergfeld, MD
Cleveland Clinic Foundation
9500 Euclid Ave T332
Dept of Dermatopathology
Cleveland, OH 44195-5942
216 444-5400
Length: 1 Year(s) Total Positions: 1
Program ID: 160-38-12-409

Columbus

Ohio State University Program
Ohio State University Medical Center
Program Director:
Arthur E Pellegrini, MD
Ohio State Univ Hosp
4731 University Hospitals Clinic
456 W 10th Ave
Columbus, OH 43210
614 293-3575
Length: 1 Year(s) Total Positions: 1
Program ID: 160-38-21-046

Pennsylvania

Philadelphia

MCPH/Thomas Jefferson University Hospital Program
Thomas Jefferson University Hospital
Program Director:
A Bernard Ackerman, MD
Thomas Jefferson Univ
Dept of Dermatopathology & Pathology
3020 Walnut St PO Box 890
Philadelphia, PA 19104
215 882-6664
Length: 1 Year(s) Total Positions: 1
Program ID: 160-38-21-066

University of Pennsylvania Program
Hospital of the University of Pennsylvania
Program Director:
Jeffrey L Murphy, MD
Univ of Pennsylvania Clinical Research
Rm 21-25B
422 Curie Blvd
Philadelphia, PA 19104-4293
215 898-3333
Length: 1 Year(s) Total Positions: 2
Program ID: 160-38-11-012

Pittsburgh

University Health Center of Pittsburgh Program
University Health Center of Pittsburgh Presbyterian University Hospital/UPMC
Program Director:
Kevin J Flynn, MD
E Leon Barnes, MD
Univ of Pittsburgh Sch of Med
Dept of Dermatopathology Ste 146
4601 Fifth Ave
Pittsburgh, PA 15213
412 648-2281
Length: 1 Year(s) Total Positions: 1
Program ID: 160-38-21-028

Rhode Island

Providence

Brown University Program
Roger Williams Medical Center
Program Director:
Brenda R Bergman, MD
Roger Williams Medical Center
825 Chelroite Ave
Providence, RI 02906
401 455-2102
Length: 1 Year(s) Total Positions: 1
Program ID: 160-38-21-031

* Updated information not provided.
 Accredited Programs in Dermatopathology (Dermatology and Pathology)

South Carolina
Charleston
Medical University of South Carolina Program*
Medical University of South Carolina College of Medicine
MUSC Medical Center
Program Director:
John C. Maine, MD
Medical University Hospital
171 Ashley Ave
Charleston, SC 29425-2215
803 792-5969
Length: 1 Year(s)  Total Positions: 2
Program ID: 100-45-21-023

Tennessee
Memphis
University of Tennessee Program*
University of Tennessee College of Medicine
Baptist Memorial Hospital
Veterans Affairs Medical Center (Memphis)
Program Director:
George F. Bale, MD
Baptist Memorial Hospital
800 Madison Ave
Memphis, TN 38146
901 222-7550
Length: 1 Year(s)
Program ID: 100-47-21-040

Texas
Dallas
University of Texas Southwestern Medical School Program
University of Texas Southwestern Medical School
Dallas County Hospital District Parkland Memorial Hospital
Program Director:
Clay A. Cockett, MD
2330 Butler St Ste 115
Dallas, TX 75335-7800
214 686-2212
Length: 1 Year(s)  Total Positions: 3
Program ID: 100-48-21-013

Galveston
University of Texas Medical Branch Hospitals Program
University of Texas Medical Branch Hospitals
Program Director:
Ramos L. Sanchez, MD
Univ of Texas Med Branch Hosp
Dep of Dermatology
4.115 McCalloph Bldg
Galveston, TX 77555-4793
409 772-1911
Length: 1 Year(s)  Total Positions: 1
Program ID: 100-48-21-048

Houston
University of Texas at Houston Program
University of Texas Medical School at Houston
Hornemann Hospital
University of Texas M D Anderson Cancer Center
Program Director:
Robert E. Jordan, MD
The University of Texas-Houston Medical School
Dep of Dermatology
5431 Fannin Ste 1.204
Houston, TX 77030
713 792-5115
Length: 1 Year(s)
Program ID: 100-48-21-087

West Virginia
Morgantown
West Virginia University Program*
West Virginia University Hospitals
Program Director:
William A. Welton, MD
West Virginia Univ Hosp
Rm 4098 Box 9158
Morgantown, WV 26506
304 285-6618
Length: 1 Year(s)  Total Positions: 1
Program ID: 100-48-21-049

Emergency Medicine
Arizona
Phoenix
Maricopa Medical Center Program
Maricopa Medical Center
St Joseph's Hospital and Medical Center
Program Director:
William M. Maguire, MD
Maricopa Medical Center
Emergency Medicine Dept
3001 E Roosevelt
Phoenix, AZ 85008
602 257-5988
Length: 3 Year(s)  Total Positions: 32  (GY: 8)
Program ID: 110-05-12-062

Tucson
University of Arizona Program
University of Arizona College of Medicine
University Medical Center
Program Director:
Samuel M. Keim, MD
Univ of Arizona Rm 612 Ste Ctr
Sec of Emergency Medicine
1501 N Campbell Ave
Tucson, AZ 85724
602 626-7333
Length: 3 Year(s)  Total Positions: 25  (GY: 8)
Program ID: 110-05-12-066

Arkansas
Little Rock
University of Arkansas for Medical Sciences Program
University of Arkansas College of Medicine
University Hospital of Arkansas
Program Director:
Elicia Simer, MD
UAMS
4301 W Markham Slot 584
Little Rock, AR 72205-7169
501 686-5615
Length: 3 Year(s)  Total Positions: 21  (GY: 8)
Program ID: 110-04-21-071

California
Bakersfield
Kern Medical Center Program
Kern Medical Center
Program Director:
Thomas B. Purcell, MD
1830 Flower St
Bakersfield, CA 93301
805 325-2160
Length: 3 Year(s)  Total Positions: 6  (GY: 0)
Program ID: 110-05-12-091
Fresno
University of California (San Francisco)/Fresno Program
UCSF-Fresno Medical Education Program
Valley Medical Center of Fresno
Program Director:
Herbert J. Divino, MD
Valley Med Ctr of Fresno
445 S.Cedar Ave
Fresno, CA 93702-2807
559 495-5106
Length: 3 Year(s) Total Positions: 18 (GYI: 9)
Program Id: 110-05-13-002

Loma Linda
Loma Linda University Program
Loma Linda University Medical Center
Riverside General Hospital/University Medical Center
Program Director:
Steven M Green, MD
Loma Linda Univ Med Ctr
Dept of Emergency Med A108
11234 Anderson St
Loma Linda, CA 92354
909 824-4085
Length: 3 Year(s) Total Positions: 37 (GYI: 6)
Program Id: 110-05-13-066

Los Angeles
Charles R. Drew University Program
Charles R. Drew University of Medicine and Science
LAC-King/Drew Medical Center
Program Director:
Rogene Hardin, MD
Martin Luther King Jr-Drew Med Ctr
1200 W.Carmen Ave Rm 1004
Dept of Emergency Medicine
Los Angeles, CA 90033
310 668-4519
Length: 3 Year(s) Total Positions: 44 (GYI: 14)
Program Id: 110-05-13-004

UCLA Medical Center Program
UCLA School of Medicine
LAC-Olive View Medical Center
UCLA Medical Center
Program Director:
Scott K. Nolas, MD
UCLA Medcal Center
Div of Emergency Medicine
10833 Le Conte Ave
Los Angeles, CA 90024-1777
310 824-6575
Length: 3 Year(s) Total Positions: 36 (GYI: 6)
Program Id: 110-05-13-003

University of Southern California Program
Los Angeles County-USC Medical Center
Program Director:
Edward W. Keown, MD
LAC-USC Medical Center
1200 N State St Box 788
Los Angeles, CA 90033-1084
213 226-6657
Length: 3 Year(s) Total Positions: 72 (GYI: 15)
Program Id: 110-05-12-006

Oakland
Highland General Hospital/Program
Highland General Hospital
Program Director:
Barry C Simon, MD
Highland General Hospital
Dept of Emergency Medicine
1411 E 31st St
Oakland, CA 94602-1618
510 447-4564
Length: 3 Year(s) Total Positions: 35 (GYI: 9)
Program Id: 110-05-12-006

Orange
University of California (Irvine) Program
University of California (Irvine) Medical Center
Long Beach Memorial Medical Center
Program Director:
Mark J Langford, MD MHP-E
University of California-Irvine Medical Center
101 City Dr S 1st St
Dept of Emergency Medicine
Orange, CA 92668
714 465-5329
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program Id: 110-05-21-078

Sacramento
University of California (Davis) Program
University of California (Davis) Medical Center
Kaiser Permanente Hospital (South Sacramento)
Program Director:
Edward A Papanek, MD
Div of Emergency Med UC DMC
2200 Stockton Blvd F0FB1
Sacramento, CA 95817
916 274-8571
Length: 3 Year(s) Total Positions: 26 (GYI: 7)
Program Id: 110-05-21-097

San Diego
Naval Medical Center (San Diego) Program
Naval Medical Center (San Diego)
Program Director:
Gary R Lammert, MD
Naval Hospital
Dept of Emergency Med Oce CFA
San Diego, CA 92134-9008
619 522-8223
Length: 3 Year(s) Total Positions: 24 (GYI: 8)
Program Id: 110-05-12-067

University of California (San Diego) Program
University of California (San Diego) Medical Center
Program Director:
Peter Rosen, MD
Dept of Emergency Medicine
UCSD Medical Center
200 W Arbor Drive
San Diego, CA 92103-8914
619 543-6336
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program Id: 110-05-21-080

Stanford
Stanford University Hospital/Kaiser Permanente Medical Center Program
Stanford University Hospital
Kaiser Permanente Medical Center (Santa Clara)
Program Director:
Rebecca Smith-Coggins, MD
Stanford University Hospital
Emergency Medicine - H3690A
300 Pasteur Dr
Stanford, CA 94305-6299
415 725-8215
Length: 3 Year(s) Total Positions: 25 (GYI: 5)
Program Id: 110-05-21-098

Torrance
Los Angeles County-Harbor-UCLA Medical Center Program
Los Angeles County Harbor-UCLA Medical Center
Program Director:
Howard A Benson, MD
Los Angeles County-Harbor-UCLA Medical Center
1000 W Caron St Box 31
PO Box 2540
Torrance, CA 90509-2910
310 222-3508
Length: 3 Year(s) Total Positions: 38 (GYI: 13)
Program Id: 110-05-12-006

Colorado
Denver
Denver Health and Hospitals Program*
Denver Health and Hospitals
Porter Memorial Hospital
Froenathan St Anthony Hospital Central
St Joseph Hospital
Program Director:
Richard E Wolfe, MD
Denver General Hospital
Emergency Med Serv
777 Bannock St
Denver, CO 80204-4007
303 486-7142
Length: 3 Year(s) Total Positions: 9 (GYI: 6)
Program Id: 110-07-12-009

Connecticut
Farmington
University of Connecticut Program
University of Connecticut School of Medicine
Hartford Hospital
St Francis Hospital and Medical Center
Univ of Connecticut Health Center/John Dempsey Hospital
Program Director:
Marc Borenstein, MD
Div of Emergency Medicine
263 Farmington Ave
Farmington, CT 06030-3855
203 679-4988
Length: 3 Year(s) Total Positions: 10 (GYI: 10)
Program Id: 110-08-21-120

* Updated information not provided.
Delaware

Wilmington

The Medical Center of Delaware Program
The Medical Center of Delaware
Program Director:
James K Bouzouzis, MD
Med Grt of Delaware
Wilmington Hosp
PO Box 1668
Wilmington, DE 19890
302-428-8178
Length: 3 Year(s) Total Positions: 30 (GY: 10)
Program ID: 110-09-12-487

District of Columbia

Washington

George Washington University Program
George Washington University School of Medicine
Alexandria Hospital
Fairfax Hospital
George Washington University Hospital
Program Director:
Robert Stesser, MD
The George Washington University
Dept of Emergency Medicine
2140 Pennsylvania Ave NW
Washington, DC 20037
301-964-9521
Length: 3 Year(s) Total Positions: 25 (GY: 0)
Program ID: 110-10-12-4011

Florida

Jacksonville

University of Florida Health Science Center/Jacksonville Program
University Medical Center (UFHSC/J)
Program Director:
Suzanne Shepherd, MD
University of Florida Health Science Center/Jacksonville
650 W Eighth St Shill Bldg
Jacksonville, FL 32206-6551
904-648-4186
Length: 3 Year(s) Total Positions: 38 (GY: 0)
Program ID: 110-11-12-068

Miami

University of Miami-Jackson Memorial Medical Center Program*
University of Miami-Jackson Memorial Medical Center
Mount Sinai Medical Center of Greater Miami
Program Director:
Steven S Saef, MD
Jackson Memorial Medical Center
Dept of Emergency Medicine
1611 NW 12th Ave
Miami, FL 33136
305-586-8373
Length: 3 Year(s) Program ID: 110-11-21-133

Georgia

Atlanta

Emory University Program
Emory University School of Medicine
Crawford Long Hospital of Emory University
Grady Memorial Hospital
Program Director:
David A Kramer, MD
Emory University School of Medicine
Div of Emergency Medicine
60 Butler St SE
Atlanta, GA 30303-2219
404-777-8328
Length: 3 Year(s) Total Positions: 45 (GY: 15)
Program ID: 110-12-12-012

Augusta

Medical College of Georgia Program
Medical College of Georgia Hospital and Clinics
University Hospital
Program Director:
Michele B Wagner, MD
Medical College of Georgia
Section of Emergency Medicine
1120 15TH ST AF-1044
Augusta, GA 30912-4007
706-721-3613
Length: 3 Year(s) Total Positions: 10 (GY: 0)
Program ID: 110-12-21-090

Illinois

Chicago

Cook County Hospital Program
Cook County Hospital
Program Director:
Constance S Grewe, MD
Cook County Hospital
1900 W Polk St 10th Fl
Chicago, IL 60612
312-633-3225
Length: 3 Year(s) Total Positions: 54 (GY: 18)
Program ID: 110-10-21-068

McGaw Medical Center of Northwestern University Program
Northwestern University Medical School
Northwestern Memorial Hospital
Program Director:
Edward A Michelson, MD FACPEP
Northwestern Univ Med Sdh
Dir of Emergency Medicine
216 E Superior St #100
Chicago, IL 60611
312-995-4415
Length: 4 Year(s) Total Positions: 26 (GY: 7)
Program ID: 110-16-12-015

University of Chicago Program
University of Chicago Hospitals
Lutheran General Hospital
Program Director:
David S Howes, MD
Univ of Chicago Hospitals Sect of Emergency Medicine
5841 S Maryland Ave MC6068
Chicago, IL 60637-1470
312-732-6900
Length: 3 Year(s) Total Positions: 35 (GY: 11)
Program ID: 110-16-12-016

University of Illinois College of Medicine at Chicago Metropolitan Group Hospitals Program
University of Illinois College of Medicine at Chicago
Maimonides Medical Center
Mercy Hospital and Medical Center
University of Illinois Hospital and Clinics
Program Director:
Raymond Hart, MD
Univ of Illinois
1818 W Polk St
Rm 618 CMW-MC/C 724
Chicago, IL 60612
312-413-7460
Length: 3 Year(s) Total Positions: 33 (GY: 11)
Program ID: 110-16-12-017

University of Illinois College of Medicine at Chicago/Christ Hospital Program
University of Illinois College of Medicine at Chicago
EHS Christ Hospital and Medical Center
Program Director:
Peter O Fried, MD
Dept of Emergency Medicine
EHS Christ Hosp & Med Ctr
4440 W 85th St
Oak Lawn, IL 60453
708-346-5375
Length: 3 Year(s) Total Positions: 22 (GY: 8)
Program ID: 110-16-12-017

Peoria

University of Illinois College of Medicine at Peoria Program
University of Illinois College of Medicine at Peoria
St Francis Medical Center
Program Director:
Marc D Squillante, DO
Saint Francis Medical Center
Emergency Dept
550 NE Glen Oak Ave
Peoria, IL 61616
309-655-8710
Length: 3 Year(s) Total Positions: 23 (GY: 8)
Program ID: 110-16-12-069

* Updated information not provided.
Indiana

Indianapolis

Methodist Hospital of Indiana Program

Methodist Hospital School of Medicine

Program Director: Steve D. Chibowski, MD

Program Director: Troy C. Grosholtz, MD

School of Medicine

Program Director: Steven C. Grosholtz, MD

Program Director: Jonathan S. Olshaker, MD

University of Louisville Program

University of Louisville School of Medicine

Program Director: Salvatore Vicario, MD

Program Director: Frank Lawlor, MD

University of Louisville Hospital

Program Director: Salvatore Vicario, MD

Program Director: Frank Lawlor, MD

University of Louisville Hospital

Program Director: Salvatore Vicario, MD

Program Director: Frank Lawlor, MD

Louisville

Kentucky

University of Louisville Program

University of Louisville School of Medicine

Program Director: Salvatore Vicario, MD

Program Director: Frank Lawlor, MD

University of Louisville Hospital

Program Director: Salvatore Vicario, MD

Program Director: Frank Lawlor, MD

Louisiana

Baton Rouge

Louisiana State University (Baton Rouge) Program

East Baton Rouge General Medical Center

Program Director: Cris V. Mandy, MD

Program Director: Earl L. C. Medical Center

5635 Airline Hwy

Baton Rouge, LA 70805-2408

504-368-9840

Length: 3 Year(s) Total Positions: 6 (GYT: 6)

Program: 110-24-21-117

New Orleans

Louisiana State University Program

Louisiana State University School of Medicine

Medical Center of Louisiana at New Orleans-LSU Division

Program Director: Kathleen C. Hubbell, MD

Charity Hospital of Louisiana-LSU Div Emergency Med Dept

1552 Tulane Ave Rm 1384

New Orleans, LA 70112

504-589-9000

Length: 3 Year(s) Total Positions: 6 (GYT: 6)

Program: 110-24-21-116

Program: 110-24-21-117

Maryland

Baltimore

Johns Hopkins University Program

Johns Hopkins University School of Medicine

Johns Hopkins Bayview Medical Center

Johns Hopkins Hospital

Program Director: Enera D. Keile, MD

Program Director: Glyn K. Keile, MD

Johns Hopkins Health System

Program Director: Jonathan S. Olshaker, MD

University of Maryland Program

University of Maryland Medical System

Maryland Medical Center

Program Director: Jonathan S. Olshaker, MD

University of Maryland Medical System

Maryland Medical Center

Program Director: Jonathan S. Olshaker, MD

Massachusetts

Boston

Boston City Hospital Program*

Boston City Hospital

Program Director: Joseph H. Kahn, MD

Boston City Hospital

Emergency Medicine Dept

818 Harrison Ave

Boston, MA 02118

617-534-6283

Length: 3 Year(s) Total Positions: 15 (GYT: 9)

Program: 110-24-21-684

Worcester

University of Massachusetts Medical Center Program*

University of Massachusetts Medical Center

Medical Center of Central Massachusetts

St Vincent Hospital

Program Director: Francis J. Bielen, MD

Univ of Massachusetts Med Ctr

55 Lake Ave N 111-712

Worcester, MA 01655

608-856-4101

Length: 3 Year(s) Total Positions: 9 (GYT: 12)

Program: 110-24-21-674

Michigan

Ann Arbor

University of Michigan Program

University of Michigan Hospitals

St Joseph Mercy Hospital (Catherine McAuley Health System)

Program Director: Steven C. Drobot, MD

Univ of Michigan Med Ctr

Dept of Emergency Med

TC 81054 Box 2036

Ann Arbor, MI 48104-2036

313-763-7219

Length: 3 Year(s) Total Positions: 20 (GYT: 12)

Program: 110-25-12-025

Detroit

Henry Ford Hospital Program

Henry Ford Hospital

Program Director: Bruce M. Thompson, MD

Henry Ford Medical Center

2790 W Grand Blvd

Emergency Medicine-FCFP 1st Fl

Detroit, MI 48202-2608

313-271-6503

Length: 3 Year(s) Total Positions: 16 (GYT: 8)

Program: 110-25-12-025

St John Hospital and Medical Center Program

St John Hospital and Medical Center

Program Director: Don M. Bemsen, DO

St John Hospital and Medical Center

Dept of Medical Education

22100 Mor-Ave Rd

Detroit, MI 48236

313-343-3976

Length: 3 Year(s) Total Positions: 24 (GYT: 8)

Program: 110-25-12-025

Wayne State University/Detroit Medical Center Program

Wayne State University School of Medicine

Children's Hospital of Michigan

Detroit Regional Hospital and University Health Center

Program Director: Robert P. Wali, MD

Emergency Medicine Dept

888 University Ctr

4201 St Antoine St

Detroit, MI 48201-2194

313-963-2500

Length: 3 Year(s) Total Positions: 16 (GYT: 8)

Program: 110-25-12-025

Wayne State University/Grace Hospital Program

Wayne State University School of Medicine

Grace Hospital

Program Director: Martin Harris, MD

Grace Hospital

6071 W Outer Dr

Detroit, MI 48235-2670

313-866-1020

Length: 3 Year(s) Total Positions: 24 (GYT: 8)

Program: 110-25-12-025

* Updated information not provided.
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<tr>
<th>Location</th>
<th>Program Name</th>
<th>Affiliation</th>
<th>Address</th>
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<tbody>
<tr>
<td>Grand Rapids</td>
<td>Butterworth Hospital Program</td>
<td>Butterworth Hospital</td>
<td>Butterworth Hospital</td>
<td>100 Michigan Ave NE</td>
<td>916-776-1790</td>
<td>3 Year(s)</td>
<td>27 (GY: 9)</td>
</tr>
<tr>
<td>Kalamazoo</td>
<td>Kalamazoo Center for Medical Studies/Michigan State University Program</td>
<td>Kalamazoo Center for Medical Studies</td>
<td>Borgess Medical Center</td>
<td>616 307-9500</td>
<td>3 Year(s)</td>
<td>26 (GY: 10)</td>
<td>110-25-21-124</td>
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<td>Lansing</td>
<td>Sparrow Hospital/Michigan State University Program*</td>
<td>Sparrow Hospital</td>
<td>Michigan State University</td>
<td>1210 S Michigan Ave</td>
<td>517 483-3583</td>
<td>3 Year(s)</td>
<td>30 (GY: 10)</td>
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<tr>
<td>Royal Oak</td>
<td>William Beaumont Hospital Program</td>
<td>William Beaumont Hospital</td>
<td>William Beaumont Hospital-Troy</td>
<td>3001 W 15 Mile Rd</td>
<td>810 551-3015</td>
<td>3 Year(s)</td>
<td>27 (GY: 8)</td>
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<tr>
<td>Minneapolis</td>
<td>Hennepin County Medical Center Program</td>
<td>Hennepin County Medical Center</td>
<td>Hennepin County Medical Center</td>
<td>701 Park Ave S</td>
<td>612 347-5883</td>
<td>3 Year(s)</td>
<td>30 (GY: 10)</td>
</tr>
<tr>
<td>Mississippi</td>
<td>Jackson</td>
<td>University of Mississippi Medical Center Program</td>
<td>University of Mississippi School of Medicine</td>
<td>1100 N State St</td>
<td>Jackson, MS 39216-4505</td>
<td>3 Year(s)</td>
<td>18 (GY: 6)</td>
</tr>
<tr>
<td>Missouri</td>
<td>Kansas City</td>
<td>University of Missouri Medical Center Program</td>
<td>University of Missouri School of Medicine</td>
<td>2301 Holmes</td>
<td>Kansas City, MO 64108</td>
<td>3 Year(s)</td>
<td>27 (GY: 9)</td>
</tr>
<tr>
<td>New Jersey</td>
<td>Morristown</td>
<td>Morristown Memorial Hospital Program</td>
<td>Morristown Memorial Hospital</td>
<td>100 Madison Ave</td>
<td>Morristown, NJ 07960-1605</td>
<td>3 Year(s)</td>
<td>18 (GY: 6)</td>
</tr>
<tr>
<td>New Mexico</td>
<td>Albuquerque</td>
<td>University of New Mexico Program</td>
<td>University of New Mexico School of Medicine</td>
<td>2211 Lomas Ave NE</td>
<td>Albuquerque, NM 87131-5246</td>
<td>3 Year(s)</td>
<td>22 (GY: 8)</td>
</tr>
<tr>
<td>New York</td>
<td>Albany</td>
<td>Albany Medical Center Program</td>
<td>Albany Medical Center</td>
<td>47 New Scotland Ave</td>
<td>Albany, NY 12208-2479</td>
<td>3 Year(s)</td>
<td>26 (GY: 8)</td>
</tr>
</tbody>
</table>

* Updated information not provided.
New Hyde Park
Albert Einstein College of Medicine at Long Island Jewish Medical Center Program
Long Island Jewish Medical Center
Bronx Municipal Hospital Center
Program Director: Joseph L. Lanzetta, MD
Long Island Jewish Med Ctr
Dept of Emergency Med
New Hyde Park, NY 11042
718 670-7761
Length: 3 Year(s) Total Positions: 30 (GYT: 0)
Program ID: 110-35-12-082

New York
Mount Sinai School of Medicine Program
Mount Sinai School of Medicine
Beth Israel Medical Center
Elmhurst Hospital Center-Mount Sinai Services
Mount Sinai Medical Center
Program Director: Karl R. Sturman, MD
Beth Israel Medical Center
Department of Emergency Medicine
First Ave at 16th St
New York, NY 10003-8973
212 840-5053
Length: 4 Year(s) Total Positions: 43 (GYT: 13)
Program ID: 110-35-21-092

New York University Medical Center Program
New York University Medical Center
Bellevue Hospital Center
Program Director: Wallace A. Carter, Jr, MD
Bellevue Hospital Center
Emergency Dept
27th St & First Ave
New York, NY 10016
212 558-8857
Length: 3 Year(s) Total Positions: 30 (GYT: 10)
Program ID: 110-35-21-109

St Luke’s-Roosevelt Hospital Center Program
St Luke’s-Roosevelt Hospital Center
St Luke’s-Roosevelt Hospital Center-Roosevelt Division
St Luke’s-Roosevelt Hospital Center-St Luke’s Division
Program Director: Gregg Hsia, MD
St Luke’s-Roosevelt Hospital Center
Emergency Medicine Residency Program
1000 Tenth Ave
New York, NY 10019-1105
212 523-6949
Length: 3 Year(s) Total Positions: 30 (GYT: 10)
Program ID: 110-35-21-131

Rochester
University of Rochester Program
Strong Memorial Hospital of the University of Rochester
Program Director: Ray E Keller, MD
Strong Memorial Hosp
Dept of Emergency Medicine
601 Elmwood Ave Box 655
Rochester, NY 14642-8655
716 273-4134
Length: 2 Year(s) Total Positions: 8 (GYT: 8)
Program ID: 110-35-21-131

Stony Brook
SUNY at Stony Brook Program
University Hospital-SUNY at Stony Brook
Program Director: Frederick Schiavone, MD
SUNY at Stony Brook
Univ Med Ctr Level 4-5-15
Stony Brook, NY 11794-7400
516 444-3800
Length: 3 Year(s) Total Positions: 24 (GYT: 6)
Program ID: 110-36-21-091

Syracuse
SUNY Health Science Center at Syracuse Program
University Hospital-SUNY Health Science Center at Syracuse
St Joseph’s Hospital Health Center
Program Director: Gary A Johnson, MD
Dept of Emergency Medicine
University Hospital
756 E Adams St
Syracuse, NY 13210
315 464-4903
Length: 3 Year(s) Total Positions: 18 (GYT: 6)
Program ID: 110-35-21-121

Valhalla
New York Medical College (Lincoln) Program
New York Medical College
Lincoln Medical and Mental Health Center
Our Lady of Mercy Medical Center
Program Director: Joel Gerthoffer, MD
Lincoln Med & Mental Hilth Ctr
534 E 140th St
Bronx, NY 10451
718 670-5200
Length: 3 Year(s) Total Positions: 27 (GYT: 6)
Program ID: 110-35-12-023

North Carolina
Chapel Hill
University of North Carolina Hospitals Program
University of North Carolina Hospitals Wake Med Center
Program Director: Judith Tinthall, MD
Dept of Emergency Medicine
UNC Sch of Medicine CB #7584
Chapel Hill, NC 27599-7884
919 556-0003
Length: 3 Year(s) Total Positions: 21 (GYT: 10)
Program ID: 110-35-21-130

Greenville
East Carolina University Program
East Carolina University School of Medicine
Pitt County Memorial Hospital
Program Director: Charles R. Brown, MD
Pitt County Memorial Hospital
2300 Stauntonburg Rd
PO Box 829
Greenville, NC 27835-0028
919 516-4141
Length: 3 Year(s) Total Positions: 30 (GYT: 10)
Program ID: 110-36-12-033

Winston-Salem
Bowman Gray School of Medicine Program
North Carolina Baptist Hospital Forsyth Memorial Hospital
Program Director: Earl Schwarz, MD
Bowman Gray School of Medicine West Virginia University
Baptist Hospital Winston-Salem, NC 27107-1089
336 719-4450
Length: 3 Year(s) Total Positions: 24 (GYT: 8)
Program ID: 110-36-12-036

Ohio
Akron
Akron City Hospital (Summa Health System)/NEOHCOM Program
Akron City Hospital (Summa Health System)
Program Director: Michael Bearnson, MD
Akron City Hosp
525 E Market St
Akron, OH 44308
216 374-4001
Length: 3 Year(s) Total Positions: 24 (GYT: 8)
Program ID: 110-35-12-004

Akron General Medical Center/NEOHCOM Program
Akron General Medical Center
Program Director: John C. Bradford, DO
Akron General Medical Center
400 Wabash Ave
Akron, OH 44307
216 374-4001
Length: 3 Year(s) Total Positions: 19 (GYT: 6)
Program ID: 110-36-12-036

Cincinnati
University of Cincinnati Hospital Group Program
University of Cincinnati Hospital
Program Director: W. Brian Gillies, MD
Univ of Cincinnati Med Ctr
Mail Location 780
231 Bethesda Ave Rm 1566
Cincinnati, OH 45267-0760
513 668-8088
Length: 4 Year(s) Total Positions: 37 (GYT: 10)
Program ID: 110-36-12-036

* Updated information not provided.
Cleveland
Case Western Reserve University (MetroHealth) Program
MetroHealth Medical Center
Program Director: Charles L. Emerman, MD
MetroHealth Medical Center
2600 MetroHealth Dr
Cleveland, OH 44109-1698
216 449-5088
Length: 3 Year(s)  Total Positions: 24  (GTY: 8)
Program ID: 110-38-21-110

Mount Sinai Medical Center of Cleveland Program
Mount Sinai Medical Center of Cleveland
Program Director: Jonathan Glazer, MD
Mount Sinai Medical Center
One Mt Sinai Dr
Cleveland, OH 44106-4186
216 421-4622
Length: 3 Year(s)  Total Positions: 18  (GTY: 6)
Program ID: 110-38-12-037

Columbus
Ohio State University Program
Ohio State University Medical Center
Riverside Methodist Hospitals
Program Director: Daniel R. Martin, MD
Ohio State University Hospital
108 Mansfield
1604 Upham Dr
Columbus, OH 43210-1223
614 682-5060
Length: 3 Year(s)  Total Positions: 26  (GTY: 8)
Program ID: 110-38-12-038

Dayton
Wright State University Program
Wright State University School of Medicine
Good Samaritan Hospital and Health Center
Kettering Medical Center
USAF Medical Center (Wright-Patterson)
Program Director: Glenn C Hamilton, MD
c/o Cox Inst
3625 Southern Blvd
Kettering, OH 45429
513 296-7839
Length: 3 Year(s)  Total Positions: 33  (GTY: 11)
Program ID: 110-38-12-039

Toledo
St Vincent Medical Center/Toledo Hospital Program*
St Vincent Medical Center
Teleplan Hospital
Program Director: Randall King, MD
St Vincent Med Ctr
2213 Cherry St
Toledo, OH 43606
419 521-4723
Length: 3 Year(s)  Total Positions: 36  (GTY: 12)
Program ID: 110-38-12-040

* Updated information not provided.

Oklahoma
Oklahoma City
University of Oklahoma Health Sciences Center Program
University of Oklahoma College of Medicine-Oklahoma City
Baptist Medical Center of Oklahoma
Children's Hospital of Oklahoma
HCA Presbyterian Hospital
St Anthony Hospital
University Hospital and Clinics
Program Director: James S Walker, DO
University of Oklahoma Health Sciences Center
PO Box 28307
Rm EB #319
Oklahoma City, OK 73126
405 271-5155
Length: 4 Year(s)  Total Positions: 24  (GTY: 6)
Program ID: 110-38-12-041

Oregon
Portland
Oregon Health Sciences University Program
Oregon Health Sciences University Hospital
Program Director: Harold Thomas, MD
Oregon Health Sciences University UIN 52
3181 SW South Park Dr
Portland, OR 97201-3008
503 494-7010
Length: 3 Year(s)  Total Positions: 20  (GTY: 6)
Program ID: 110-46-12-042

Pennsylvania
Danville
Geisinger Medical Center Program
Geisinger Medical Center
Program Director: James P Gillen, MD
Geisinger Medical Center
Dept of Emergency Medicine
Danville, PA 17821
717 271-6612
Length: 3 Year(s)  Total Positions: 21  (GTY: 7)
Program ID: 110-41-12-043

Philadelphia
Albert Einstein Medical Center Program
Albert Einstein Medical Center
Program Director: John W. Becherer Jr, DO
Albert Einstein Med Ctr
5501 Old York Rd
Philadelphia, PA 19141
215 456-8236
Length: 4 Year(s)  Total Positions: 20  (GTY: 10)
Program ID: 110-41-21-122

MCPHU/Medical College of Pennsylvania Hospital Program
Medical College of Pennsylvania Hospital
Mercy Catholic Medical Center-Miscrociola Division
Program Director: Robert M McNamara, MD
Medical College of Pennsylvania
Emergency Medicine
3000 Henry Ave
Philadelphia, PA 19129
215 642-6468
Length: 3 Year(s)  Total Positions: 36  (GTY: 12)
Program ID: 110-41-12-045

Thomas Jefferson University Program
Thomas Jefferson University Hospital
Methodist Hospital
Program Director: Marc L. Zawer, MD
Thomas Jefferson University Hospital
Div of Emerg Med 230 Thompson Bldg
11th & Walnut Sta
Philadelphia, PA 19107
215 866-6944
Length: 5 Year(s)  Total Positions: 38  (GTY: 12)
Program ID: 110-41-12-064

Pittsburgh
MCPHU/Allegeny General Hospital Program
Allegeny General Hospital
Program Director: Marcus L. Martin, MD
Dept of Emergency Medicine
Allegeny General Hospital
300 E North Ave
Pittsburgh, PA 15212-6986
412 697-4905
Length: 3 Year(s)  Total Positions: 21  (GTY: 8)
Program ID: 110-41-12-064

University Health Center of Pittsburgh Program
University Health Center of Pittsburgh
Mercy Hospital of Pittsburgh
Presbyterian University Hospital/PUPC
Western Pennsylvania Hospital
Program Director: Allan B. Wexler, MD
University Health Center of Pittsburgh
200 McKeen Pl Ste 500
Pittsburgh, PA 15213
412 578-3180
Length: 2 Year(s)  Total Positions: 21  (GTY: 12)
Program ID: 110-41-12-065

York
York Hospital Program
York Hospital
Program Director: Dane M Chapman, MD
Dept of Emergency Medicine
York Hospital
1001 S George St
York, PA 17405
717 831-0700
Length: 3 Year(s)  Total Positions: 23  (GTY: 8)
Program ID: 110-41-21-089

Graduate Medical Education Directory
Puerto Rico

San Juan

University of Puerto Rico Program
University of Puerto Rico School of Medicine
University Hospital

Program Director:
Juan A Gonzalez-Sanchez, MD
Univ of Puerto Rico Sch of Med
GPO Box 70184
San Juan, PR 00936
809-765-4594

Length: 3 Year(s)
Program ID: 110-42-12-046

Texas

El Paso

Texas Tech University (El Paso) Program
Texas Tech University Health Sciences Center at El Paso
RKE Thomason General Hospital

Program Director:
Matthew J Walsh, MD
Texas Tech Univ Hlth Sci Ctr
Dept of Emergency Med
6000 S Univer Dr #412
El Paso, TX 79905-2000
915 771-6482

Length: 3 Year(s)
Total Positions: 24 (GYI: 8)
Program ID: 110-48-12-047

Rhode Island

Providence

Brown University Program
Rhode Island Hospital

Program Director:
Daniel L Savitz, MD
Rhode Island Hospital
Dept of Emergency Medicine
593 Eddy St Samuels 2nd Fl
Providence, RI 02903
401 444-4247

Length: 4 Year(s)
Total Positions: 24 (GYI: 8)
Program ID: 110-42-21-114

South Carolina

Columbia

Richland Memorial Hospital-University of South Carolina School of Medicine Program
Richland Memorial Hospital-Univ of South Carolina Sch of Med

Program Director:
Joseph S Mylinski, MD
Richard Memorial Hospital
Faye Richland Medical Pk
Dept of Emergency Medicine
Columbia, SC 29030
803 434-7088

Length: 3 Year(s)
Total Positions: 20 (GYI: 6)
Program ID: 110-40-12-047

Temple

Texas A&M College of Medicine-Scott and White Program
Scott and White Memorial Hospital
Olin E Teague Veterans Center

Program Director:
Carl W Gesseott, MD
Texas A&M-Scott and White
Graduate Med Educ
2401 S St Isst St
Temple, TX 76508-0061
903 298-4400

Length: 3 Year(s)
Total Positions: 19 (GYI: 8)
Program ID: 110-48-21-102

Virginia

Charlottesville

University of Virginia Program*
University of Virginia Medical Center

Program Director:
Scott A Speraw, MD
Div of Emergency Med
Univ of Virginia Hlth Sci Ctr
PO Box 520-21
Charlottesville, VA 22908
804 924-8485

Length: 3 Year(s)
Program ID: 110-51-21-125

Norfolk

Eastern Virginia Graduate School of Medicine Program
Eastern Virginia Graduate School of Medicine
Sentara Norfolk General Hospital

Program Director:
Francis L Cournos, MD
Sentara Norfolk General Hospital Dept of Emergency Med
600 Gresham Dr
Raleigh Bldg Bm 206
Norfolk, VA 23507-1899
804 688-3397

Length: 3 Year(s)
Total Positions: 31 (GYI: 8)
Program ID: 110-51-12-050

Tennessee

Nashville

Vanderbilt University Program
Vanderbilt University Medical Center

Program Director:
Keith Wrenn, MD
703 Oxford House
Vanderbilt Univ Med Ctr
Nashville, TN 37232
615 936-1157

Length: 4 Year(s)
Total Positions: 12 (GYI: 6)
Program ID: 110-47-21-113

Portsmouth

Naval Medical Center (Portsmouth) Program*
Naval Medical Center (Portsmouth)
DePaul Medical Center
Program Director:
David W Munter, MD
Naval Hosp
Dept of Emergency Medicine
Portsmouth, VA 23708-5009
804 730-7355

Length: 3 Year(s)
Program ID: 110-51-21-105

* Updated information not provided.

Graduate Medical Education Directory
Accredited Programs in Emergency Medicine

Washington
Tacoma
Madigan Army Medical Center Program
Madigan Army Medical Center
Program Director: Matthew Moree, MD
Madigan Army Medical Center Dept of Emergency Medicine
Bldg 6040 Reid St
Tacoma, WA 98431-6000
206 966-1509
Length: 3 Year(s)  Total Positions: 18  (GY: 0)
Program ID: 110-04-12-051

West Virginia
Morgantown
West Virginia University Program
West Virginia University Hospitals
Program Director: William D. Bansey, MD
Robert C. Byrd Health Sciences Center at West Virginia Univ
Dept of Emergency Medicine
PO Box 9149
Morgantown, WV 26506-9149
304 283-7216
Length: 3 Year(s)  Total Positions: 18  (GY: 6)
Program ID: 110-05-21-128

Wisconsin
Milwaukee
Medical College of Wisconsin Program
Medical College of Wisconsin Affiliated Hospitals Inc
John L. Doyne Hospital
Program Director: Gary J. Swart, MD
Medical College of Wisconsin Dept of Emergency Medicine
8700 W Wisconsin Ave
Box 304
Milwaukee, WI 53226
414 267-5888
Length: 3 Year(s)  Total Positions: 24  (GY: 6)
Program ID: 110-06-12-062

Endocrinology, Diabetes, and Metabolism (Internal Medicine)

Alabama
Birmingham
University of Alabama Medical Center Program
University of Alabama Hospital
Program Director: Jeffrey E. Koehlow, MD
University of Alabama Div of Endocrinology & Metabolism
1800 Seventh Ave S
Bldg BB 756
Birmingham, AL 35294-4019
205 934-4116
Length: 3 Year(s)  Total Positions: 3
Program ID: 143-01-21-103

Arizona
Phoenix
Good Samaritan Regional Medical Center Program
Good Samaritan Regional Medical Center
Carl T Hayden Veterans Affairs Medical Center (Phoenix)
Maricopa Medical Center
Program Director: James V. Felicetti, MD
Carl T Hayden Veterans Affairs Med Ctr Med Service (111)
660 E Indian School Rd
Phoenix, AZ 85012
602 222-9436
Length: 2 Year(s)  Total Positions: 4
Program ID: 143-03-21-1169

Tucson
University of Arizona Program
University of Arizona College of Medicine
Kino Community Hospital
University Medical Center
Veterans Affairs Medical Center (Tucson)
Program Director: David G. Johnson, MD
Univ of Arizona Dept of Medicine
1501 N Campbell Ave
Tucson, AZ 85724
520 626-3676
Length: 2 Year(s)  Total Positions: 2
Program ID: 143-03-21-090

Arkansas
Little Rock
University of Arkansas for Medical Sciences Program
University of Arkansas College of Medicine
John L. McClellan Memorial Veterans Hospital
University Hospital of Arkansas
Program Director: Stavros C. Manolagas, MD
Univ of Arkansas for Medical Sciences
4301 W Markham St
Little Rock, AR 72205
501 686-5130
Length: 2 Year(s)  Total Positions: 3
Program ID: 143-04-21-146

California
La Jolla
Scripps Clinic and Research Foundation Program
Scripps Clinic and Research Foundation Program
Program Director: George E. Dailey III, MD
Dept of Graduate Med Education/403C
Scripps Clinic & Research Fnd
10666 N Torrey Pines Rd
La Jolla, CA 92037-1050
619 554-9556
Length: 2 Year(s)  Total Positions: 2
Program ID: 143-05-21-667

Los Angeles
Cedars-Sinai Medical Center Program
Cedars-Sinai Medical Center
Program Director: Mayer B. Davidson, MD
Cedars-Sinai Medical Center
8700 Beverly Blvd B31
Los Angeles, CA 90048-1959
310 855-4918
Length: 2 Year(s)  Total Positions: 4
Program ID: 143-05-11-692

UCLA Medical Center Program
UCLA School of Medicine
UCLA Medical Center
Program Director: Andre Van Herle, MD
UCLA Schl of Med
Cf for the Hilh Sciences
Los Angeles, CA 90024-1736
213 384-5574
Length: 2 Year(s)  Total Positions: 4
Program ID: 143-05-11-105

University of Southern California Program
University of Southern California Medical Center
USC University Hospital
Program Director: Willa Haeus, MD
LAC/USC Medical Center
Div of Endocrinology
1200 N State St Res 8260
Los Angeles, CA 90033
213 323-7616
Length: 2 Year(s)  Total Positions: 2
Program ID: 143-05-21-041

*Updated information not provided.
Veterans Affairs Medical Center (West Los Angeles) Program
Veterans Affairs Medical Center (West Los Angeles)
Program Director: Jerome M Herkman, MD
West Los Angeles VA Medical Center
Wilshire & Sawtelle Blvds
Los Angeles, CA 90073
310 824-8444
Length: 2 Year(s)  Total Positions: 2
Program ID: 143-05-01-049

Los Angeles (Sepulveda)
UCLA San Fernando Valley Program
Veterans Affairs Medical Center (Sepulveda)
LAC-Olive View Medical Center
Program Director: Michael L Tuck, MD
Veterans Administration Medical Center
16111 Plummer St
Sepulveda, CA 91343
818 895-8906
Length: 2 Year(s)  Total Positions: 2
Program ID: 143-05-01-106

Orange
University of California (Irvine) Program
University of California (Irvine) Medical Center
Veterans Affairs Medical Center (Long Beach)
Program Director: Ellis S Levin, MD
Dept of Veterans Affairs Med Ctr
Dept of Endocrinology
6901 E Seventh St
Long Beach, CA 90822
310 494-5748
Length: 2 Year(s)  Total Positions: 3
Program ID: 143-05-01-122

Sacramento
University of California (Davis) Program
University of California (Davis) Medical Center
Program Director: Robert M Walter Jr, MD
University of California (Davis) Medical Center
4301 X St.
Sacramento, CA 95817
916 734-3739
Length: 2 Year(s)  Total Positions: 3
Program ID: 145-05-01-078

San Diego
University of California (San Diego) Program
University of California (San Diego) Medical Center
Veterans Affairs Medical Center (San Diego)
Program Director: Steven V Edelman, MD
B Lynn Seely, MD
University of California San Diego
Dept of Medicine (9111 G)
La Jolla, CA 92037
619 534-6661
Length: 2 Year(s)  Total Positions: 7
Program ID: 143-05-01-139

San Francisco
University of California (San Francisco) Program
University of California (San Francisco) School of Medicine
San Francisco General Hospital Medical Center
University of California (San Francisco) Medical Center
Veterans Affairs Medical Center (San Francisco)
Program Director: Gordon J Strewler, MD
VA Medical Center (111-N)
Univ of California (San Francisco)
4150 Clement St
San Francisco, CA 94121
415 750-2069
Length: 2 Year(s)  Total Positions: 9
Program ID: 143-05-01-054

Stanford
Stanford University Program
Stanford University Hospital
Santa Clara Valley Medical Center
Veterans Affairs Medical Center (Palo Alto)
Program Director: Fredric B Kraemer, MD
Stanford University Hospital
Dept of Medicine
380 Pasteur Dr
Stanford, CA 94305-5103
415 723-0004
Length: 2 Year(s)  Total Positions: 10
Program ID: 143-05-01-022

Torrance
Los Angeles County-Harbor-UCLA Medical Center Program
Los Angeles County-Harbor-UCLA Medical Center
Program Director: Ronald S Swedloff, MD
Los Angeles County-Harbor-UCLA Medical Center
1000 W Carson St Box 445
Torrance, CA 90509-3110
310 222-1867
Length: 2 Year(s)  Total Positions: 3
Program ID: 143-05-01-140

Colorado
Denver
University of Colorado Program
University of Colorado Health Sciences Center
Denver Health and Hospitals
Veterans Affairs Medical Center (Denver)
Program Director: E Chester Ridgeway, MD
Univ of Colorado Health Sciences Center
Div of Endocrinology Metab & Diab
4200 E Ninth Ave B151
Denver, CO 80262
303 270-8443
Length: 2 Year(s)  Total Positions: 8
Program ID: 143-07-31-050

Connecticut
Farmington
University of Connecticut Program
University of Connecticut School of Medicine
Hartford Hospital
St Francis Hospital and Medical Center
Univ of Connecticut Health Center/John Dempsey Hospital
Program Director: Lawrence G Raiser, MD
Carl D Malchow, MD PhD
University of Connecticut School of Medicine
Dept of Medicine/Endocrinology
263 Farmington Ave
Farmington, CT 06020-1850
203 679-2129
Length: 2 Year(s)  Total Positions: 3
Program ID: 143-08-01-001

New Haven
Yale-New Haven Medical Center Program*
Yale-New Haven Hospital
Veterans Affairs Medical Center (West Haven)
Program Director: Robert S Sherwin, MD
Yale University School of Medicine Dept of Medicine
Box 209020 Pitkin 1
New Haven, CT 06502-8020
203 785-4183
Length: 2 Year(s)  Total Positions: 8
Program ID: 143-08-01-023

District of Columbia
Washington
George Washington University Program
George Washington University School of Medicine
George Washington University Hospital
Veterans Affairs Medical Center (Washington DC)
Program Director: Kenneth L Becker, MD
George Washington University Hospital Dept of Medicine
2159 Pennsylvania Ave NW
Washington, DC 20037
202 994-6225
Length: 2 Year(s)  Total Positions: 5
Program ID: 143-10-01-056

Georgetown University Program
Georgetown University Hospital
Program Director: Terry Taylor, MD
Georgetown University Medical Center
Div of Endocrinology
3600 Reservoir Rd NW
Washington, DC 20007-2197
202 789-2818
Length: 2 Year(s)  Total Positions: 2
Program ID: 143-10-01-072

Howard University Program*
Howard University Hospital
District of Columbia General Hospital
Program Director: Wayman W Cheatham, MD
Howard University Hospital
2041 Georgia Ave NW
Washington, DC 20000
202 866-1516
Length: 2 Year(s)  Total Positions: 2
Program ID: 143-10-01-107

* Updated information not provided.
Accredited Programs in Endocrinology, Diabetes, and Metabolism (Internal Medicine)

Walter Reed Army Medical Center Program
Program Director: William J. Duncan, MD
Chief Endocrine/Metabolic Service
Walter Reed Army Medical Center
6225 16th St NW
Washington, DC 20010-5001
202 576-1780
Length: 2 Year(s) Total Positions: 6
Program ID: 149-10-11-108

Georgia

Atlanta

Emory University Program*
Emory University School of Medicine
Emory University School of Medicine
Grady Memorial Hospital
Veterans Affairs Medical Center (Atlanta)
Program Director: Lawrence CPhillips, MD
Emory University School of Medicine
69 Butter St SE
Atlanta, GA 30303
404 588-4945
Length: 2 Year(s)
Program ID: 143-12-21-109

Augusta

Medical College of Georgia Program
Medical College of Georgia Hospital and Clinics
Veterans Affairs Medical Center (Augusta)
Program Director: Peter F. Stein, MD
Medical College of Georgia
Dept of Medicine
712 Augusta, GA 30912
706 721-2131
Length: 2 Year(s) Total Positions: 2
Program ID: 143-12-21-102

Jacksonville

University of Florida Health Science Center/Jacksonville Program
University Medical Center (UFHSCJ)
Program Director: Ronald Skowly, MD
Univ of Florida Hlth Sci Ctr/Jacksonville
655 W Eighth St
Jacksonville, FL 32209
904 648-3011
Length: 2 Year(s) Total Positions: 2
Program ID: 145-11-21-6324

Miami

University of Miami-Jackson Memorial Medical Center Program
University of Miami-Jackson Memorial Medical Center
Veterans Affairs Medical Center (Miami)
Program Director: Peter J. Glickman, MD
University of Miami School of Medicine
Div of Endocrinology
PO Box 016860 (10-683)
Miami, FL 33101
305 354-3388
Length: 2 Year(s) Total Positions: 3
Program ID: 149-11-21-141

Tampa

University of South Florida Program
University of South Florida College of Medicine
James A Haley Veterans Hospital
Tampa General Healthcare
Program Director: Robert W. Parrish, MD
Univ of South Florida Coll of Med
12901 N 30th St Box 19
Tampa, FL 33612
813 972-5803
Length: 2 Year(s) Total Positions: 2
Program ID: 143-11-21-384

University of Chicago Program
University of Chicago Hospitals
Program Director: Kenneth S. Polonsky, MD
University of Chicago
5841 S Maryland Ave
MC1627
Chicago, IL 60637
312 707-6217
Length: 2 Year(s) Total Positions: 8
Program ID: 143-16-21-157

University of Illinois College of Medicine at Chicago/Michael Reese Hospital Program
University of Illinois College of Medicine at Chicago
Michael Reese Hospital and Medical Center
University of Illinois Hospital and Clinics
Veterans Affairs Westside Medical Center (Chicago)
Program Director: Solisbush C. Kokrda, MD
Section of Endocrinology Dept of Med
University of Illinois at Chicago
840 S Wood St MSC 787
Chicago, IL 60612
312 996-6992
Length: 2 Year(s) Total Positions: 5
Program ID: 143-16-21-625

Maywood

Loyola University Program*
Foster G. McGaw Hospital-Loyola University of Chicago
Edward J. Hines Jr Veterans Affairs Hospital
Program Director: Marion H. Brooks, MD
Div of Endocrinology and Metabolism
Loyola University Medical Center
2160 S First Ave Bldg 117 Rm 11
Maywood, IL 60153
708 216-9218
Length: 2 Year(s) Total Positions: 4
Program ID: 143-16-21-638

North Chicago

Fitch University Health Sciences/Chicago Medical School Program
Fich University Health Sciences/Chicago Medical School
Veterans Affairs Medical Center (North Chicago)
Program Director: Sant P. Singh, MD
Univ of Nth Sc/Th Chicago Medical School
Dept of Medicine
5333 Green Bay Rd
North Chicago, IL 60064-3006
708 578-3281
Length: 2 Year(s) Total Positions: 4
Program ID: 143-16-21-342

Springfield

Southern Illinois University Program
Southern Illinois University School of Medicine
Memorial Medical Center
St. John's Hospital
Program Director: Ronald Khadi, MD MB
Southern Illinois University School of Medicine
801 N Rutledge Mall Stop 1618
PO Box 19230
Springfield, IL 62794-9230
217 755-0160
Length: 2 Year(s) Total Positions: 1
Program ID: 143-16-21-164

* Updated information not provided.
**Indiana**

**Indianapolis**

**Indiana University Medical Center Program**
University of Louisville School of Medicine
Vanderbilt Affiliates Medical Center ( Louisville)
Program Director:
Vasti L. Brandt, MD
Univ of Louisville Dept of Med
Dep of Endocrinology
430 S Jackson St
Louisville, KY 40292
502.852.5327
Length: 2 Year(s) Total Positions: 1
Program ID: 143-20-31-073

**Louisville**

**University of Louisville Program**
University of Louisville School of Medicine
Univ of Louisville Hospital
Program Director:
Vasti L. Brandt, MD
Univ of Louisville Dept of Med
Div of Endocrinology
430 S Jackson St
Louisville, KY 40292
502.852.5327
Length: 2 Year(s) Total Positions: 1
Program ID: 143-20-31-073

**Maine**

**Portland**

**Maine Medical Center Program**
Maine Medical Center
Program Director:
Daniel S Oppenheim, PhD MD
Maine Medical Center
22 Bramhall St
Portland, ME 04102
207 871-2161
Length: 2 Year(s) Total Positions: 2
Program ID: 143-22-21-135

**Iowa**

**Iowa City**

**University of Iowa Hospitals and Clinics Program**
University of Iowa Hospitals and Clinics
Program Director:
Robert Bar, MD
University of Iowa Hospitals and Clinics
Dept of Med End-Med Endocrinology
Iowa City, IA 52242-1009
319 384-3681
Length: 2 Year(s) Total Positions: 2
Program ID: 143-20-21-079

**Kansas**

**Kansas City**

**University of Kansas Medical Center Program**
University of Kansas School of Medicine
University of Kansas Medical Center
Program Director:
KNeil Schimke, MD
University of Kansas Medical Center
Endocrinology/Metabolism Div
3901 Rainbow Blvd
Kansas City, KS 66160-7018
913 688-0484
Length: 2 Year(s) Total Positions: 2
Program ID: 143-20-21-084

**Louisiana**

**New Orleans**

**Alton Ochsner Medical Foundation Program**
Alton Ochsner Medical Foundation
Program Director:
Alan L. Burnell, MD
Alton Ochsner Medical Foundation
3501 Jefferson Hwy
New Orleans, LA 70118
504 842-3023
Length: 2 Year(s) Total Positions: 2
Program ID: 143-22-31-118

**Louisiana State University Program**
Louisiana State University School of Medicine
Medical Center of Louisiana at New Orleans-LSU Division
Medical Center of Louisiana University Hospital Campus
Program Director:
Curtis B. Cook, MD
Louisiana State Univ Med Schi
1542 Tulane Ave
New Orleans, LA 70112
504 865-5446
Length: 2 Year(s) Total Positions: 2
Program ID: 143-20-21-081

**Tulane University Program**
Tulane University School of Medicine
Medical Center of Louisiana at New Orleans-Tulane Division
Tulane University Hospital and Clinics
Program Director:
Jonathan B. Jaspal, MD
Tulane University Medical Center
1430 Tulane Ave SLE
New Orleans, LA 70112-2609
504 684-1851
Length: 2 Year(s) Total Positions: 2
Program ID: 143-20-21-089

**Maryland**

**Baltimore**

**Johns Hopkins University Program**
Johns Hopkins University School of Medicine
Johns Hopkins Hospital
Program Director:
Paul W. Ladenson, MD
Johns Hopkins University School of Medicine
600 N Wolfe St Baltimore, MD 21287-6000
410 955-2063
Length: 2 Year(s) Total Positions: 4
Program ID: 143-23-11-061

**University of Maryland Program**
University of Maryland Medical System
Veterans Affairs Medical Center (Baltimore)
Program Director:
John P. Wilber, MD
University of Maryland Medical System
Div of Endocrinology Rm #3N250
22 S Greene St
Baltimore, MD 21201-1585
410 952-2510
Length: 2 Year(s) Total Positions: 4
Program ID: 143-23-31-036

**Kentucky**

**Lexington**

**University of Kentucky Medical Center Program**
University of Kentucky Medical Center
Program Director:
Gordon Guthrie, MD
University of Kentucky Medical Center
Dept of Medicine
800 Rose St MNS20
Lexington, KY 40536
606 255-2651
Length: 2 Year(s) Total Positions: 1
Program ID: 143-20-21-167

**Shreveport**

**Louisiana State University Program (Shreveport)**
Louisiana State University Medical Center-Shreveport
Program Director:
Steven N. Levin, MD
La State University Medical Center Hospital
1601 Kings Hwy PO Box 33032
Shreveport, LA 71130-3932
318 679-5660
Length: 2 Year(s) Program ID: 143-21-21-074

**Bethesda**

**National Institutes of Health Clinical Center Program**
NIH Warren Grant Magnuson Clinical Center
Program Director:
Bruce D. Weinstein, MD
Bldg 10 Room 8-3-14
National Institutes of Health
Bethesda, MD 20892
301 496-3405
Length: 2 Year(s) Total Positions: 6
Program ID: 143-23-11-167

**National Naval Medical Center (Bethesda) Program**
National Naval Medical Center (Bethesda)
Program Director:
K M M Shakil, MD
National Naval Medical Center
Endocrinology & Metabolism Div
Dept of Medicine
Bethesda, MD 20889-6600
301 275-6615
Length: 2 Year(s) Total Positions: 2
Program ID: 143-23-11-126

* Updated Information not provided.
Massachusetts

Boston
Beth Israel Hospital Program
Beth Israel Hospital
Program Director:
Lewie Landsberg, MD
Beth Israel Hospital Dept of Medicine
330 Brookline Ave
Boston, MA 02215
617 735-4236
Length: 2 Year(s) Total Positions: 5
Program ID: 145-24-31-004

Boston University University Program*
Boston University School of Medicine
Boston City Hospital
Boston University Medical Center-University Hospital
Program Director:
Michael P. Hulik, PhD MD
Boston City Hospital
818 Harrison Ave
Thomson Hospital
Boston, MA 02118
617 854-3320
Length: 2 Year(s) Total Positions: 6
Program ID: 143-24-31-127

Brigham Women's Hospital Program
Brigham Women's Hospital
Program Director:
I. Gordon Williams, MD
Brigham and Women's Hospital
Endocrine-Hypertension Division
221 Longwood Ave
Boston, MA 02115
617 732-5661
Length: 2 Year(s) Total Positions: 6
Program ID: 143-24-31-005

Massachusetts General Hospital Program*
Massachusetts General Hospital
Program Director:
Joseph A. Spada, MD
Massachusetts General Hospital
Endocrine Training Program WEL 501
Fruit St
Boston, MA 02114
617 736-3566
Length: 2 Year(s) Total Positions: 12
Program ID: 143-24-31-002

New England Deaconess Hospital Program 1
New England Deaconess Hospital
Joslin Diabetes Center
Program Director:
Edward S. Horton, MD
New England Deaconess Hospital
Joslin Diabetes Center
300 Longwood Ave
Boston, MA 02215
617 524-2300
Length: 2 Year(s) Total Positions: 7
Program ID: 143-24-31-111

New England Medical Center Hospitals Program*
New England Medical Center Hospitals
Program Director:
Seymour Belchino, MD
New England Medical Center
Div of Endo Diabetes Metabolism
750 Washington St Box 268
Boston, MA 02111
617 636-5602
Length: 2 Year(s) Total Positions: 6
Program ID: 143-24-31-006

Burlington
New England Deaconess Hospital Program 2
Lahey Clinic
Joslin Diabetes Center
Program Director:
Gary W. Cushing, MD
Lahey Clinic Foundation
41 Mall Rd
Burlington, MA 01803
617 273-8452
Length: 2 Year(s) Total Positions: 4
Program ID: 143-24-31-119

Springfield
Baystate Medical Center Program
Baystate Medical Center
Program Director:
Burritt L. Haag, MD
Baystate Medical Center
Endocrine Metabolic Div
768 Chestnut St
Springfield, MA 01199
413 794-3250
Length: 2 Year(s) Total Positions: 2
Program ID: 143-24-31-062

Worcester
University of Massachusetts Medical Center Program*
University of Massachusetts Medical Center
Program Director:
Lewis E. Brauerman, MD
Univ of Massachusetts Med Ctr
Div of Endocrinology
55 Lake Ave N
Worcester, MA 01655
508 856-3115
Length: 2 Year(s) Total Positions: 7
Program ID: 143-24-31-007

Michigan
Ann Arbor
University of Michigan Program*
University of Michigan Hospitals
Veterans Affairs Medical Center (Ann Arbor)
Program Director:
Douglas A Greene, MD
University of Michigan Hospitals
2020 Taubman Ctr Box 0564
1500 E Medical Center Dr
Ann Arbor, MI 48109-0564
313 856-5505
Length: 2 Year(s) Total Positions: 6
Program ID: 143-25-21-003

Detroit
Henry Ford Hospital Program
Henry Ford Hospital
Program Director:
Max Wiegner, MD
Henry Ford Hospital
2700 W Grand Blvd
Detroit, MI 48202
313 876-3468
Length: 2 Year(s) Total Positions: 4
Program ID: 143-25-11-112

Wayne State University/Detroit Medical Center Program
Wayne State University School of Medicine
Detroit Receiving Hospital and University Health Center
Harper Hospital
Veterans Affairs Medical Center (Allen Park)
Program Director:
James R. Sowers, MD
Endocrinology
University Health Center 4H
4201 St Antoine
Detroit, MI 48201
313 745-4008
Length: 2 Year(s) Total Positions: 6
Program ID: 143-25-21-040

Minnesota
Minneapolis
University of Minnesota Program
University of Minnesota Medical School
University of Minnesota Hospital and Clinic
Veterans Affairs Medical Center (Minneapolis)
Program Director:
Paul Robertson, MD
Univ of Minnesota Hosp & Clin Dept of Med
Diabetes/Endocrinology Div/Box 101 UMHC
420 Delaware St SE
Minneapolis, MN 55455
612 626-1966
Length: 2 Year(s) Total Positions: 2
Program ID: 143-25-21-099

Rochester
Mayo Graduate School of Medicine Program
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Rochester)
Rochester Methodist Hospital
St Mary's Hospital of Rochester
Program Director:
Daniel L. Hurley, MD
MGSM Application Processing Ctr
Siebens 5th Fl
Mayo Graduate Sch of Med
Rochester, MN 55906
507 284-2476
Length: 2 Year(s) Total Positions: 12
Program ID: 143-25-21-049

* Updated information not provided.
Missouri

Columbia
University of Missouri-Columbia Program
University of Missouri-Columbia School of Medicine
Harry S Truman Memorial Veterans Hospital
University and Children's Hospital
Program Director:
David M Kachko, MD
University of Missouri Health Sciences Center
1111 Cosmopolitan Int Diabetes Ctr
One Hospital Dr
Columbia, MO 65212
573 882-5255
Length: 2 Year(s)  Total Positions: 2
Program ID: 143-28-21-064

Kansas City
University of Missouri at Kansas City Program
University of Missouri-Kansas City School of Medicine
Truman Medical Center-West
Program Director:
William L Iseley, MD
UMMC School of Medicine
2411 Holmes
Kansas City, MO 64108
816 235-1965
Length: 2 Year(s)  Total Positions: 2
Program ID: 143-28-21-168

St Louis
Barnes Hospital Group Program
Barnes Hospital
Jewish Hospital of St Louis
Program Director:
Philip E Cryer, MD
Barnes Hospital
4699 Barnes Hospital Plaza
St Louis, MO 63110
314 933-7617
Length: 2 Year(s)  Total Positions: 6
Program ID: 143-28-21-169

St Louis University Group of Hospitals Program
St Louis University School of Medicine
St Louis University Hospital
Program Director:
Arsgh D Moosad, MD
St Louis University Health Sciences Center
1462 S Grand Blvd
St Louis, MO 63104-1006
314 577-8458
Length: 2 Year(s)  Total Positions: 2
Program ID: 143-28-21-090

New Hampshire

Lebanon
Dartmouth-Hitchcock Medical Center Program
Mary Hitchcock Memorial Hospital
Veterans Affairs Medical Center (White River Junction)
Program Director:
Lee A Witters, MD
Dartmouth Medical School
Rensse 322
Hanover, NH 03755-3833
603 650-1000
Length: 2 Year(s)  Total Positions: 2
Program ID: 143-32-21-120

New Jersey

Newark
UMDNJ-New Jersey Medical School Program
UMDNJ-New Jersey Medical School
Dept of Veterans Affairs Medical Center (East Orange)
UMDNJ-University Hospital
Program Director:
Amrita Dasbarshapata, MD
UMDNJ-New Jersey Medical School
185 S Orange Ave
MSB 1588
Newark, NJ 07103
973 958-6100
Length: 2 Year(s)  Total Positions: 6
Program ID: 143-35-21-148

Piscataway
UMDNJ-Robert Wood Johnson Medical School Program
UMDNJ-Robert Wood Johnson Medical School
Robert Wood Johnson University Hospital
St Peter's Medical Center
Program Director:
Avedis K Khachadarian, MD
Louis Amorosa MD
UMDNJ-Robert Wood Johnson Medical School
Div of Endocrinology MSB 204
One Robert Wood Johnson Pl CN10
New Brunswick, NJ 08903-0019
908 238-7749
Length: 3 Year(s)  Total Positions: 2
Program ID: 143-35-21-096

South Orange
Seton Hall University School of Graduate Medical Education Program
Seton Hall University School of Graduate Medical Education
Program Director:
Nicholas G Baranekis, MD
St Michael's Medical Center
268 Dr M L King Jr Blvd
Newark, NJ 07102
201 977-5156
Length: 2 Year(s)  Total Positions: 2
Program ID: 143-35-11-160

New Mexico

Albuquerque
University of New Mexico Program
University of New Mexico School of Medicine
University Hospital
Veterans Affairs Medical Center (Albuquerque)
Program Director:
R Phillip Eaton, MD
University of New Mexico
Schl of Med Dept of Med
ACC 5th Fl
Albuquerque, NM 87131-5271
505 272-4656
Length: 2 Year(s)  Total Positions: 2
Program ID: 143-34-21-113

New York

Albany
Albany Medical Center Program*
Albany Medical Center Hospital
Veterans Affairs Medical Center (Albany)
Program Director:
A David Goodman, MD
Albany Medical Center Dept of Medicine-Endocrinology
44
44 New Scotland Ave
Albany, NY 12208
518 445-5185
Length: 3 Year(s)  Total Positions: 2
Program ID: 143-35-31-007

Bronx
Albert Einstein College of Medicine (East Campus) Program
Albert Einstein College of Medicine of Yeshiva University
Bronx Municipal Hospital Center
Montefiore Medical Center-Weiller Hospital
Program Director:
Norman S Fletcher, MD
Albert Einstein College of Medicine
1300 Morris Park Ave
Bronx, NY 10461
718 430-2989
Length: 2 Year(s)  Total Positions: 3
Program ID: 143-35-21-097

Albert Einstein College of Medicine (West Campus) Program
Albert Einstein College of Medicine of Yeshiva University
Montefiore Medical Center-Harry and Lucy Moses Division
North Central Bronx Hospital
Program Director:
Martin I Burkis, MD
Montefiore Medical Center
Div of Endocrinology
111 E 210th St
Bronx, NY 10467
718 430-4071
Length: 2 Year(s)  Total Positions: 2
Program ID: 143-35-21-085

* Updated Information not provided.
Accredited Programs in Endocrinology, Diabetes, and Metabolism (Internal Medicine)

Brooklyn
Brookdale Hospital Medical Center Program*
Brookdale Hospital Medical Center
Program Director: Joel M. Goldman, MD
Brookdale Hospital Medical Center
Linden Blvd at Brookdale Plaza
Room 101A SI
Brooklyn, NY 11212-3198
718 490-5238
Length: 2 Year(s) Total Positions: 2
Program ID: 143-35-11-144

Coney Island Hospital Program
Coney Island Hospital
Program Director: Mary F. Wheeler, MD
Coney Island Hospital
2601 Ocean Pkwy
Brooklyn, NY 11205
718 815-5000
Length: 2 Year(s) Total Positions: 2
Program ID: 143-35-11-138

Interfaith Medical Center Program
Interfaith Medical Center
Coney Island Hospital
Program Director: Farida Khan, MD
Interfaith Medical Center
565 Prospect Pl
Brooklyn, NY 11238
718 956-7532
Length: 2 Year(s) Total Positions: 2
Program ID: 143-35-21-143

SUNY Health Science Center at Brooklyn Program*
SUNY HSC at Brooklyn College of Medicine
Kings County Hospital Center
University Hospital-SUNY Health Science Center at Brooklyn
Veterans Affairs Medical Center (Brooklyn)
Program Director: Harold E. Lebowitz, MD
SUNY Downstate Medical Center
460 Clarkson Ave Box 1305
Brooklyn, NY 11203
718 270-1699
Length: 2 Year(s) Total Positions: 5
Program ID: 143-35-21-110

Buffalo
SUNY at Buffalo Graduate Medical-Dental Education Consortium Program
SUNY at Buffalo Grad Medical-Dental Education Consortium
Erie County Medical Center
Veterans Affairs Medical Center (Buffalo)
Program Director: Stephen W. Spaulding, MD
VA Medical Center (151)
3405 Bailey Ave
Buffalo, NY 14215
716 862-9645
Length: 2 Year(s) Total Positions: 5
Program ID: 143-35-31-008

East Meadow
SUNY at Stony Brook (East Meadow) Program
Nassau County Medical Center
Program Director: W N Cronkelts, MD
Nassau County Medical Center
2201 Hempstead Tpke
East Meadow, NY 11554-6500
516 982-6504
Length: 2 Year(s) Total Positions: 2
Program ID: 143-35-21-001

Mineola
Winthrop-University Hospital Program
Winthrop-University Hospital
Nassau County Medical Center
Queens Hospital Center
Program Director: John P. Alia, MD
Winthrop-University Hospital
250 First St
Mineola, NY 11501
516 693-2381
Length: 2 Year(s) Total Positions: 3
Program ID: 143-35-11-005

New Hyde Park
Albert Einstein College of Medicine at Long Island Jewish Medical Center Program
Long Island Jewish Medical Center
Queens Hospital Center
Program Director: Bruce S. Schneider, MD
Long Island Jewish Medical Center
270-45 70th Ave
New Hyde Park, NY 11040
718 470-7241
Length: 2 Year(s) Total Positions: 3
Program ID: 143-35-21-114

New York
Albert Einstein College of Medicine at Beth Israel Medical Center Program*
Both Israel Medical Center
Program Director: Barnett Zarembl, MD
Beth Israel Medical Center
First Ave at 16th St
New York, NY 10003
212 420-4008
Length: 2 Year(s) Total Positions: 2
Program ID: 143-35-21-145

Mount Sinai School of Medicine Program
Mount Sinai School of Medicine
Elmhurst Hospital Center-Mount Sinai Services
Mount Sinai Medical Center
Veterans Affairs Medical Center (Bronx)
Program Director: Terry P. Davies, MD
Mount Sinai Hospital
One Gustave L. Levy Pl Box 1065
New York, NY 10029-6574
212 841-6000
Length: 2 Year(s) Total Positions: 6
Program ID: 143-35-31-130

New York Hospital/ Cornell Medical Center Program
New York Hospital
Program Director: Juliane Imperato-McGinley, MD
New York Hospital-Cornell Medical Center
525 E 68th St ST-283
New York, NY 10021
212 746-4746
Length: 2 Year(s) Total Positions: 5
Program ID: 143-35-21-136

New York University Medical Center Program
New York University Medical Center
Bellevue Hospital Center
Program Director: Charles S. Hollander, MD
New York University Medical Center
Dept of Med Div of Endocrinology
550 First Ave
New York, NY 10016
212 293-5441
Length: 2 Year(s) Total Positions: 4
Program ID: 143-35-21-048

Presbyterian Hospital in the City of New York Program
Presbyterian Hospital in the City of New York
Program Director: John P Bilenkian, MD
The Presbyterian Hospital
630 W 165th St
New York, NY 10025
212 305-3743
Length: 2 Year(s) Total Positions: 4
Program ID: 143-35-11-003

St Luke's-Roosevelt Hospital Center (St Luke's) Program
St Luke's-Roosevelt Hospital Center
St Luke's-Roosevelt Hospital Center-St Luke's Division
Program Director: F Xavier Pf-Sunyer, MD
St Luke's-Roosevelt Hospital Center-St Luke's Division
1111 Amsterdam Ave
New York, NY 10025
212 525-4161
Length: 2 Year(s) Total Positions: 2
Program ID: 143-35-21-026

Rochester
University of Rochester Program
Strong Memorial Hospital of the University of Rochester
Program Director: Robert Harrison, MD
Strong Memorial Hospital
601 Elmwood Ave
PO Box 603
Rochester, NY 14642-5603
716 275-2549
Length: 2 Year(s) Total Positions: 6
Program ID: 143-35-11-145

Stony Brook
SUNY at Stony Brook Program
University Hospital at Stony Brook
Veterans Affairs Medical Center (Northport)
Program Director: Harold E. Carlson, MD
Div of Endocrinology
Hill Sci Ctr Tin-060
Stony Brook, NY 11794-8154
516 444-1696
Length: 2 Year(s) Total Positions: 4
Program ID: 143-35-21-011

* Updated information not provided.

Graduate Medical Education Directory
Syracuse
SUNY Health Science Center at Syracuse Program
University Hospital SUNY Health Science Center at Syracuse
Veterans Affairs Medical Center (Syracuse)
Program Director:
Ruth S Winstock, MD PhD
Dept of Medicine
SUNY Health Science Center
750 E Adams St
Syracuse, NY 13210
315 464-5726
Length: 2 Year(s)  Total Positions: 2
Program ID: 143-35-21-987

Valhalla
New York Medical College (Lincoln) Program
New York Medical College
Lincoln Medical and Mental Health Center
Program Director:
Lourdes M Miranda, MD
Lincoln Medical and Mental Health Center Dept of Medicine
234 E 140th St
Bronx, NY 10461
718 578-5277
Length: 2 Year(s)  Total Positions: 1
Program ID: 143-35-21-076

New York Medical College at St Vincent's Hospital and Medical Center of New York Program
New York Medical College
St Vincent's Hospital and Medical Center of New York
The Bogosian Institute
Program Director:
Iven S Young, MD
St Vincent's Hospital and Medical Center of New York
163 W 11th St MD 7 F D
New York, NY 10011
212 604-5832
Length: 2 Year(s)  Total Positions: 2
Program ID: 143-35-21-182

New York Medical College at Westchester County Medical Center Program*
New York Medical College
Westchester County Medical Center
Program Director:
A Louis Southern, MD
New York Medical College
Dept of Medicine
Valhalla, NY 10595
614 226-5757
Length: 2 Year(s)  Total Positions: 1
Program ID: 143-35-11-012

North Carolina
Chapel Hill
University of North Carolina Hospitals Program
University of North Carolina Hospitals
Program Director:
David R Clemmons, MD
Univ of North Carolina Sch of Med
Div of Endocrinology
Manning Bldg CB #7170
Chapel HI, NC 27599-7170
919 964-9836
Length: 2 Year(s)  Total Positions: 2
Program ID: 143-35-21-115

Durham
Duke University Program
Duke University Medical Center
Program Director:
Marc Drezeren, MD
Duke University Medical Center
Box 2966
Durham, NC 27710
919 684-5197
Length: 2 Year(s)  Total Positions: 9
Program ID: 143-36-21-116

Greenville
East Carolina University Program
East Carolina University School of Medicine
Pitt County Memorial Hospital
Program Director:
David R Snyder, MD
East Carolina Univ School of Medicine
Dept of Med/Endocrinology 2N72
Greenville, NC 27834-4354
919 866-2567
Length: 2 Year(s)  Total Positions: 2
Program ID: 143-35-11-132

Winston-Salem
Bowman Gray School of Medicine Program
North Carolina Baptist Hospital
Program Director:
K Patrick Ober, MD
North Carolina Baptist Hospital
Medical Center Blvd
Winston-Salem, NC 27157-1047
910 710-6062
Length: 2 Year(s)  Total Positions: 2
Program ID: 143-35-21-013

Ohio
Cincinnati
University of Cincinnati Hospital Group Program
University of Cincinnati Hospital
Veterans Affairs Medical Center (Cincinnati)
Program Director:
Robert M Cohen, MD
University of Cincinnati
Division of Endocrinology
PO Box 67047
Cincinnati, OH 45267-047
513 558-4444
Length: 2 Year(s)  Total Positions: 1
Program ID: 143-35-21-066

Cleveland
Case Western Reserve University Program
University Hospitals of Cleveland
MetroHealth Medical Center
Veterans Affairs Medical Center (Cleveland)
Program Director:
David C Aren, MD
Baha M Arasb, MD
Case Western Reserve University
Sch of Med Mrs 433
10900 Euclid Ave
Cleveland, OH 44106-4951
216 368-6129
Length: 2 Year(s)  Total Positions: 3
Program ID: 143-35-21-131

Cleveland Clinic Foundation/St Vincent Charity Hospital Program
Cleveland Clinic Foundation
Program Director:
Byron J Hoogwerf, MD
Cleveland Clinic Foundation
9500 Euclid Ave T 22
Dept of Endocrinology
Cleveland, OH 44195-5242
216 444-5869
Length: 2 Year(s)  Total Positions: 6
Program ID: 143-35-12-122

Columbus
Ohio State University Program
Ohio State University Medical Center
Program Director:
James M Falko, MD
Ohio State University Hospitals
N-1166 Eosn Bldg
410 W Tenth Ave
Columbus, OH 43210-1238
614 293-5511
Length: 2 Year(s)  Total Positions: 4
Program ID: 143-38-11-121

Toledo
Medical College of Ohio at Toledo Program
Medical College of Ohio Hospital
Mercy Hospital of Toledo
Program Director:
Roberto Pravoa-Saenz, MD
Medical College of Ohio Hospital
3800 Arlington
PO Box 10938
Toledo, OH 43606-0008
419 394-1700
Length: 2 Year(s)  Total Positions: 1
Program ID: 143-38-21-014

* Updated information not provided.

Graduate Medical Education Directory 377
Oklahoma

Oklahoma City

University of Oklahoma Health Sciences Center Program
University of Oklahoma College of Medicine-Oklahoma City
University Hospital and Clinics Veterans Affairs Medical Center (Oklahoma City)
Program Director: David C Kem, MD
University of Oklahoma College of Medicine
PO Box 26901
385-511
Oklahoma City, OK 73190
405 271-5856
Length: 2 Year(s) Total Positions: 4
Program ID: 148-38-03-067

Oregon

Portland

Oregon Health Sciences University Program
Oregon Health Sciences University Hospital Veterans Affairs Medical Center (Portland)
Program Director: Eric S Orwall, MD
Portland VA Medical Center (III)
3710 SW US Veterans Rd
PO Box 1034
Portland, OR 97207
503 278-5915
Length: 2 Year(s) Total Positions: 4
Program ID: 148-40-31-147

Pennsylvania

Hershey

Milton S Hershey Medical Center of Pennsylvania State University Program* Penn State University Hospital-Milton S Hershey Med Ctr
Program Director: Andrea Mann, MD
Milton S Hershey Medical Center of the Penn State Univ
PO Box 850
500 University Dr
Hershey, PA 17033
717 531-8485
Length: 2 Year(s) Total Positions: 2
Program ID: 148-41-11-015

Philadelphia

MCPhiU/Hahnemann University Hospital Program
Hahnemann University Hospital
Program Director: Leslie J Roes, MD
Mail Stop 428 - Room 6444 NCD
230 N Broad St
Philadelphia, PA 19102-1192
215 762-8114
Length: 2 Year(s) Total Positions: 2
Program ID: 148-41-21-045

MCPhiU/Medical College of Pennsylvania Hospital Program
Medical College of Pennsylvania Hospital
Program Director: Doris G Bartuska, MD
Medical College of Pennsylvania Hospital
3300 Henry Ave
Philadelphia, PA 19129
267 945-6852
Length: 2 Year(s) Total Positions: 4
Program ID: 148-41-31-099

Temple University Program
Temple University Hospital
Program Director: Guenter Boden, MD
Temple University Hospital Dept of Medicine
3401 N Broad St
Philadelphia, PA 19140
215 221-5908
Length: 2 Year(s) Total Positions: 3
Program ID: 148-41-31-029

Thomas Jefferson University Program
Thomas Jefferson University Hospital
Program Director: Barry J Goldstein, MD PhD Jefferson Med Coll of Thomas Jefferson Univ Hosp Dept of Med Div of Endocrinology
1020 Locust St Ste 549
Philadelphia, PA 19107-6790
215 955-1772
Length: 2 Year(s) Total Positions: 2
Program ID: 148-41-21-166

University of Pennsylvania Program
Hospital of the University of Pennsylvania
Program Director: John C Hadadi, MD
Univ of Pennsylvania School of Medicine
611 Clinical Research Bldg
410 Curie Blvd
Philadelphia, PA 19104-0140
267 989-0320
Length: 2 Year(s) Total Positions: 6
Program ID: 148-41-21-021

Pittsburgh

Shadyside Hospital Program
Shadyside Hospital
Program Director: Vijay K Raha, MD
Shadyside Hospital
5200 Centre Ave
Pittsburgh, PA 15232
412 968-3485
Length: 2 Year(s) Total Positions: 2
Program ID: 148-41-25-044

University Health Center of Pittsburgh Program
University Health Center of Pittsburgh Montefiore University Hospital (UPMC) Presbyterian-University Hospital/UPMC Veterans Affairs Medical Center (Pittsburgh)
Program Director: Alan G Robinson, MD
University Health Center of Pittsburgh
3550 Terrace St
1200 Scaife Hall
Pittsburgh, PA 15261
412 959-0770
Length: 2 Year(s) Total Positions: 6
Program ID: 148-41-21-037

Puerto Rico

Rio Piedras
San Juan City Hospital Program
San Juan City Hospital
Program Director: Gilbert Colon, MD
Dept of Medicine San Juan Municipal Hospital
Box 21406
Puerto Rico Medical Center
Rio Piedras, PR 00928
889 755-5147
Length: 2 Year(s) Total Positions: 2
Program ID: 148-43-11-082

San Juan
University of Puerto Rico Program
University of Puerto Rico School of Medicine
University Hospital
Program Director: Francisco Aguiló, MD
University Hospital Puerto Rico Medical Center
Box 5507
San Juan, PR 00905
809 754-3633
Length: 2 Year(s)
Program ID: 148-42-21-100

Rhode Island

Providence
Brown University Program
Rhode Island Hospital Roger Williams Medical Center Veterans Affairs Medical Center (Providence)
Program Director: Ivar M D Jackson, MD
Brown University
Box 0 (RIH)
Providence, RI 02913
401 444-1470
Length: 2 Year(s) Total Positions: 4
Program ID: 148-43-11-101

South Carolina

Charleston
Medical University of South Carolina Program
Medical University of South Carolina College of Medicine MUSC Medical Center Veterans Affairs Medical Center (Charleston)
Program Director: John A Colwell, MD
Medical University of South Carolina
171 Ashley Ave
Charleston, SC 29425-2222
803 792-2329
Length: 2 Year(s) Total Positions: 4
Program ID: 143-45-21-088

* Updated information not provided.
Accredited Programs in Endocrinology, Diabetes, and Metabolism (Internal Medicine)

Columbia
Richland Memorial Hospital-University of South Carolina School of Medicine Program
Richland Memorial Hospital/Univ of South Carolina Sch of Med
William Jennings Bryan Dorn Veterans Hospital
Program Director:
Ta Lin, MD
University of South Carolina School of Medicine
Library Building Ste 316
Columbia, SC 29209
803-733-3112
Length: 2 Year(s) Total Positions: 2
Program ID: 143-48-21-077

Tennessee
Memphis
University of Tennessee Program*
University of Tennessee College of Medicine
Baptist Memorial Hospital
Regional Medical Center at Memphis
Veterans Affairs Medical Center (Memphis)
Program Director:
Abbe E Elshab, MD PhD
University of Tennessee
961 Court Ave Room 335-M
Memphis, TN 38163
901-528-5902
Length: 2 Year(s) Total Positions: 3
Program ID: 143-47-21-117

Nashville
Vanderbilt University Program
Vanderbilt University Medical Center
Program Director:
James M Nog, MD
Vanderbilt University Dept of Medicine
A4207 Medical Center North
21st & Garland Ave
Nashville, TN 37232-2550
615-343-2171
Length: 2 Year(s) Total Positions: 6
Program ID: 143-47-31-016

Galveston
University of Texas Medical Branch Hospitals Program
University of Texas Medical Branch Hospitals
Program Director:
Randall J Urban, MD
University of Texas Medical Branch Dept of Med
3.1.42 MBB 1060
UTMB
Galveston, TX 77555-1060
409-772-1179
Length: 2 Year(s) Total Positions: 3
Program ID: 143-48-21-163

Houston
Baylor College of Medicine Program
Baylor College of Medicine
Harris County Hospital District Ben Taub General Hospital
Methodist Hospital
Veterans Affairs Medical Center (Houston)
Program Director:
Glenn B Cunningham, MD
Baylor College of Medicine
Texas Medical Center
One Baylor Plaza Room 557-C
Houston, TX 77030-5488
713-798-6563
Length: 2 Year(s) Total Positions: 9
Program ID: 143-48-31-070

University of Texas at Houston Program
University of Texas Medical School at Houston
 Hermann Hospital
Lyndon B Johnson General Hospital
Program Director:
Philip Orlandos, MD
Univ of Texas Medical School Dept of Med
P.O. Box 20708
Houston, TX 77225
713-798-5068
Length: 2 Year(s) Total Positions: 4
Program ID: 143-48-31-017

Lackland AFB
Wilford Hall USAF Medical Center Program
Wilford Hall USAF Medical Center (SG)
Program Director:
Robert F Dorr, MD
59TH Medical Wing (AFTC)
Dept of Endocrinology/FSME
3206 Balcones Dr Ste 1
Lackland AFB, TX 78236-5000
210-676-6475
Length: 2 Year(s) Total Positions: 4
Program ID: 143-48-10-049

San Antonio
University of Texas Health Science Center at San Antonio Program
University of Texas Medical School at San Antonio
Audie L Murphy Memorial Veterans Hospital (San Antonio)
University Hospital-South Texas Medical Center
Program Director:
Gregory H Mundy, MD
University of Texas Health Science Center
Div of Endocrinology & Metabolism
7700 Floyd Curl Dr
San Antonio, TX 78284-7877
210-577-4900
Length: 2 Year(s) Total Positions: 4
Program ID: 143-48-21-055

Temple
Texas A&M College of Medicine-Scott and White Program
Scott and White Memorial Hospital
Program Director:
Jeffrey A Jackson, MD
Texas A&M Scott & White
Graduate Medical Education
2401 S 31st St
Temple, TX 76508
903-278-4483
Length: 2 Year(s) Total Positions: 2
Program ID: 143-48-21-018

Utah
Salt Lake City
University of Utah Program
University of Utah Medical Center
Veterans Affairs Medical Center (Salt Lake City)
Program Director:
Hunter Smith, MD
60 N Medical Dr Room 4C116
University of Utah Medical Center
60 N Medical Dr
Salt Lake City, UT 84132
801-581-7761
Length: 2 Year(s) Total Positions: 5
Program ID: 143-49-21-139

Vermont
Burlington
Medical Center Hospital of Vermont Program
Medical Center Hospital of Vermont
Program Director:
Jorge Calles-Escandon, MD
Univ of Vermont Coll of Medicine
Dep of Medicine
Given C-322
Burlington, VT 05406-0068
802-656-2500
Length: 2 Year(s) Total Positions: 1
Program ID: 143-50-21-134

Virginia
Charlottesville
University of Virginia Program
University of Virginia Medical Center
Program Director:
Michael O Theriot, MD
University of Virginia Hospitals Dept of Med
Box 611
Charlottesville, VA 22908
804-882-3387
Length: 2 Year(s) Total Positions: 4
Program ID: 143-51-21-019

* Updated information not provided.
Richmond
Medical College of Virginia/Virginia Commonwealth University Program
Medical College of Virginia/Virginia Commonwealth University
Huntter Holmes McGuire VA Medical Center (Richmond)
Medical College of Virginia Hospitals
Program Director:
William G Backard, MD
MC/Virginia Commonwealth Univ
5595 Willow Lawn Rd
Richmond, VA 23229-0155
804 868-2623
Length: 2 Year(s)  Total Positions: 4
Program ID: 143-61-21-020

Washington
Seattle
University of Washington Program
University of Washington School of Medicine
Harrington Medical Center
University of Washington Medical Care Veterans Affairs Medical Center (Seattle)
Program Director:
John D Broussard, MD
Div of Endocrinology
Endocrinology and Nutrition 822-36
University of Washington
Seattle, WA 98195
206 642-3158
Length: 2 Year(s)  Total Positions: 11
Program ID: 143-64-21-271

Tacoma
Madigan Army Medical Center Program
Madigan Army Medical Center
Program Director:
Robert P Jones, MD
Madigan Army Medical Center
Dept of Medicine
Endocrinology Service
Tacoma, WA 98431-5000
206 968-0438
Length: 2 Year(s)  Total Positions: 3
Program ID: 143-64-12-056

West Virginia
Huntington
Marshall University School of Medicine Program
Marshall University School of Medicine
Cabell Huntington Hospital
St Mary's Hospital
Veterans Affairs Medical Center (Huntington)
Program Director:
Bruce D Cloud, MD
Marshall University School of Medicine
Dept of Medicine
Huntington, WV 25755-0419
304 696-7113
Length: 2 Year(s)  Total Positions: 4
Program ID: 143-65-21-031

Morgantown
West Virginia University Program
West Virginia University Hospitals
Program Director:
Robert D Keel, MD PhD
West Virginia University
Dept of Medicine HSN
PO Box 9150
Morgantown, WV 26506-9150
304 595-3125
Length: 3 Year(s)  Total Positions: 12
Program ID: 143-56-31-108

Wisconsin
Madison
University of Wisconsin Program
University of Wisconsin Hospital and Clinics
William S Middleton Veterans Hospital
Program Director:
Sarah Shellen, MD
University of Wisconsin Hospital and Clinics
600 Highland Ave Ste H4/568
Madison, WI 53705-2148
608 263-8232
Length: 2 Year(s)  Total Positions: 2
Program ID: 143-66-21-102

Milwaukee
Medical College of Wisconsin Program
Medical College of Wisconsin Affiliated Hospitals Inc
Clement J Zablocki Veterans Affairs Medical Center
John H Stgeme Hospital
Program Director:
Ahmed H Kissebah, MD PhD
Medical College of Wisconsin
Prosthesis Memorial Lutheran Hosp
2220 W Wisconsin Ave
Milwaukee, WI 53226
414 454-5130
Length: 2 Year(s)  Total Positions: 3
Program ID: 143-66-31-039

Family Practice
Alabama
Birmingham
Carraway Methodist Medical Center Program
Carraway Methodist Medical Center
Program Director:
Marshall S Boone Jr, MD PhD
Carraway Methodist Medical Center
Dept of Family Med
3001 27th St S
Birmingham, AL 35207
205 212-5001
Length: 3 Year(s)  Total Positions: 12  (GYI: 4)
Program ID: 120-01-31-019

Medical Center East Program
Medical Center East
Program Director:
Marion C Sims, MD
Family Practice Center
7833 Second Ave S
Birmingham, AL 35206
205 820-0018
Length: 3 Year(s)  Total Positions: 15  (GYI: 5)
Program ID: 120-01-31-020

University of Alabama Medical Center Program
University of Alabama Hospital
Program Director:
William L Fitchett III, MD
University of Alabama School of Medicine
Community Hlth Serv Bldg
920 20th St S Ste 311-D
Birmingham, AL 35203
205 934-3683
Length: 3 Year(s)  Total Positions: 17  (GYI: 5)
Program ID: 12001-21-021

Huntsville
University of Alabama Medical Center (Huntsville) Program
University of Alabama School of Medicine in Huntsville
Huntsville Hospital
Program Director:
Michael M Linder, MD
University Medical Clinics
261 Governors Dr
Huntsville, AL 35801
205 551-4627
Length: 3 Year(s)  Total Positions: 36  (GYI: 12)
Program ID: 12001-114-023

Mobile
University of South Alabama Program
University of South Alabama Medical Center
Program Director:
Jim L. Wilson, MD
University of South Alabama
Dept of Fam Pract & Comm Med
1504 Springhill Ave
Mobile, AL 36604
205 444-3484
Length: 3 Year(s)  Total Positions: 18  (GYI: 6)
Program ID: 12001-114-024

*Updated information not provided.
Selma
University of Alabama Medical Center (Selma Dallas County) Program
Four Rivers Medical Center
Vaughn Regional Medical Center
Program Director: Donald G. Overstreet, MD
Dept of Family Practice
428 Lauderdale St
Selma, AL 36701
205 876-4184
Length: 3 Year(s)  Total Positions: 14  (GYT: 6)
Program ID: 120-01-21-026

Tuscaloosa
University of Alabama Medical Center (Tuscaloosa) Program
University of Alabama College of Community Health Sciences
DCBM Regional Medical Center
Program Director: Alan J Maxwell, MD
Educational Tower University of Alabama
Box 870078
Tuscaloosa, AL 35487-0078
205 348-3723
Length: 3 Year(s)  Total Positions: 40  (GYT: 12)
Program ID: 120-01-21-027

Arizona
Phoenix
Good Samaritan Regional Medical Center Program
Good Samaritan Regional Medical Center
Program Director: Howard D Silverman, MD
GSRM Family Practice Residency
1300 N 12th St #400
Phoenix, AZ 85006
602 238-2656
Length: 3 Year(s)  Total Positions: 24  (GYT: 8)
Program ID: 120-04-13-026

Phoenix Baptist Hospital and Medical Center Program
Phoenix Baptist Hospital and Medical Center
Program Director: Christopher P Shearer, MD
Phoenix Baptist Hospital and Medical Center
Family Medicine Center
PO Box 1489
Phoenix, AZ 85011
602 241-5521
Length: 3 Year(s)  Total Positions: 22  (GYT: 8)
Program ID: 120-02-21-029

St Joseph's Hospital and Medical Center Program
St Joseph's Hospital and Medical Center
Program Director: Donald McHard, MD
Dept of Family Practice
St Joseph's Hospital
350 W Thomas Rd
Phoenix, AZ 85001-2071
602 868-3125
Length: 3 Year(s)  Total Positions: 25  (GYT: 8)
Program ID: 120-05-12-030

Scottsdale
Scottsdale Memorial Hospital Program
Scottsdale Memorial Hospital
Maricopa Medical Center
Program Director: Robert J Creager, MD
Scottsdale Memorial Hospital
7801 E Fourth St #22
Scottsdale, AZ 85251
480 481-4890
Length: 3 Year(s)  Total Positions: 23  (GYT: 8)
Program ID: 120-03-32-031

Tucson
University of Arizona Program
University of Arizona College of Medicine
University Medical Center
Program Director: Craig L McClure, MD
Dept of Family and Community Medicine
1450 N Cherry Ave
Tucson, AZ 85719-4286
626-1750
Length: 3 Year(s)  Total Positions: 17  (GYT: 10)
Subspecialties: FPG
Program ID: 120-03-12-032

Arkansas
Little Rock
University of Arkansas for Medical Sciences AHEC (Fort Smith) Program
UAMS Area Health Education Centers Program
Sparke Regional Medical Center
Program Director: Larry L Hanley, MD
612 S 12th St
Fort Smith, AR 72901-4702
501 785-3401
Length: 3 Year(s)  Total Positions: 17  (GYT: 6)
Program ID: 120-04-21-034

University of Arkansas for Medical Sciences AHEC (Northeast) Program
UAMS Area Health Education Centers Program
St Bernard's Regional Medical Center
Program Director: Joe Stallings, MD
Family Practice Residency Program
UAMS AHEC Northeast
225 E Jackson
Jonesboro, AR 72401
501 972-0093
Length: 3 Year(s)  Total Positions: 14  (GYT: 5)
Program ID: 120-04-21-046

University of Arkansas for Medical Sciences AHEC (Northwest) Program
UAMS Area Health Education Centers Program
Area Health Education Center (Northwest)
Washington Regional Medical Center
Program Director: Raymond G Brefeld, MD
Fayetteville Family Practice Residency Program
UAMS-AHEC-NW
2907 E Joyce
Fayetteville, AR 72703
501 521-0283
Length: 3 Year(s)  Total Positions: 18  (GYT: 6)
Program ID: 120-04-21-053

University of Arkansas for Medical Sciences AHEC (Pine Bluff) Program*
UAMS Area Health Education Centers Program
Jefferson Regional Medical Center
Program Director: Herbert F Fendley, MD
Family Practice
4010 Northpark
Pine Bluff, AR 71601
501 541-6010
Length: 3 Year(s)  Total Positions: 18  (GYT: 6)
Program ID: 120-04-11-037

University of Arkansas for Medical Sciences AHEC (South Arkansas) Program
UAMS Area Health Education Centers Program
Area Health Education Center (South Arkansas)
Medical Center of South Arkansas (Union Medical Center)
Medical Center of South Arkansas (Warner Brown Hospital)
Program Director: Mark Utson, MD
Area Health Education Center AHEC South Arkansas
490 W Faulkner
El Dorado, AR 71730
501 862-2401
Length: 3 Year(s)  Total Positions: 15  (GYT: 5)
Program ID: 120-04-21-045

University of Arkansas for Medical Sciences AHEC (Southwest) Program
UAMS Area Health Education Centers Program
Ark Michael Hospital
Program Director: George W Finley, MD
Univ of Arkansas for Medical Science AHEC Southwest
PO Box 2871
Texarkana, AR 71544
501 774-7600
Length: 3 Year(s)  Total Positions: 18  (GYT: 6)
Program ID: 120-04-21-047

University of Arkansas for Medical Sciences Program*
University of Arkansas College of Medicine
John L McClean Memorial Veterans Hospital
University Hospital of Arkansas
Program Director: Ronald X Brimberry, MD
University of Arkansas for Medical Sciences
401 W Markham Slot 630
Little Rock, AR 72205 7189
501 686-6613
Length: 3 Year(s)  Total Positions: 34  (GYT: 8)
Program ID: 120-04-21-038

California
Bakersfield
Kern Medical Center Program
Kern Medical Center
Program Director: Navinchandra M Amu, MD
Kern Medical Center
Dept of Family Medicine
1830 Flower St
Bakersfield, CA 93305-4197
805 326-2191
Length: 3 Year(s)  Total Positions: 12  (GYT: 4)
Program ID: 120-04-11-036

* Updated information not provided.
Accredited Programs in Family Practice

Camp Pendleton
Naval Hospital (Camp Pendleton) Program
Naval Hospital (Camp Pendleton)
Program Director: Richard R Jeffries, DO
Dept of Family Practice
Naval Hospital
Box 350191
Camp Pendleton, CA 92095-5191
619 725-9568
Length: 3 Year(s) Total Positions: 36 (GY: 12)
Program ID: 120-05-12-014

Cerritos
FHP Southern California Region Program
FHP Southern California Region
FHP Fountain Valley Program
Program Director: Robert W Smith, MD
FHP Southern California Family Medicine Residency Program
FHP Costa Mesa Medical Center
880 W Baker St Ste 100
Costa Mesa, CA 92626
714 545-8842
Length: 3 Year(s) Total Positions: 12 (GY: 8)
Program ID: 120-05-21-542

Fresno
University of California (San Francisco)Fresno Program
UCSF-Fresno Medical Education Program
Valley Medical Center of Fresno
Program Director: John Swetlter, MD
Valley Medical Center
445 S Cedar Ave
Fresno, CA 93702
209 455-0700
Length: 3 Year(s) Total Positions: 36 (GY: 12)
Program ID: 120-05-21-041

Glendale
Glendale Adventist Medical Center Program
Glendale Adventist Medical Center
White Memorial Medical Center
Program Director: Janet Cunningham, MD
Glendale Adventist Med Ctr
Dept of Family Practice
801 S Chevy Chase Dr #201
Glendale, CA 91206
818 696-0694
Length: 3 Year(s) Total Positions: 24 (GY: 8)
Program ID: 120-05-21-372

Loma Linda
Loma Linda University Program
Loma Linda University Community Hospital
Riverside General Hospital
University Medical Center
Program Director: John K Testerman, MD PhD
Loma Linda Univ Med Ctr
Family Practice Residency
20565 Barton Rd #209-B
Loma Linda, CA 92354
909 798-6688
Length: 2 Year(s) Total Positions: 18 (GY: 6)
Program ID: 120-05-21-471

Long Beach
Long Beach Memorial Medical Center Program
Long Beach Memorial Medical Center
Program Director: Stephen A Brunton, MD
Dept of Family Practice
Long Beach Memorial Med Ctr
450 S Spring St
Long Beach, CA 90806
310 585-5255
Length: 3 Year(s) Total Positions: 21 (GY: 9)
Program ID: 120-05-21-044

Los Angeles
Charles R Drew University Program*
Charles R Drew University of Medicine and Science
LAC-king/Drew Medical Center
Program Director: Lucile St Croix, MPH MD
Kings Drew Med Ctr
1821 E 120th St MP67
Los Angeles, CA 90059
213 683-4805
Length: 3 Year(s) Total Positions: 19 (GY: 9)
Program ID: 120-05-11-048

UCLA Medical Center Program
UCLA School of Medicine
LAC-Olive View Medical Center
UCLA Medical Center
Program Director: Martin Quan, MD
UCLA Family Health Center
200 UCLA Medical Plaza
Ste 220
Los Angeles, CA 90024-1828
310 267-1715
Length: 3 Year(s) Total Positions: 31 (GY: 8)
Program ID: 120-05-11-049

University of Southern California/California Medical Center (Los Angeles) Program
California Medical Center (Los Angeles)
Program Director: Patrick W Pannock, MD
USC/California Medical Center
1401 S Grand
Los Angeles, CA 90015
213 744-5754
Length: 3 Year(s) Total Positions: 18 (GY: 6)
Program ID: 120-05-21-458

White Memorial Medical Center Program
White Memorial Medical Center
Program Director: Luis Samaniego, MD
White Memorial Med Ctr
1725 Nyma E Chavez Ave
Los Angeles, CA 90053
213 386-5780
Length: 3 Year(s) Total Positions: 18 (GY: 6)
Program ID: 120-05-21-480

Martinez
Contra Costa County Health Services Program
Merritt Hospital Medical Center
Program Director: T Rich McNabb, MD
Merritt Hospital Medical Center
2500 Alhambra Ave
Martinez, CA 94553-3191
510 779-5117
Length: 3 Year(s) Total Positions: 27 (GY: 9)
Program ID: 120-05-31-600

Merced
Merced Family Practice Program
Merced Community Medical Center
Program Director: Daniel J Murphy, MD
Merced Community Medical Center
261 E 12th St P.O Box 231
Merced, CA 95340
209 385-7172
Length: 3 Year(s) Total Positions: 18 (GY: 6)
Program ID: 120-05-21-409

Modesto
Stanislaus Medical Center Program*
Stanislaus Medical Center
Program Director: John C Payne, MD
Stanislaus Medical Center
800 Scenic Dr
Modesto, CA 95356
209 525-7217
Length: 3 Year(s) Total Positions: 25 (GY: 9)
Program ID: 120-05-11-062

Northridge
Northridge Hospital Medical Center Program
Northridge Hospital Medical Center
Program Director: Myron C Greenfeld, MD
Northridge Family Practice Residency
1906 Ruscoe Blvd
Northridge, CA 91325
818 890-4054
Length: 3 Year(s) Total Positions: 21 (GY: 7)
Program ID: 120-05-11-083

Orange
University of California (Irvine) Program
University of California (Irvine) Medical Center
Western Medical Center
Program Director: David H Morishashi, MD
Univ of California (Irvine) Med Ctr
Dept of Family Medicine
P.O Box 14091
Orange, CA 92613-1401
714 459-6002
Length: 3 Year(s) Total Positions: 30 (GY: 10)
Program ID: 120-05-21-042

* Updated information not provided.
Pasadena
Southern California Kaiser Permanente Medical Care (Anaheim) Program
Southern California Kaiser Permanente Medical Group
Kaiser Foundation Hospital (Anaheim)
Program Director:
Timothy A. Morris, MD
Kaiser Medical Office
393 E Walnut St
Pasadena, CA 91106-8013
800 541-7946
Length: 3 Year(s) Total Positions: 12 (GYT: 6)
Program ID: 120-05-31-515

Southern California Kaiser Permanente Medical Care (Fontana) Program
Southern California Kaiser Permanente Medical Group
Kaiser Foundation Hospital (Fontana)
Program Director:
James F. Ulan, MD
Southern California Kaiser Permanente Med Ctr
393 E Walnut St
Pasadena, CA 91106-8013
800 541-7946
Length: 3 Year(s) Total Positions: 30 (GYT: 9)
Program ID: 120-05-12-040

Southern California Kaiser Permanente Medical Care (Los Angeles) Program
Southern California Kaiser Permanente Medical Group
Kaiser Foundation Hospital (Los Angeles)
Program Director:
James Hara, MD
Kaiser Foundation Hospital
393 E Walnut St
Pasadena, CA 91106-8013
800 541-7946
Length: 3 Year(s) Total Positions: 24 (GYT: 6)
Subspecialties: FP, GYN
Program ID: 120-05-11-947

Southern California Kaiser Permanente Medical Care (Riverside) Program
Southern California Kaiser Permanente Medical Group
Kaiser Foundation Hospital (Riverside)
Program Director:
Walter C. Morgan, MD
Kaiser Permanente Med Ctr (Riverside)
393 E Walnut St
Pasadena, CA 91106-8013
800 541-7946
Length: 3 Year(s) Total Positions: 18 (GYT: 6)
Program ID: 120-05-21-698

Southern California Kaiser Permanente Medical Care (Woodland Hills) Program
Southern California Kaiser Permanente Medical Group
Kaiser Foundation Hospital (Woodland Hills)
Program Director:
Leo Elizondo, MD
Kaiser Foundation Hospital
393 E Walnut St
Pasadena, CA 91106-8013
800 541-7946
Length: 3 Year(s) Total Positions: 10 (GYT: 6)
Program ID: 120-05-21-514

Redding
University of California (Davis) Redding Program
Mercy Medical Center
University of California (Davis) Medical Center
Program Director:
Ronald W. Brand, MD
Mercy Medical Center
Clairmont HS
PO Box 49600
Redding, CA 96040-6000
510 222-6090
Length: 3 Year(s) Total Positions: 24 (GYT: 8)
Program ID: 120-05-31-484

Riverside
Riverside General Hospital-University Medical Center Program*
Riverside General Hospital-University Medical Center
Program Director:
Y Paul Anguila, MD
Riverside General Hospital-University Medical Center
9851 Magnolia Ave
Riverside, CA 92503
114 351-7454
Length: 3 Year(s) Total Positions: 6 (GYT: 6)
Program ID: 120-05-21-412

Sacramento
Sutter Health Program
Sutter Health
Sutter General Hospital
Program Director:
William Gillanders, MD
Sutter Health Family Practice Residency
2800 Q St.
Sacramento, CA 95816
916 731-7866
Length: 3 Year(s) Total Positions: 16 (GYT: 6)
Program ID: 120-05-21-558

San Bernardino
San Bernardino County Medical Center Program
San Bernardino County Medical Center
Program Director:
Andre V. Blysvich, MD
San Bernardino County Medical Center
780 E Gilbert St
San Bernardino, CA 92415-6005
909 267-7102
Length: 3 Year(s) Total Positions: 6 (GYT: 18)
Program ID: 120-05-11-457

San Diego
Sharp HealthCare (Chula Vista) Program
Sharp HealthCare
Program Director:
Kevin A. Malone, MD
3131 Berger Ave
San Diego, CA 92123
619 541-4506
Length: 3 Year(s) Total Positions: 16 (GYT: 6)
Program ID: 120-05-31-548

Sharp HealthCare (La Mesa) Program
Sharp HealthCare
Grossmont Hospital
Program Director:
Joseph E. Scherer, MD
Sharp HealthCare
Grossmont Hospital
PO Box 155
La Mesa, CA 91942-0158
619 664-4106
Length: 3 Year(s) Total Positions: 16 (GYT: 6)
Program ID: 120-05-21-539

Sharp HealthCare (San Diego) Program*
Sharp HealthCare
Sharp Memorial Hospital
Program Director:
John E. Jenette, MD
3131 Berger Ave
San Diego, CA 92123
619 541-4016
Length: 3 Year(s) Total Positions: 16 (GYT: 6)
Program ID: 120-05-21-559

University of California (San Diego) Program*
University of California (San Diego) Medical Center
Program Director:
William A. Norcross, MD
University of California (San Diego) Medical Center
2221 Stockton Blvd Rm 2121
San Francisco, CA 94117
916 734-3422
Length: 3 Year(s) Total Positions: 36 (GYT: 12)
Program ID: 120-05-11-039

Salinas
Natividad Medical Center Program
Natividad Medical Center
Program Director:
Richard E. Brandt, MD
Natividad Medical Center
PO Box 81111
Salinas, CA 93902-1111
408 707-4201
Length: 3 Year(s) Total Positions: 21 (GYT: 7)
Program ID: 120-05-21-656

San Francisco
University of California (San Francisco) Program*
University of California (San Francisco) School of Medicine
Program Director:
David V. Rodgers, MD
San Francisco General Hospital
4000 Sutter St
San Francisco, CA 94110
415 525-5416
Length: 3 Year(s) Total Positions: 37 (GYT: 11)
Program ID: 120-05-11-059

* Updated information not provided.
San Jose
San Jose Medical Center Program
San Jose Medical Center
Program Director:
Robert M. Norman, MD
San Jose Medical Center
25 N 14th St Ste 1060
San Jose, CA 95112
408 977-4507
Length: 3 Year(s)  Total Positions: 19 (GYI: 6)
Program ID: 120-06-23-001

Santa Monica
Santa Monica Hospital Medical Center Program
Santa Monica Hospital Medical Center
Program Director:
Eugene A. Feldman, MD
Santa Monica Hospital Med Center
1355 15th St
Santa Monica, CA 90404
312-518-4709
Length: 3 Year(s)  Total Positions: 24 (GYI: 8)
Program ID: 120-06-11-064

San Diego
University of California (San Francisco)/Santa Rosa Program Community Hospital
Program Director:
Marshall K. Kodama, MD
Community Hospital Residency Program
13313 Chloride Rd
Santa Rosa, CA 95404
707-576-4717
Length: 3 Year(s)  Total Positions: 36 (GYI: 13)
Program ID: 120-06-11-085

Stockton
San Joaquin General Hospital Program
San Joaquin General Hospital
Program Director:
Aynaf Jafari, MD
San Joaquin General Hospital
PO Box 1026
Stockton, CA 95201
209-468-6836
Length: 3 Year(s)  Total Positions: 21 (GYI: 7)
Program ID: 120-06-01-066

Torrance
Los Angeles County-Harbor-UCLA Medical Center Program
Los Angeles County-Harbor-UCLA Medical Center
Program Director:
Pattie Dowling, MD MPH
Harbor-UCLA Family Health Center
1001 W Carson St Ste 1
Torrance, CA 90402-2000
310-222-5206
Length: 3 Year(s)  Total Positions: 26 (GYI: 8)
Program ID: 120-06-01-078

Travis AFB
David Grant USAF Medical Center Program
David Grant Medical Center
Program Director:
Lt Col Peter S. Krough, MD
60th Med Group
Dept of Family Practice
101 Bodin Circle
Travis AFB, CA 94536-1800
707-423-2365
Length: 3 Year(s)  Total Positions: 30 (GYI: 10)
Program ID: 120-06-11-001

Ventura
Ventura County Medical Center Program
Ventura County Medical Center
Program Director:
Larry E. Dial, MD
Weston City Med Ctr
Medic Dept
2281 Loma Vista Rd
Ventura, CA 93003
805-652-6225
Length: 3 Year(s)  Total Positions: 40 (GYI: 13)
Program ID: 120-06-11-068

Whittier
University of Southern California Program
Presbyterian Intercommunity Hospital
Los Angeles County-USC Medical Center
University of Southern California School of Medicine
Program Director:
Del Morris, MD
Presbyterian Intercommunity Hospital
12401 Washington Blvd
USC PIH Family Practice Program
Whittier, CA 90602
310-665-1069
Length: 3 Year(s)  Total Positions: 27 (GYI: 11)
Subspecialties: FP
Program ID: 120-06-21-352

Colorado
Denver
Provenant Mercy Hospital Program
Provenant Mercy Hospital
Program Director:
Timothy E. Dudley, MD
Provenant Mercy Medical Center
1650 Fillmore St
Denver, CO 80206-1560
303-292-3089
Length: 3 Year(s)  Total Positions: 36 (GYI: 12)
Program ID: 120-07-12-069

St. Joseph Hospital Program
St. Joseph Hospital
Program Director:
Martin Kleinman, MD
St. Joseph Hosp Family Practice Center
5000 Franklin St
Midtown II Ste 200
Denver, CO 80055
303-764-2015
Length: 3 Year(s)  Total Positions: 22 (GYI: 8)
Program ID: 120-07-12-070

University of Colorado (Clinica Campesina) Program
University of Colorado Health Sciences Center
Artis Hospital
Denver Health and Hospitals
Rose Medical Center
Veterans Affairs Medical Center (Denver)
Program Director:
Colleen M. Cony, MD
Ctr for Studies in Family Med
1180 Clermont St
Denver, CO 80220
303-270-6191
Length: 3 Year(s)  Total Positions: 6 (GYI: 1)
Program ID: 120-07-21-537

University of Colorado at Swedish Medical Center Program
University of Colorado Health Sciences Center
Swedish Medical Center
Program Director:
Wilson D. Pace, MD
Residency Administration
191 E Orchard Rd #160
Littleton, CO 80121
303-785-5524
Length: 3 Year(s)  Total Positions: 12 (GYI: 4)
Program ID: 120-07-21-544

University of Colorado Program
University of Colorado Health Sciences Center
Swedish Medical Center
Program Director:
Colleen M. Cony, MD
Univ of Colorado at Rose Medical Center
Dept of Family Med
1180 Clermont St
Denver, CO 80220
303-270-5191
Length: 3 Year(s)  Total Positions: 24 (GYI: 8)
Subspecialties: FP
Program ID: 120-07-21-071

Fort Collins
Fort Collins Family Medicine Program
Foothills Family Medical Center
Program Director:
Austen G. Bailey, MD
Fort Collins Family Medicine Residency Program
1055 Peace Park Pl
Fort Collins, CO 80524-3250
303-486-8993
Length: 3 Year(s)  Total Positions: 18 (GYI: 6)
Program ID: 120-07-31-072

Grand Junction
St. Mary's Hospital and Medical Center Program
St. Mary's Hospital and Medical Center
Program Director:
Daniel R. Bill, MD
St. Mary's Family Practice Center
2353 N Ninth St
Grand Junction, CO 81501-2609
303-244-2105
Length: 3 Year(s)  Total Positions: 18 (GYI: 6)
Program ID: 120-07-31-073

* Updated information not provided.
Greeley
North Colorado Medical Center (Wray)
Program
North Colorado Medical Center
Wray Community District Hospital
Program Director:
Joe R Ferguson, MD
North Colorado Medical Center
1650 16th St
Greeley, CO 80631
970-349-5200
Length: 3 Years (Total Positions: 2 (GYI: 1)
Program ID: 120-07-11-074

North Colorado Medical Center Program
North Colorado Medical Center
Program Director:
Joe R Ferguson, MD
Family Practice Residency Program
1650 16th St
Greeley, CO 80631
970-349-5200
Length: 3 Years (Total Positions: 23 (GYI: 7)
Program ID: 120-07-11-074

Pueblo
Southern Colorado Family Medicine Program
St Mary-Corwin Hospital Regional Medical and Health Center
Program Director:
Charles H Auye, MD
Southern Colorado Family Medicine
1008 Minnequa Ave
Pueblo, CO 81004
719-569-5872
Length: 3 Years (Total Positions: 20 (GYI: 8)
Program ID: 120-07-21-075

Connecticut
Farmington
University of Connecticut Program
University of Connecticut School of Medicine
St Francis Hospital and Medical Center
Program Director:
Robert A Cashman, MD
Asylum Hill Family Practice Center
123 Sigourney St
Hartford, CT 06106-374
203-566-9994
Length: 3 Years (Total Positions: 19 (GYI: 8)
Program ID: 120-09-21-076

Midtown
Middlesex Hospital Program
Middlesex Hospital
Program Director:
Robert K Shaper, MD
Family Practice Residency Program
Middlesex Hospital
50 S Main St
Middletown, CT 06457-611
203-344-6805
Length: 3 Years (Total Positions: 22 (GYI: 8)
Program ID: 120-09-21-077

Stamford
St Joseph Medical Center Program
St Joseph Medical Center
Program Director:
Joseph Connelly, MD
St Joseph Medical Center
128 Strawberry Hill Ave
Stamford, CT 06904-1222
203-332-5270
Length: 3 Years (Total Positions: 12 (GYI: 4)
Program ID: 120-08-11-078

Delaware
Wilmington
The Medical Center of Delaware Program
The Medical Center of Delaware
Program Director:
Daniel L DePietro, MD
Family Medicine Center
1401 Poudre Rd
Wilmington, DE 19890-2754
302-477-3200
Length: 3 Years (Total Positions: 26 (GYI: 8)
Program ID: 120-09-11-079

Temple University (Wilmington) Program
St Francis Hospital
Program Director:
Kim T Carpenter, MD
St Francis Hospital Family Practice Center
Seventh & Clayton Sts
Wilmington, DE
Length: 3 Years (Total Positions: 16 (GYI: 6)
Program ID: 120-09-31-415

District of Columbia
Washington
George Washington University Program*
George Washington University School of Medicine
George Washington University Hospital
Holy Cross Hospital of Silver Spring
Program Director:
Brian P Schultz, MD
Silver Spring, MD
Length: 3 Years (Total Positions: 18 (GYI: 6)
Program ID: 120-19-31-156

Georgetown University/Providence Hospital Program
Providence Hospital
Program Director:
Robert J Carr, MD
Georgetown University/Providence Hospital
Family Practice Residency Program
1150 Varnum St NE
Washington, DC 20017
301-699-7707
Length: 3 Years (Total Positions: 12 (GYI: 7)
Subspecialization: FPG
Program ID: 120-10-21-680

Howard University Program*
Howard University Hospital
Program Director:
Henry N Williams Jr, MD
Howard University Hospital
2041 Georgia Ave NW Ste 210F
Washington, DC 20030
202-332-8715
Length: 3 Years (Total Positions: 26 (GYI: 8)
Program ID: 120-19-21-681

Florida
Daytona Beach
Halifax Medical Center Program
Halifax Medical Center
Program Director:
Richard T Brainard, MD
Halifax Medical Center
PO Box 2388
Daytona Beach, FL 32120-2388
904-254-6167
Length: 3 Years (Total Positions: 20 (GYI: 7)
Program ID: 120-19-11-083

Eglin AFB
Headquarters Air Force Development Test Center (AFMC) Program
Headquarters Air Force Development Test Center (AFMC)
Program Director:
Col Peter K Senechal, MD
60th Medical Group
Eglin AFB, FL
904-882-1901
Length: 3 Years (Total Positions: 24 (GYI: 8)
Program ID: 120-19-11-083

Gainesville
University of Florida Program
University of Florida College of Medicine
Alachua General Hospital
Shands Hospital at the University of Florida
Program Director:
Martin A Dewar, MD JI
Family Practice Residency Program
035 SW Fourth Ave
PO Box 14701
Gainesville, FL 32614
904-322-4541
Length: 3 Years (Total Positions: 19 (GYI: 7)
Program ID: 120-10-01-084

University of Florida North Broward Hospital District Program*
University of Florida College of Medicine
North Broward Hospital District
Program Director:
Edward Shaday, MD
Dept of Family Practice
Coral Springs Med Ctr
3000 Coral Hills Dr
Coral Springs FL 33065
954-334-3000
Length: 3 Years (Total Positions: 48 (GYI: 14)
Program ID: 120-10-31-049

* Updated information not provided.
Accredited Programs in Family Practice

Jacksonville
Naval Hospital (Jacksonville) Program
Naval Hospital (Jacksonville)
Program Director:
Thomas A. Miller, MD
Dept of Family Practice
Naval Hospital
2080 Child St
Jacksonville, FL 32214-6227
904 777-7762
Length: 3 Year(s)  Total Positions: 30 (GY: 10)
Program ID: 120-11-11-815

St Vincent's Medical Center Program
St Vincent's Medical Center
Program Director:
Merrill A Anderson, MD
Dept of Family Practice
2708 St Johns Ave
Jacksonville, FL 32205
904 391-1274
Length: 3 Year(s)  Total Positions: 30 (GY: 10)
Program ID: 120-11-11-888

University of Florida Health Science Center/Jacksonville Program
University Medical Center (UFHSJC)
Program Director:
George R Wilson, MD
Univ of Florida Dept of Family Practice
Dept of Community Hlth/Family Med
1355 Lita St
Jacksonville, FL 32206
904 794-5677
Length: 3 Year(s)  Total Positions: 28 (GY: 10)
Program ID: 120-11-11-486

Miami
University of Miami-Jackson Memorial Medical Center Program
University of Miami-Jackson Memorial Medical Center
Program Director:
Michel Doulard, MD
University of Miami-Jackson Memorial Medical Center
1111 NW 12th Ave
Miami, FL 33136
305 548-2000
Length: 3 Year(s)  Total Positions: 40 (GY: 13)
Program ID: 120-11-11-087

Orlando
Florida Hospital Program
Florida Hospital
Program Director:
Richard L. Milholen, MD
Florida Hospital
2560 N Orange Ave #235
Orlando, FL 32804
407 889-6144
Length: 3 Year(s)  Total Positions: 46 (GY: 15)
Program ID: 120-11-11-488

Pensacola
Naval Hospital (Pensacola) Program
Naval Hospital (Pensacola)
Program Director:
Luther M Mays, MD
Naval Hospital
Casa De Mar
0000 Hwy 98 W
Pensacola, FL 32502-0003
904 482-6472
Length: 3 Year(s)  Total Positions: 30 (GY: 12)
Program ID: 120-11-12-116

St Petersburg
Bayfront Medical Center Program
Bayfront Medical Center
Program Director:
Corey H Evans, MD
500 Seventh St S
St Petersburg, FL 33701
813 892-5153
Length: 3 Year(s)  Total Positions: 24 (GY: 8)
Program ID: 120-11-11-890

Tallahassee
Tallahassee Family Practice Program
Tallahassee Memorial Regional Medical Center
Program Director:
John R Purvis, MD
Family Practice Residency Program
1301 Hodges Dr
Tallahassee, FL 32308-4676
904 651-5714
Length: 3 Year(s)  Total Positions: 30 (GY: 10)
Program ID: 120-11-11-806

Georgia
Albany
Phoebe Putney Memorial Hospital Program
Phoebe Putney Memorial Hospital
Program Director:
Gary Levitt, MD
Southwest Family Medicine Residency
500 Third Ave Ste 103
Albany, GA 31707
912 888-8271
Length: 3 Year(s)  Total Positions: 12 (GY: 6)
Program ID: 120-12-11-870

Atlanta
Georgia Baptist Medical Center Program
Georgia Baptist Medical Center
Program Director:
Frank R Don Diego, MD
Georgia Baptist Family Practice Residency Program
100 Corporate Center Dr
Suite 300
Morristown, GA 30060
404 986-5400
Length: 3 Year(s)  Total Positions: 12 (GY: 6)
Program ID: 120-12-11-838

Morehouse School of Medicine Program
Morehouse School of Medicine
Southwest Hospital and Medical Center
Program Director:
Harry Shaw-Strother III, MD
Predie Asion, EdD PhD
Dept of Family Medicine
500 Fairburn Rd SW
Atlanta, GA 30313-0999
404 756-1230
Length: 3 Year(s)  Total Positions: 16 (GY: 6)
Program ID: 120-12-11-839

Augusta
Medical College of Georgia Program
Medical College of Georgia Hospital and Clinics
Program Director:
Paul D Forney, MD
Med Coll of Georgia
Dept of Family Med
1120 Hahn St
Augusta, GA 30912-3500
800 728-3107
Length: 3 Year(s)  Total Positions: 24 (GY: 8)
Program ID: 120-12-11-891

Columbus
The Medical Center Program
The Medical Center Inc
Program Director:
John R Bucholtz, DO
The Medical Center Inc
Dept of Family Practice
710 Center St Box 196
Columbus, GA 31904-2299
706 571-1866
Length: 3 Year(s)  Total Positions: 36 (GY: 12)
Program ID: 120-12-11-802

Fort Benning
Martin Army Community Hospital Program
Martin Army Community Hospital
Program Director:
La Col Steven E Reissman, MD
Martin Army Community Hosp
Dept of Family Medicine
Attn: HHSSFRT
Fort Benning, GA 31905-6100
404 544-4750
Length: 3 Year(s)  Total Positions: 12 (GY: 8)
Program ID: 120-12-11-486

Fort Gordon
Dwight David Eisenhower Army Medical Center Program
Dwight David Eisenhower Army Medical Center
Program Director:
Bruce A Leibert, MD
Dwight David Eisenhower Army Medical Center
Dept of Fam & Com Med
Fort Gordon, GA 30905-5650
706 731-0505
Length: 3 Year(s)  Total Positions: 27 (GY: 10)
Program ID: 120-12-11-809

Macon
Mercer University School of Medicine Program
Medical Center of Central Georgia
Program Director:
William F Rhines III, MD
Dept of Family Medicine
Medical Center of Central Georgia
2780 Eisenhower Pkwy
Macon, GA 31206
912 784-3587
Length: 3 Year(s)  Total Positions: 24 (GY: 8)
Program ID: 120-12-11-803

* Updated information not provided.
Rome
Floyd Medical Center Program
Floyd Medical Center
Program Director:
Mary C. Smith, MD
Dept of Family Practice
Floyd Medical Center
2 Professional Ct
Rome, GA 30165-2632
706-286-5644
Length: 3 Year(s) Total Positions: 24 (GY: 8)
Program ID: 120-12-31-094

Savannah
Memorial Medical Center Program
Memorial Medical Center
Program Director:
Keith D. Ellis, MD
Memorial Medical Center
PO Box 22089
Savannah, GA 31403-3089
912-356-6588
Length: 3 Year(s) Total Positions: 18 (GY: 6)
Program ID: 120-12-11-095

Hawaii
Honolulu
University of Hawaii Program*
University of Hawaii John A. Burns School of Medicine
Wahaha General Hospital
Program Director:
Curtis Takemoto Gendore, MD
Univ of Hawaii
Wahaha General Hospital
128 Lehua St Box 590
Wahaha, HI 96816
908-621-8411
Length: 3 Year(s) Total Positions: 21 (GY: 8)
Program ID: 120-14-21-082

Tripler AMC
Tripler Army Medical Center Program
Tripler Army Medical Center
Program Director:
David D. Ellis, DO
Dept of Family Practice
HHNM-29H
Tripler Army Med Ctr
Tripler AMC, HI 96859-5000
808-433-3313
Length: 3 Year(s) Total Positions: 21 (GY: 8)
Program ID: 120-14-21-082

Idaho
Boise
Family Practice Residency of Idaho Program
Family Practice Residency of Idaho
St Alphonsus Regional Medical Center
St Luke's Regional Medical Center
Program Director:
James R. Blockman, MD
Family Practice Medical Center
777 N Raymond
Boise, ID 60704
208 222-4050
Length: 3 Year(s) Total Positions: 27 (GY: 10)
Program ID: 120-12-11-097

Pocatello
Idaho State University Program
Idaho State University
Barnard Regional Medical Center
Pocatello Regional Medical Center
Program Director:
Joan B. Martin, MD
Boise State University
Campus Box ES131
Pocatello, ID 83209-8357
908-627-4741
Length: 3 Year(s) Total Positions: 12 (GY: 4)
Program ID: 120-12-21-021

Illinois
Berwyn
MacNeal Memorial Hospital Program
MacNeal Memorial Hospital
Program Director:
Penny Todoros, MD
MacNeal Hospital
Family Practice Residency Program
332 S Euclid Ave
Berwyn, IL 60402
708-795-3425
Length: 3 Year(s) Total Positions: 34 (GY: 10)
Program ID: 120-16-11-088

Chicago
Cook County Hospital Program
Cook County Hospital
Program Director:
Janice Benson, MD
Dept of Family Practice
Cook County Hospital
621 S Winchester 2nd Fl
Chicago, IL 60612
312-633-9557
Length: 3 Year(s) Total Positions: 43 (GY: 14)
Program ID: 120-12-11-100

Jackson Park Hospital Program
Jackson Park Hospital
Program Director:
Lakeishi P. Dodda, MD
Jackson Park Hospital Family Practice Center
7501 Stony Island Ave
Chicago, IL 60649
312-947-7310
Length: 3 Year(s) Total Positions: 12 (GY: 4)
Program ID: 120-16-11-363

Northwestern University/St Joseph Hospital and Health Care Center Program
St Joseph Health Care Centers and Hospital
Program Director:
Roger A. Nosal, MD PhD
Saint Joseph Hospital and Health Care Center
2900 N Lake Shore Dr Rm 521
Chicago, IL 60657-8574
312-665-3300
Length: 3 Year(s) Total Positions: 18 (GY: 6)
Program ID: 120-16-11-133

Resurrection Medical Center Program
Resurrection Medical Center
Program Director:
Robert L. Buckley, MD
Family Practice Center
7447 W Talcott
Chicago, IL 60631
312-720-5155
Length: 3 Year(s) Total Positions: 18 (GY: 6)
Program ID: 120-16-11-02

Rush Medical College/Illinois Masonic Medical Center Program
Rush-Presbyterian St Luke's Medical Center
Illinois Masonic Medical Center
Program Director:
Thomas Dent, MD
Rush-Presbyterian St Luke's Medical Center
1603 W Congress Pkwy
Chicago, IL 60612
312-296-6200
Length: 3 Year(s) Total Positions: 20 (GY: 7)
Program ID: 120-16-11-043

St Elizabeth's Hospital Program
St Elizabeth's Hospital
Program Director:
Martin Gonzalez, MD
Family Practice Center
1431 N Western Ave
Ste 406
Chicago, IL 60622
312-276-2000
Length: 3 Year(s) Total Positions: 17 (GY: 5)
Program ID: 120-16-11-248

St Mary of Nazareth Hospital Center Program
St Mary of Nazareth Hospital Center
Program Director:
Adonis M. Liano, MD
St Mary of Nazareth Hospital Center
Family Practice Residency Program
2223 W Division St
Chicago, IL 60622
312-776-2658
Length: 3 Year(s) Total Positions: 21 (GY: 9)
Program ID: 120-16-11-104

University of Illinois College of Medicine at Chicago Program
University of Illinois College of Medicine at Chicago
University of Illinois Hospital and Clinics
Program Director:
Elizabeth A. Burren, MD
University of Illinois at Chicago College of Medicine
Family Practice Dept MC 663
1919 W Taylor St
Chicago, IL 60612
312-413-0941
Length: 3 Year(s) Total Positions: 8 (GY: 4)
Program ID: 120-16-21-088

University of Illinois College of Medicine at Chicago/Christ Hospital Program
University of Illinois College of Medicine at Chicago
CHRIST Hospital and Medical Center
Rush-Presbyterian St Luke's Medical Center
Program Director:
Kevin M. Scherer, MD
UCHC/CHRIST Hospital Family Practice
Dept of Family Practice
4400 W 85th St
Oak Lawn, IL 60453
708-346-5334
Length: 3 Year(s) Total Positions: 27 (GY: 9)
Program ID: 120-16-21-042

* Updated information not provided.
University of Illinois College of Medicine at Chicago/Ravenswood Hospital Program
University of Illinois College of Medicine at Chicago
Ravenswood Hospital Medical Center Program
Program Director: Margaret Wiedmann, MD
University of IL Family Practice Residency at
Ravenswood Hospital Medical Center
4550 N Winchester
Chicago, IL 60640-3206
312 937-6420
Length: 3 Year(s) Total Positions: 14 (GY: 5)
Program ID: 120-16-21-487

Hinsdale
Hinsdale Hospital Program
Hinsdale Hospital Program
Program Director: Gerald A. Lothboune, MD
Hinsdale Hospital
135 N Oak St
Hinsdale, IL 60521
708 856-8859
Length: 3 Year(s) Total Positions: 27 (GY: 9)
Program ID: 120-16-21-109

LaGrange
LaGrange Memorial Health System Program
LaGrange Memorial Health System Program
Program Director: William J. Nelson, MD
LaGrange Memorial Hospital
Family Practice Center
1223 Memorial Dr Ste 214
LaGrange, IL 60525
708 933-7478
Length: 3 Year(s) Total Positions: 23 (GY: 5)
Program ID: 120-16-11-110

North Chicago
Fitch University of Health Sciences/Chicago Medical School Program
Fitch University of Health Sciences/Chicago Medical School
Swedish Covenant Hospital Program
Program Director: William J. Nelson, MD
Fitch University of Health Sciences/Chicago Medical School
1223 Memorial Dr Ste 214
LaGrange, IL 60525
708 933-7478
Length: 3 Year(s) Total Positions: 13 (GY: 5)
Program ID: 120-16-11-106

Oak Park
West Suburban Hospital Medical Center Program
West Suburban Hospital Medical Center Program
Program Director: Kenneth M. Blair, MD
West Suburban Family Practice Residency Program
1000 W Lake St
Oak Park, IL 60301
708 385-6669
Length: 3 Year(s) Total Positions: 28 (GY: 10)
Program ID: 120-16-11-112

Park Ridge
Lutheran General Hospital Program
Lutheran General Hospital Program
Program Director: Ronald A. Ferguson, MD
Lutheran General Hospital
1125 Desoto St
Park Ridge, IL 60068
708 696-7660
Length: 3 Year(s) Total Positions: 14 (GY: 8)
Subspecialties: PGY
Program ID: 120-16-11-107

Peoria
University of Illinois College of Medicine at Peoria Program
University of Illinois College of Medicine at Peoria
Methodist Medical Center of Illinois Program
Program Director: Thomas B. Coleman, MD
Methodist Medical Center of Illinois
130 NE Glen Oak Ave Ste 100
Peoria, IL 61603-4386
309 672-5742
Length: 3 Year(s) Total Positions: 30 (GY: 9)
Program ID: 120-16-11-113

Rockford
University of Illinois College of Medicine at Rockford Program
University of Illinois College of Medicine at Rockford
St Anthony Medical Center
American Hospital
Program Director: Peter J. MacDonald, MD
Family Practice Center
1691 Parkview Ave
Rockford, IL 61107-1897
815 395-1142
Length: 3 Year(s) Total Positions: 27 (GY: 9)
Program ID: 120-16-21-110

Scott AFB
USAF Medical Center (Scott) Program
USAF Medical Center (Scott) Program
Program Director: Jon R. Pearson, MD
Scott AFB
12252-532
618 395-4827
Length: 3 Year(s) Total Positions: 21 (GY: 7)
Program ID: 120-16-21-004

Springfield
Southern Illinois University (Belleville) Program
Southern Illinois University School of Medicine
Belleville Memorial Hospital Program
Program Director: Gerald D. Schromski, MD
Belleville Family Practice Center
100 W Lincoln St
Belleville, IL 62220
618 233-5400
Length: 3 Year(s) Total Positions: 15 (GY: 6)
Program ID: 120-16-21-247

Southern Illinois University
Southern Illinois University (Carbondale) Program
Program Director: Penelope K. Hepp, MD
Memorial Hospital of Carbondale
404 W Main St
Carbondale, IL 62901
618 562-6611
Length: 3 Year(s) Total Positions: 14 (GY: 4)
Program ID: 120-16-11-109

Southern Illinois University (Decatur) Program
Southern Illinois University School of Medicine
Decatur Memorial Hospital
St Mary's Hospital Program
Program Director: John G. Bradley, MD
SIU/Decatur Family Practice Residency Program
1314 N Main St
Ste 201
Decatur, IL 62526
217 222-8189
Length: 3 Year(s) Total Positions: 18 (GY: 6)
Program ID: 120-16-21-104

Southern Illinois University (Quincy) Program
Southern Illinois University School of Medicine
Blessing Hospital Program
Program Director: Jerry Kruse, MD
Quincy Family Practice Center
223 E Main
Quincy, IL 62201
217 223-8484
Length: 3 Year(s) Total Positions: 15 (GY: 5)
Program ID: 120-16-21-306

Southern Illinois University Program
Southern Illinois University School of Medicine
Bendixon Medical Center
St John's Hospital Program
Program Director: 3 W Edward Gallin, MD
Southern Illinois University School of Medicine
PO Box 1026
Springfield, IL 62794-9290
217 782-0317
Length: 3 Year(s) Total Positions: 22 (GY: 8)
Program ID: 120-16-21-117

Urbana
Carle Foundation Hospital Program
Carle Foundation Hospital
Program Director: David L. Whetstone, MD
Carle Foundation Hospital
611 W Park
Urbana, IL 61801
217 383-3302
Length: 3 Year(s) Total Positions: 12 (GY: 4)
Program ID: 120-16-21-492

* Updated information not provided.
Indiana
Beech Grove
St Francis Grove and Health Centers Program
St Francis Hospital and Health Centers
Program Director:
Richard D Feldman, MD
Family Practice Center
1500 Albright St Ste 907
Beech Grove, IN 46107
317 783-8923
Length: 3 Year(s) Total Positions: 18 (GYI: 6) Program ID: 129-17-11-119

Evansville
Deaconess Hospital Program
Deaconess Hospital
Program Director:
Wallace M Adye, MD
Deaconess Family Practice Center
750 W Colmbia St Ste 10
Evansville, IN 47715
812 436-3363
Length: 3 Year(s) Total Positions: 18 (GYI: 6) Program ID: 120-17-21-120

St Mary'S Medical Center Program
St Mary'S Medical Center
Program Director:
Raymond W Nicholson Jr, MD
St Mary'S Medical Center
3700 Washington Ave
Evansville, IN 47720
812 479-4173
Length: 3 Year(s) Total Positions: 18 (GYI: 6) Program ID: 120-17-23-120

Fort Wayne
Fort Wayne Medical Education Program
Fort Wayne Medical Education Program
Loebner Hospital of Indiana
Parkview Memorial Hospital
St Joseph'S Medical Center
Program Director:
Richard B Juergens, MD
Parklake Medical Building
2448 Lake Ave
Fort Wayne, IN 46805
219 422-6573
Length: 3 Year(s) Total Positions: 20 (GYI: 9) Program ID: 120-17-21-121

Gary
Indiana University Medical Center at Gary Program
Northwest Center for Medical Education
St Margaret Hospital and Health Center
The Methodist Hospitals
Program Director:
Dwight E Ross, MD
Indiana University School of Medicine
Northwest Ctr for Med Education
3400 Broadway
Gary, IN 46408-1197
219 980-9641
Length: 3 Year(s) Total Positions: 12 (GYI: 4) Program ID: 120-17-21-493

Indianapolis
Community Hospitals of Indianapolis Program
Community Hospitals of Indianapolis
Program Director:
John H Black, MD
Family Practice Residency Program
5002 E 16th St Ste A10
Indianapolis, IN 46218
317 265-5091
Length: 3 Year(s) Total Positions: 20 (GYI: 7) Program ID: 120-17-11-1123

Indiana University Medical Center Program
Indiana University Medical Center
William N Winthrop Memorial Hospital
Program Director:
Deborah J Alon, MD
Univ Hosp Ltr 2007
550 N University Blvd
Indianapolis, IN 46202-5353
317 274-1399
Length: 3 Year(s) Total Positions: 18 (GYI: 6) Program ID: 120-17-21-219

Methodist Hospital of Indiana Program
Methodist Hospital of Indiana
Program Director:
Alvin J Hailey, MD
Methodist Hospital
1633 N Capital Ave Ste 250
Indianapolis, IN 46202-1261
317 298-8188
Length: 3 Year(s) Total Positions: 24 (GYI: 8) Program ID: 120-17-11-126

St Vincent Hospital and Health Care Center Program*
St Vincent Hospital and Health Care Center
Program Director:
George E Hunter, MD
St Vincent Family Medicine
8220 Naah Rd Ste 300
Indianapolis, IN 46250
317 328-7600
Length: 3 Year(s) Total Positions: 24 (GYI: 8) Program ID: 120-17-11-127

Muncie
Ball Memorial Hospital Program
Ball Memorial Hospital
Program Director:
Robert Reilly, MD
Ball Memorial Hospital Dept of Family Practice
2300 W Gilbert St
Muncie, IN 47303
317 747-3376
Length: 3 Year(s) Total Positions: 20 (GYI: 8) Program ID: 120-17-11-128

South Bend
Memorial Hospital of South Bend Program
Memorial Hospital of South Bend
Program Director:
Robert J Riley, MD
Memorial Hospital of South Bend
714 N Michigan St
South Bend, IN 46615
219 284-7913
Length: 3 Year(s) Total Positions: 24 (GYI: 8) Program ID: 120-17-11-129

St Joseph'S Medical Center of South Bend Program
St Joseph'S Medical Center of South Bend
Program Director:
Al Trenchaner, MD
St Joseph'S Med Ctr of South Bend
811 E Lake Ave
South Bend, IN 46624
219 237-7637
Length: 3 Year(s) Total Positions: 23 (GYI: 6) Program ID: 120-17-11-130

Terre Haute
Union Hospital Program
Union Hospital
Program Director:
James R Burchler, MD
Union Hospital Family Practice Residency
1515 N 6 1/2 St
Terre Haute, IN 47807
812 298-7632
Length: 3 Year(s) Total Positions: 15 (GYI: 5) Program ID: 120-17-11-131

Iowa
Cedar Rapids
Cedar Rapids Program
St Luke'S Methodist Hospital
Mercy Medical Center
Program Director:
Curtis J Reynolds III, MD
Cedar Rapids Medical Center
1005 A Ave NE
P.O. Box 3026
Cedar Rapids, IA 52406-3026
319 368-7300
Length: 3 Year(s) Total Positions: 21 (GYI: 7) Program ID: 120-18-23-132

Davenport
Genesis Medical Center Program
Genesis Medical Center
Program Director:
Monte L. Schauffe, MD
Mercy/St Luke'S Family Practice
616 W 35th St
Davenport, IA 52806
319 768-3708
Length: 3 Year(s) Total Positions: 18 (GYI: 6) Program ID: 120-18-21-133

Des Moines
Broadlawns Medical Center Program
Broadlawns Medical Center
Program Director:
Larry O Beatty, MD
Broadlawns Medical Center
1801 Hickman Rd
Des Moines, IA 50314
515 282-2555
Length: 3 Year(s) Total Positions: 27 (GYI: 8) Program ID: 120-18-11-134

* Updated information not provided.
Accredited Programs in Family Practice

Iowa Lutheran Hospital Program*  
Iowa Lutheran Hospital  
Program Director: Gerald D. Loos, MD  
Dept of Family Practice 640 E University Iowa City, IA 52240 515-256-1050  
Length: 3 Year(s)  Total Positions: 20  (GYI: 8)  
Program ID: 120-19-11-126

Iowa City  
University of Iowa Hospitals and Clinics Program  
University of Iowa Hospitals and Clinics Mercy Hospital  
Program Director: George B. Bergus, MD  
University of Iowa Hospitals and Clinics Dept of Family Practice Steinler Bldg  
Iowa City, IA 52242-1097  
319-356-6106  
Length: 3 Year(s)  Total Positions: 24  (GYI: 8)  
Subspecialties: FPG  
Program ID: 120-19-11-138

Mason City  
North Iowa Mercy Health Center Program  
North Iowa Mercy Health Center  
Program Director: David H. Hansen, MD  
North Iowa Mercy Health Center Family Practice 101 S Taylor St  
Mason City, IA 50401-2990  
515-434-7779  
Length: 3 Year(s)  Total Positions: 15  (GYI: 5)  
Program ID: 120-19-21-373

Sioux City  
Siouxland Medical Education Foundation Program  
St Luke's Regional Medical Center Marian Health Center  
Program Director: Michael J. Long, MD  
Siouxland Medical Education Foundation 2417 Pierce St  
Sioux City, IA 51104  
712-252-3984  
Length: 3 Year(s)  Total Positions: 18  (GYI: 6)  
Program ID: 120-19-21-137

Waterloo  
Northeast Iowa Medical Education Foundation Program  
Covington Medical Center-West Ninth Allen Memorial Hospital Covington Medical Center  
Program Director: John B. Sutherland, MD  
Northeast Iowa Medical Education Foundation Inc 441 E San Marciano Dr  
Waterloo, IA 50702-5097  
319-294-4419  
Length: 3 Year(s)  Total Positions: 18  (GYI: 6)  
Program ID: 120-19-21-138

Kansas

Kansas City  
University of Kansas Medical Center (Hays) Program*  
University of Kansas School of Medicine University of Kansas Medical Center  
Program Director: Cynda A. Johnson, MD  
Univ of Kansas Med Ctr Dept of Family Practice 2901 Rainbow Blvd  
Kansas City, KS 66160  
913-586-1902  
Length: 3 Year(s)  
Program ID: 120-19-31-564

University of Kansas Medical Center (Junction City) Program*  
University of Kansas School of Medicine University of Kansas Medical Center  
Program Director: Cynda A. Johnson, MD  
Univ of Kansas Med Ctr Dept of Family Practice 2901 Rainbow Blvd  
Kansas City, KS 66160  
913-586-1902  
Length: 3 Year(s)  
Program ID: 120-19-21-658

University of Kansas Medical Center Program  
University of Kansas School of Medicine University of Kansas Medical Center  
Program Director: Cynda A. Johnson, MD  
Univ of Kansas Medical Center Dept of Family Medicine 39th & Rainbow Blvd  
Kansas City, KS 66160-7370  
913-586-1902  
Length: 3 Year(s)  Total Positions: 42  (GYI: 17)  
Program ID: 120-19-11-139

Salina  
University of Kansas (Wichita)/Salina Program  
Salina Health Education Foundation Asbury Salina Regional Medical Center St. John's Regional Health Center  
Program Director: Rick D. Sollerman, MD  
Salina Regional Health Center 1000 E Claflin Rd  
Salina, KS 67402-1757  
913-325-2751  
Length: 3 Year(s)  Total Positions: 12  (GYI: 4)  
Program ID: 120-19-21-806

Toppeka  
Kansas Medical Education Foundation Program  
Kansas Medical Education Foundation St. Francis Hospital and Medical Center Stormont-Vail Regional Medical Center  
Program Director: Jason C. Huggerty, III, MD PhD  
Salina Health Education Foundation  
Kansas Medical Education Foundation  
Program ID: 120-19-21-334

Wichita  
University of Kansas (Wichita) Program  
University of Kansas School of Medicine (Wichita)  
St. Joseph Medical Center  
Program Director: Jerome G. Streit, MD  
Family Practice Center  
St. Joseph Medical Center  
Wichita, KS 67218-2900  
316-685-6121  
Length: 3 Year(s)  Total Positions: 27  (GYI: 9)  
Program ID: 120-19-11-141

University of Kansas (Wichita)/St Francis Program  
University of Kansas School of Medicine (Wichita)  
St Francis Regional Medical Center  
Program Director: Richard H. Leu, MD  
Family Practice Center  
St. Francis Regional Medical Center  
825 N Emporia  
Wichita, KS 67214  
316-260-5086  
Length: 3 Year(s)  Total Positions: 27  (GYI: 9)  
Program ID: 120-19-11-140

University of Kansas (Wichita)/Wesley Medical Center Program  
University of Kansas School of Medicine (Wichita)  
Wesley Medical Center  
Program Director: Carol A. Johnson, MD  
Wichita Family Practice Center  
Wesley Medical Center  
Wichita, KS 67208-3104  
316-688-3976  
Length: 3 Year(s)  Total Positions: 22  (GYI: 5)  
Program ID: 120-19-11-142

Kentucky

Edgewood  
St Elizabeth Medical Center Program  
St Elizabeth Medical Center  
Program Director: Daniel L. French, MD  
St Elizabeth Family Practice Center 900 Medical Village Dr  
Edgewood, KY 41017  
606-344-3841  
Length: 3 Year(s)  Total Positions: 24  (GYI: 8)  
Program ID: 120-20-11-143

Lexington  
University of Kentucky Medical Center (Hazard) Program  
University of Kentucky College of Medicine ARH Regional Medical Center  
University Hospital- Albert B Chandler Medical Center  
Program Director: Joseph A. Ferrone, MD  
University of Kentucky Center for Rural Health 100 Airport Gardens Rd  
Lexington, KY 40509-9600  
606-438-3527  
Length: 3 Year(s)  Total Positions: 12  (GYI: 4)  
Program ID: 120-20-21-512

* Updated information not provided.
Lafayette
Louisiana State University (Lafayette) Program
University Medical Center (Lafayette)
Program Director: Albert C. Roses, MD
University Medical Center
2890 W Congress St
Lafayette, LA 70506-4018
318 261-6637
Length: 3 Year(s) Total Positions: 24 (GY: 8)
Program ID: 120-20-21-144

Monroe
Louisiana State University (Shreveport)/Monroe Program
A E Conway Medical Center
Program Director: Donald N. Givler Jr, MD
A E Conway Medical Center
PO Box 1851
Monroe, LA 71201-1851
318 389-7560
Length: 3 Year(s) Total Positions: 24 (GY: 5)
Program ID: 120-21-21-440

New Orleans
Alton Ochsner Medical Foundation Program
Alton Ochsner Medical Foundation
Leonard J. Chabert Medical Center
Program Director: Daniel F Butler, MD
Alton Ochsner Medical Foundation
Dept of Graduate Med Education
1516 Jefferson Hwy
New Orleans, LA 70121
504 885-0881
Length: 3 Year(s) Total Positions: 12 (GY: 4)
Program ID: 120-21-21-505

Bangor
Eastern Maine Medical Center Program
Eastern Maine Medical Center
Program Director: James A Ganeck, MD
Eastern Maine Medical Center
417 State St Ste 100
Bangor, ME 04401-0657
207 940-7759
Length: 3 Year(s) Total Positions: 25 (GY: 9)
Program ID: 120-22-12-162

Leominster
Central Maine Medical Center Program
Central Maine Medical Center
Program Director: Dana W Little, MD
Central Maine Medical Center
Family Practice Residency Program
76 High St
Leominster, MA 01456-2420
207 975-2803
Length: 3 Year(s) Total Positions: 14 (GY: 5)
Program ID: 120-22-11-167

Portland
Maine Medical Center/Mercy Hospital Program
Maine Medical Center
Mercy Hospital
Program Director: Robert E McArthur, MPhI
Maine Medical Center
Dept of Family Practice
22 Bramhall St
Portland, ME 04102
207 871-2975
Length: 3 Year(s) Total Positions: 18 (GY: 5)
Program ID: 120-22-13-154

Maryland
Andrews AFB
Malcolm Grow USAF Medical Center Program
89th Medical Group
Program Director: David R Richmond, MD
Bretker Kreekel, MD
89th MDU
1075 W Perimeter Rd
Ste A-01
Andrews AFB, MD 20331-5400
301 998-3056
Length: 3 Year(s) Total Positions: 20 (GY: 0)
Program ID: 120-22-21-002

Baltimore
Franklin Square Hospital Center Program
Franklin Square Hospital Center
Program Director: William D Hakkarainen, MD
Franklin Sq Hosp
Dept of Family Practice
9000 Franklin Sq Dr
Baltimore, MD 21216
410 658-7084
Length: 3 Year(s) Total Positions: 25 (GY: 8)
Program ID: 120-22-13-155
Accredited Programs in Family Practice

University of Maryland Program
University of Maryland Medical System
Union Memorial Hospital
Program Director:
Ravindra Sameer, MD
Family Medicine Residency Program
University Family Practice
20 S Paca St
Baltimore, MD 21201
410 328-5700
Length: 3 Year(s) Total Positions: 70 (FYI: 13)
Program ID: 120-23-21-156

Cheverly
Prince George's Hospital Center Program*
Prince George's Hospital Center
Program Director:
A. Clarke Helmes, MD
Prince George's Hosp Ctr
Family Medicine
Cheverly, MD 20785
301 898-3000
Length: 3 Year(s) Total Positions: 12 (FYI: 4)
Program ID: 120-23-21-157

Massachusetts

Beverly
Beverly Hospital Program*
Beverly Hospital
Program Director:
William Reinbold, MD
The Family Practice Residency Program
75 Lindfall St
Danvers, MA 01923
508 725-3300
Length: 3 Year(s) Total Positions: 9 (FYI: 4)
Program ID: 120-24-21-581

Fitchburg
University of Massachusetts (Fitchburg) Program
Burlington Hospital
Program Director:
Peter McCauley, MD
Dept of Family Practice
47 Ashby State Rd
Fitchburg, MA 01420
508 943-3941
Length: 3 Year(s) Total Positions: 12 (FYI: 4)
Program ID: 120-24-21-1159

Lawrence
Greater Lawrence Family Health Center Program
Greater Lawrence Family Health Center Inc
Lawrence General Hospital
Program Director:
Scott E Early, MD
Lawrence Family Practice Residency
158 Park St
Lawrence, MA 01841
508 686-4660
Length: 3 Year(s) Total Positions: 16 (FYI: 8)
Program ID: 120-24-21-528

Malden
Malden Hospital Program
Malden Hospital
Program Director:
Judith D. Arnold, MD
Peter F. Nefkens, MD
Malden Hospital Family Practice Residency
100 Hospital Rd
Malden, MA 02148-3551
978 630-3334
Length: 3 Year(s) Total Positions: 12 (FYI: 4)
Program ID: 120-24-21-506

Worcester
University of Massachusetts Medical Center Program*
University of Massachusetts Medical Center
Medical Center of Central Massachusetts
St Vincent Hospital
Program Director:
James S. Pease, MD MPH
Urology Medical Center
Benefit Blvd 2nd Fl
56 Lake Ave
Worcester, MA 01650
508 365-3002
Length: 3 Year(s) Total Positions: 9 (FYI: 13)
Program ID: 120-24-21-160

Michigan
Ann Arbor
University of Michigan Program
University of Michigan Hospitals
Chapel Community Hospital
Program Director:
John M O'Brien, MD
University of Michigan Hospitals
Dept of Family Practice
1010 Fuller Rd
Ann Arbor, MI 48109-9708
313 475-4452
Length: 3 Year(s) Total Positions: 31 (FYI: 8)
Program ID: 120-25-21-125

Dearborn
Oakwood Hospital Program
Oakwood Hospital
Program Director:
John M. Ballew, MD
Oakwood Hospital
1101 Oakwood Blvd
PO Box 2556
Dearborn, MI 48123-2556
313 903-7795
Length: 3 Year(s) Total Positions: 29 (FYI: 8)
Program ID: 120-24-21-161

Detroit
Henry Ford Hospital Program
Henry Ford Hospital
Cottage Hospital of Grosse Pointe
Program Director:
Christian Jepkesh, MD
Henry Ford Hospital
Family Practice Residency Program
One Ford Ft Rd
Detroit, MI 48202
313 994-4573
Length: 3 Year(s) Total Positions: 56 (FYI: 12)
Program ID: 120-24-21-484

Sinita Hospital Program*
Sinaia Hospital
Program Director:
Peter Scaccca, MD
Sinaia Hosp of Detroit
675 W Outer Dr
Detroit, MI 48226
313 489-5050
Length: 3 Year(s) Total Positions: 12 (FYI: 6)
Program ID: 120-25-21-161

St John Hospital and Medical Center Program
St John Hospital and Medical Center
Program Director:
Kenneth W. Botin, MD
St John Hospital and Medical Center
24311 Little Mack Ave
St Clair Shores, MI 48080
586 777-2004
Length: 3 Year(s) Total Positions: 19 (FYI: 6)
Program ID: 120-25-21-161

Wayne State University/Detroit Medical Center Program
Wayne State University School of Medicine
Grace Hospital
Harbor Valley Hospital
Program Director:
Bruce R. Dushansky, MD
505 S Woodward Ave
Royal Oak, MI 48073
810 562-9155
Length: 3 Year(s) Total Positions: 28 (FYI: 8)
Program ID: 120-25-21-164

Flint
Genesys Regional Medical Center-St Joseph Campus Program
Genesys Regional Medical Center-St Joseph Campus Program
Program Director:
William S. Stetson, MD
Genesys Regional Medical Center-St Joseph Campus
302 Kensington Ave
Flint, MI 48506-2000
810 762-8729
Length: 3 Year(s) Total Positions: 39 (FYI: 13)
Program ID: 120-25-21-166

Grand Rapids
Grand Rapids Program
St Mary's Health Services
Butterworth Hospital
Program Director:
Susan L. Reddy, MD
Grand Rapids Family Practice Program
200 Jefferson SE
Grand Rapids, MI 49503
616 774-7141
Length: 3 Year(s) Total Positions: 39 (FYI: 10)
Program ID: 120-25-21-216

Grosse Pointe
Bon Secours Hospital Program
Bon Secours Hospital
Program Director:
Pete Boden, DO
Bon Secours Hosp
465 Cadieux Rd
Grosse Pointe, MI 48230
313 945-1490
Length: 3 Year(s) Total Positions: 18 (FYI: 6)
Program ID: 120-25-21-168

* Updated information not provided.
Kalamazoo
Kalamazoo Center for Medical Studies/Michigan State University Program
Kalamazoo Center for Medical Studies
Kalamazoo Medical Center
Bronson Methodist Hospital
Program Director: Robert W. Reinhardt, MD
Kalamazoo Medical Center
1000 Oaklawn Dr
Kalamazoo, MI 49008-3077
616 336-5650
Length: 3 Year(s) Total Positions: 18 (GY: 6)
Program ID: 120-24-21-169

Pontiac
North Oakland Medical Center Program
North Oakland Medical Centers
Program Director: Anthony J. Vetrano, Jr., MD
North Oakland Medical Centers
541 W Huron
Pontiac, MI 48341
810 287-0700
Length: 3 Year(s) Total Positions: 18 (GY: 6)
Program ID: 120-24-12-172

Royal Oak
William Beaumont Hospital Program
William Beaumont Hospital
Program Director: Paul W. Misch, MD
William Beaumont Hospital
Dept of Family Practice
44190 Dequindre Rd
Troy, MI 48088
810 282-5535
Length: 3 Year(s) Total Positions: 15 (GY: 5)
Program ID: 120-24-21-374

Saginaw
Saginaw Cooperative Hospitals Program
Saginaw Cooperative Hospitals Inc
Saginaw General Hospital
St. Luke's Hospital
St. Mary's Medical Center
Program Director: Larry S. Cazan, MD
Family Medicine
1000 Houghton
Saginaw, MI 48638
810 773-5000
Length: 3 Year(s) Total Positions: 24 (GY: 8)
Program ID: 120-24-21-174

Southfield
Providence Hospital Program
Providence Hospital
Program Director: Gary G. Olds, MD
Providence Family Practice 6th FL PMB
Saginaw, MI 48638
810 282-5535
Length: 3 Year(s) Total Positions: 18 (GY: 6)
Program ID: 120-24-21-171

Minneapolis
Health One Corporation Program
Health One Corporation
United Hospital
Children's Health Care
St. Paul
Program Director: Kathleen M. Mccarthy, MD
United Family Health Center
546 W Seventh St, #3
St. Paul, MN 55102
612 222-9199
Length: 3 Year(s) Total Positions: 18 (GY: 6)
Program ID: 120-24-21-620

Hennepin County Medical Center Program
Hennepin County Medical Center
Program Director: Patricia Col, MD
Family Medical Center
5 W Lake St
Minneapolis, MN 55406
612 517-4977
Length: 3 Year(s) Total Positions: 30 (GY: 12)
Program ID: 120-24-21-171

University of Minnesota Program
University of Minnesota Medical School
Fairview Ridges Medical Center
HealthEast St. John's Northeast Hospital
HealthEast St. Joseph's Hospital
Methodist Hospital
North Memorial Medical Center
Program Director: Joseph O. Coen, MD
Univ of Minnesota
Dept: Alita Bieh
925 Washington Ave SE Box 25
Minneapolis, MN 55414-3084
612 308-8823
Length: 3 Year(s) Total Positions: 146 (GY: 50)
Program ID: 120-24-21-1491

Rochester
Mayo Graduate School of Medicine (Jacksonville) Program
Mayo Graduate School of Medicine
Mayo Clinic (Jacksonville)
Baptist Medical Center (UFHSC/J)
St. Luke's Hospital
Program Director: Sandra L. Argentino, MD
4230 Pembrook Rd
St. Paul, MN 55214
651 222-3000
Length: 3 Year(s) Total Positions: 12 (GY: 6)
Program ID: 120-24-21-1646

Mayo Graduate School of Medicine Program
Mayo Graduate School of Medicine
Mayo Clinic (Rochester)
Rochester Methodist Hospital
St. Mary's Hospital of Rochester
Program Director: David C. Agerter, MD
MGSM Application Processing Center
Siebens 8th FL
Mayo Graduate School of Medicine
Rochester, MN 55905
507 284-2108
Length: 3 Year(s) Total Positions: 21 (GY: 8)
Program ID: 120-24-21-179

* Updated information not provided.

Graduate Medical Education Directory
Mississippi

Jackson

University of Mississippi Medical Center Program
University of Mississippi School of Medicine
University Hospital
Program Director: Gregory R. Blake, MD MPH
University Hospital
Dept of Family Medicine
2500 N State St
Jackson, MS 39216-4905
601 844-5426
Length: 3 Year(s) Total Positions: 44 (GY1: 14)
Program ID: 120-27-21-181

Tupelo

North Mississippi Medical Center Program
University of Mississippi School of Medicine
Program Director: Edward Hill, MD
850 S Gloster St
Tupelo, MS 38801
661 841-3891
Length: 3 Year(s) Total Positions: 18 (GY1: 6)
Program ID: 120-27-21-588

Missouri

Columbia

University of Missouri-Columbia Program
University of Missouri-Columbia School of Medicine
University and Children's Hospital
Program Director: Steven C Zweig, MD
Univ of Missouri-Columbia
Dept of Family and Community Med
One Hospital Dr
Columbia, MO 65212
314 882-9999
Length: 3 Year(s) Total Positions: 25 (GY1: 10)
Subspecialties: FPG
Program ID: 120-28-11-182

Kansas City

Baptist Medical Center Program
Baptist Medical Center
Program Director: Lawrence A. Ross, MD
Baptist Medical Center
601 Rockhill Rd
Kansas City, MO 64131
816 214-7600
Length: 3 Year(s) Total Positions: 24 (GY1: 8)
Program ID: 120-28-21-183

Trinity Lutheran Hospital Program
Trinity Lutheran Hospital
Program Director: Scott W Thompson, MD
Trinity Lutheran Hospital
Dept of Family Practice
2990 Baltimore St, Ste 600
Kansas City, MO 64106
816 751-6600
Length: 3 Year(s) Total Positions: 21 (GY1: 7)
Program ID: 120-28-21-461

University of Missouri at Kansas City Program
University of Missouri-Kansas City School of Medicine
Truman Medical Center-Ballwin
Truman Medical Center-West
Program Director: R Stephen Griffith, MD
Truman Medical Center
7900 Lee's Summit Rd
Kansas City, MO 64119-1246
816 573-4410
Length: 3 Year(s) Total Positions: 30 (GY1: 10)
Subspecialties: FPG
Program ID: 120-28-21-422

Springfield

Cox Medical Centers Program
Cox Medical Center North
Cox Medical Center South
Program Director: Larry W Halverson, MD
Cox Medical Centers
1443 N Bobberson
Ste 401
Springfield, MO 65802
417 836-8127
Length: 3 Year(s) Total Positions: 19 (GY1: 6)
Program ID: 120-28-21-476

ST Louis

Desanneus Hospital Program
Desanneus Hospital
Program Director: David Campbell, MD
Desanneus Hospital Dept of Family Medicine
6100 Oakland Ave
St Louis, MO 63130
314 768-2034
Length: 3 Year(s) Total Positions: 18 (GY1: 6)
Program ID: 120-28-21-479

St John's Mercy Medical Center Program
St John's Mercy Medical Center
Program Director: Peter G Danis, MD
St John's Mercy Medical Center
615 S New Baliana Rd
St Louis, MO 63114-6277
314 589-6019
Length: 3 Year(s) Total Positions: 18 (GY1: 6)
Program ID: 120-28-21-186

Nebraska

Lincoln

Lincoln Medical Education Foundation Program
Lincoln Medical Education Foundation
Bryan Memorial Hospital
Lincoln General Hospital
St Elizabeth Community Health Center
Program Director: Donald J Larson, MD
Lincoln Medical Education Foundation
Lincoln Family Practice Program
4601 P St
Lincoln, NE 68504-6882
402 483-4584
Length: 3 Year(s) Total Positions: 19 (GY1: 7)
Program ID: 120-29-31-187

Omaha

Bishop Clarkson Memorial Hospital Program
Bishop Clarkson Memorial Hospital
Program Director: Richard A Raymond, MD
Crawford Family Medicine
4200 Douglas St
Omaha, NE 68131-2705
402 552-2045
Length: 3 Year(s) Total Positions: 14 (GY1: 6)
Program ID: 120-30-21-198

Creighton University Program
creighton/nebraska University Health Foundation
814 St Joseph Hospital at Creighton Univ Medical Center
Program Director: Donald R Frey, MD
Creighton University
Dept of Family Practice
601 N 30th St
Omaha, NE 68111-197
402 289-4111
Length: 3 Year(s) Total Positions: 31 (GY1: 11)
Program ID: 120-30-21-188

University of Nebraska (Grand Island)

Program
University of Nebraska Medical Center
good Samaritan Hospital
St Francis Medical Center
Program Director: James H Stageman, MD
University of Nebraska Medical Center
600 S 44th St
Omaha, NE 68137-3075
402 559-7249
Length: 3 Year(s) Total Positions: 8 (GY1: 0)
Program ID: 120-30-21-617

University of Nebraska Program
University of Nebraska Medical Center
Elkhorn Bergquist Hospital
Methodist Hospital
Program Director: James S Stageman Jr, MD
Dept of Family Practice
Univ of Nebraska Medical Center
600 S 44th St
Omaha, NE 68137-3075
402 559-7249
Length: 3 Year(s) Total Positions: 48 (GY1: 14)
Program ID: 120-30-31-189

* Updated information not provided.
Nevada
Reno
University of Nevada (Las Vegas) Program
University of Nevada School of Medicine
University Medical Center of Southern Nevada
Program Director:
James G. Lenz, MD
University of Nevada School of Medicine
Dept of Family and Community Medicine
6375 W Charleston Blvd A100
Las Vegas, NV 89146
702-733-4174
Length: 3 Year(s)  Total Positions: 12  (GY: 4)  Program ID: 120-33-21-411

University of Nevada (Reno) Program
University of Nevada School of Medicine
Isaiah A. Lengeris Veterans Affairs Medical Center
Washoe Medical Center
Program Director:
Robert B. Bannister, DO
University of Nevada School of Medicine
Dept of Family and Community Medicine
Bingham Rdg 316
Reno, NV 89512-0046
702-733-6180
Length: 3 Year(s)  Total Positions: 12  (GY: 4)  Program ID: 120-33-21-482

New Hampshire
Concord
New Hampshire-Dartmouth Family Practice Education Consortium (Concord) Program
New Hampshire-Dartmouth Family Practice Education Consortium
Concord Hospital
Program Director:
Daniel E. Esham, MD
NH-Dartmouth FP Residency Program Concord
262 Pleasant St
Concord, NH 03301
603-225-2711
Length: 3 Year(s)  Total Positions: 6  (GY: 4)  Program ID: 120-33-21-457

New Hampshire-Dartmouth Family Practice Education Consortium (Lebanon) Program
New Hampshire-Dartmouth Family Practice Education Consortium
Mary Hitchcock Memorial Hospital
Concord Hospital
Program Director:
Peter J. Molberg, MD
Two Buck Rd, Ste #3
Hanover, NH 03755
603-656-2070
Length: 3 Year(s)  Total Positions: 2  (GY: 2)  Program ID: 120-33-21-551

New Jersey
Edison
JFK Medical Center Program
JFK Medical Center
Program Director:
Robin O. Winter, MD
John F Kennedy Medical Center
Family Practice Center
65 James St
Edison, NJ 08801
908-281-7400
Length: 3 Year(s)  Total Positions: 21  (GY: 7)  Program ID: 120-33-11-190

Flemington
Hunterdon Medical Center Program
Hunterdon Medical Center
Program Director:
Hechey S. Bed, MD
Hunterdon Medical Center
2100 Wescott Dr
Flemington, NJ 08822
908-788-6160
Length: 3 Year(s)  Total Positions: 18  (GY: 5)  Program ID: 120-33-11-130

Hoboken
St. Mary Hospital Program
St. Mary Hospital
Program Director:
Juan Perez, MD
St Mary Hospital
308 Willow Ave
Hoboken, NJ 07030
201-792-8187
Length: 3 Year(s)  Total Positions: 24  (GY: 9)  Program ID: 120-33-11-192

Montclair
Mountainside Hospital Program
Mountainside Hospital
Program Director:
Sofia H. Anthony, MD
Mountainside Family Practice Associates
799 Bloomfield Ave
Verona, NJ 07044-1374
201-746-7050
Length: 3 Year(s)  Total Positions: 18  (GY: 6)  Program ID: 120-33-11-189

Mount Holly
Memorial Hospital of Burlington County Program
Memorial Hospital of Burlington County
Program Director:
Mack A. Van Kooi, MD
Memorial Hospital of Burlington County
Family Practice Residency Program
175 Madison Ave
Mount Holly, NJ 08060
609-281-7019
Length: 3 Year(s)  Total Positions: 18  (GY: 6)  Program ID: 120-33-21-444

Phillipsburg
Warren Hospital Program
Warren Hospital
Program Director:
John C. Bregnan, MD
Warren Hospital Family Practice Program
Coventry Center Dr 1
Red School Ln
Phillipsburg, NJ 08865
908-559-6785
Length: 3 Year(s)  Total Positions: 21  (GY: 8)  Program ID: 120-33-11-190

Piscataway
UMDNJ-Robert Wood Johnson Medical School Program
UMDNJ-Robert Wood Johnson Medical School
St Peter's Medical Center
Program Director:
Alfred P. Talia, MD MPH
UMDNJ-Robert Wood Johnson Medical School
Dept of Family Medicine
One Robert Wood Johnson PI MED 278
New Brunswick, NJ 08903-0019
908-235-7664
Length: 3 Year(s)  Total Positions: 23  (GY: 8)  Subspecialties: FP/FP
Program ID: 120-33-21-119

Somerville
Somerset Medical Center Program
Somerset Medical Center
Program Director:
Melodee S. Long, MD
Somerset Medical Center
110 Behall Ave
Somerville, NJ 08876
908-639-2360
Length: 3 Year(s)  Total Positions: 21  (GY: 7)  Program ID: 120-33-11-194

South Orange
Seton Hall University School of Graduate Medical Education Program
Seton Hall University School of Graduate Medical Education
St Joseph's Hospital and Medical Center
Program Director:
Vincent E. Pasquito, MD
St Joseph's Hospital and Medical Center
703 Main St
Paterson, NJ 07503
301-475-5000
Length: 3 Year(s)  Total Positions: 18  (GY: 6)  Program ID: 120-33-21-449

Summit
Overlook Hospital Program
Overlook Hospital
Program Director:
Susan T. Kaye, MD
Overlook Hospital
99 Beavoir Ave
PO Box 220
Summit, NJ 07902-0220
908-522-2507
Length: 3 Year(s)  Total Positions: 18  (GY: 6)  Program ID: 120-33-11-195

* Updated information not provided.
Voorhees
West Jersey Health System Program
West Jersey Hospital-Voorhees
Program Director:
Mary A Willard, MD
West Jersey Health System
Taft-Brown Family Practice Center
One Carrie Blvd
Voorhees, NJ 08043
609 738-7076
Length: 3 Years (GTY: 6)
Program ID: 120-38-11-196

Woodbury
Underwood-Memorial Hospital Program
Underwood-Memorial Hospital
Program Director:
William J King, DO
Family Practice Center
Underwood-Memorial Hospital
609 N Broad St
Woodbury, NJ 08096
609 882-2066
Length: 3 Years (GTY: 12)
Program ID: 120-38-21-445

New Mexico
Albuquerque
University of New Mexico Program
University of New Mexico School of Medicine
University Hospital
Program Director:
Berthold E Umland, MD
Univ of New Mexico Dept of Family Medicine
2400 Tucker NE
Albuquerque, NM 87108
505 277-2165
Length: 3 Year(s) (GTY: 12)
Program ID: 120-38-21-197

New York
Albany
Albany Medical Center Program
Albany Medical Center Hospital
St Peter's Hospital
Program Director:
Neil C Meltzick, DO
Dept of Family Practice
One Clara Barton Dr A-21
Albany, NY 12206-3495
518 445-5641
Length: 3 Years (GTY: 8)
Program ID: 120-38-21-198

Bay Shore
Southside Hospital Program
Southside Hospital
Program Director:
Richard Bonanno, MD
Southside Hospital
301 E Main St
Bay Shore, NY 11706-6468
631 688-2395
Length: 3 Years (GTY: 9)
Program ID: 120-38-21-199

Binghamton
Wilson Memorial Regional Medical Center (United Health Services) Program
Wilson Memorial Regional Medical Center (United Health Sys)
Program Director:
James T Crovsky, MD
Wilson Memorial Regional Medical Center
335-57 Harrison St
Johnson City, NY 13790
607 728-5303
Length: 3 Years (GTY: 8
Program ID: 120-35-11-208

Bronx
Albert Einstein College of Medicine Program
Albert Einstein College of Medicine of Yeshiva University
Montefiore Medical Center-Henry and Lucy Moses Division
North Central Bronx Hospital
Program Director:
Mark Koss, MD
Montefiore Medical Center
685 Morris Ave
Bronx, NY 10467
718 434-1000
Length: 3 Years (GTY: 10)
Program ID: 120-35-21-209

Bronx-Lebanon Hospital Center Program*
Bronx-Lebanon Hospital Center
Program Director:
Mark Vizzi, MD
Bronx-Lebanon Hospital Center
1266 Franklin Ave 2nd Fl
Bronx, NY 10456
718 991-2500
Length: 3 Years (GTY: 10)
Program ID: 120-35-21-455

Brooklyn
Brooklyn Hospital Center Program
Brooklyn Hospital Center
Program Director:
Mark A Beck, MD
Dept of Family Practice
Brooklyn Hospital Center
121 DeKalb Ave
Brooklyn, NY 11201
718 635-9211
Length: 3 Year(s) (GTY: 4)
Program ID: 120-35-21-530

Lutheran Medical Center Program
Lutheran Medical Center
Program Director:
Daniel Morell, MD
Lutheran Medical Center
Medical Education Office
1590 55th St
Brooklyn, NY 11205
718 636-9106
Length: 3 Year(s) (GTY: 7)
Program ID: 120-35-11-207

SUNY Health Science Center at Brooklyn Program
SUNY IBS at Brooklyn College of Medicine
King County Hospital Center
University Hospital SUNY Health Science Center at Brooklyn
Program Director:
Jane S Zelkin, MD
SUNY Health Science Center at Brooklyn
450 Clarkson Ave
Box 67
Brooklyn, NY 11203
718 270-2545
Length: 3 Year(s) (GTY: 4)
Program ID: 120-35-21-209

Wyckoff Heights Medical Center Program
Wyckoff Heights Medical Center
Program Director:
Scott I Ippolito, MD
Wyckoff Heights Medical Center
574 Stockholm St
Brooklyn, NY 11207
718 995-7087
Length: 3 Year(s) (GTY: 12)
Program ID: 120-35-21-507

Buffalo
SUNY at Buffalo Graduate Medical-Dental Education Consortium (Niagara Falls) Program
SUNY at Buffalo Grad Medical-Dental Education Consortium
Niagara Falls Memorial Medical Center
Program Director:
Jame C Andres, MD
Niagara Falls Memorial Medical Center
Family Practice Residency Program
501 Tenth St
Niagara Falls, NY 14001
716 778-4618
Length: 3 Years (GTY: 5)
Program ID: 120-35-12-311

SUNY at Buffalo Graduate Medical-Dental Education Consortium (Olean) Program
SUNY at Buffalo Grad Medical-Dental Education Consortium
Olean General Hospital
Olean General Hospital
Program Director:
Daniel Morell, MD
State Univ of New York at Buffalo
Dept of Family Medicine
462 Grider St
Olean, NY 14760
716 439-2370
Length: 3 Years (GTY: 9)
Program ID: 120-35-21-516

* Updated information not provided.
SUNY at Buffalo Graduate Medical-Dental Education Consortium Program
SUNY at Buffalo Grad Medical-Dental Education Consortium
Buffalo General Hospital
Erie County Medical Center
Millard Fillmore Hospitals
Program Director:
Daniel Morelli, MD
Dept of Family Medicine
Louis Lazar Family Medicine Center
1342 Maple Rd
Williamsville, NY 14221
716 698-3314
Length: 3 Year(s) Total Positions: 40 (GYI: 18)
Program ID: 120-35-21-489

Oceanside
South Nassau Communities Hospital Program
South Nassau Communities Hospital
Program Director:
Scott D Kirsch, MD
South Nassau Communities Hospital
2445 Oceanside Rd
Oceanside, NY 11572
516 763-3009
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 120-35-11-512

Patchogue
Brookhaven Memorial Hospital Medical Center Program*
Brookhaven Memorial Hospital Medical Center
Program Director:
David M Blisko, MD
Brookhaven Memorial Hosp Med Ctr
101 Hospital Rd
Patchogue, NY 11772
516 664-7796
Length: 3 Year(s)
Program ID: 120-35-11-213

Poughkeepsie
St Francis Hospital Program
St Francis Hospital
Vassar Brothers Hospital
Program Director:
Reynold S Golden, MD
Mid-Hudson Family Practice Residency
St Francis Hospital
4 Jefferson Plaza 4th Fl
Poughkeepsie, NY 12601
914 431-8123
Length: 3 Year(s) Total Positions: 15 (GYI: 6)
Program ID: 120-35-21-483

Rochester
University of Rochester/Highland Hospital Program
University of Rochester
Rochester (Finger Lakes) Program
Program Director:
Frederick Ferris Thompson Complex
Program Director:
Elizabeth Naumburg, MD
The Family Medicine Center
885 South Ave
Rochester, NY 14620
716 442-7470
Length: 3 Year(s) Total Positions: 4 (GYI: 2)
Program ID: 120-35-31-530

Schenectady
St Clare’s Hospital of Schenectady Program
St Clare’s Hospital of Schenectady
Program Director:
Gary Dunkerley, MD
St Clare’s Hosp of Schenectady
Family Health Cen
600 McKeel St
Schenectady, NY 12304
518 382-2000
Length: 3 Year(s) Total Positions: 24 (GYI: 9)
Program ID: 120-35-12-215

Stony Brook
SUNY at Stony Brook Program
University Hospital-SUNY at Stony Brook
Program Director:
Rozanne Fahrenwald, MD
SUNY at Stony Brook Health Sciences Center
Dept of Family Medicine
Level 4 Rm 050
Stony Brook, NY 11794-8461
516 444-2300
Length: 3 Year(s) Total Positions: 22 (GYI: 8)
Program ID: 120-35-21-408

Syracuse
SUNY Health Science Center at Syracuse/St Joseph’s Hospital Health Center Program
St Joseph’s Hospital Health Center
Program Director:
James B Tucker, MD
St Joseph’s Hospital Health Center
301 Prospect Ave
Syracuse, NY 13203
315 464-5537
Length: 3 Year(s) Total Positions: 36 (GYI: 13)
Program ID: 120-35-21-216

Utica
St Elizabeth Hospital Program
St Elizabeth Hospital
Program Director:
William J Piden, MD
St Elizabeth Hospital
2200 Genesee St
Utica, NY 13501
315 798-8330
Length: 3 Year(s) Total Positions: 24 (GYI: 8)
Program ID: 120-35-11-217

* Updated information not provided.
Valhalla
New York Medical College Mid-Hudson Family Health Services Institute (Kingston) Program
New York Medical College
Kingston Hospital
Benedicant Hospital
Program Director: William J. Gesner, MD
Mid-Hudson Rural Family Practice Residency Program
50 Sawmill Rd
Kingston, NY 12401
914 336-6400
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 120-36-21-204

Yonkers
St Joseph’s Medical Center Program*
St Joseph’s Medical Center
Program Director: Joseph L. Hulchob, MD
St Joseph’s Medical Center
127 S Broadway
Yonkers, NY 10701-9580
914 978-7100
Length: 3 Year(s) Total Positions: 24 (GYI: 8)
Program ID: 120-35-11-218

North Carolina
Asheville
Mountain Area Health Education Center Program
Mountain Area Health Education Center
Memorial Mission Hospital
Program Director: Stephen D. Hulburd, MD
MAHEC Family Practice Residency Program
116 W Weaver Blvd
Asheville, NC 28801
704 252-9670
Length: 3 Year(s) Total Positions: 24 (GYI: 8)
Program ID: 120-36-11-219

Chapel Hill
University of North Carolina Hospitals Program
University of North Carolina Hospitals
Wake Medical Center
Program Director: Warren P. Newton, MD
UNC School of Medicine
Dept of Family Medicine CB #7505
Manning Dr
Chapel Hill, NC 27599-7535
919 966-7977
Length: 3 Year(s) Total Positions: 23 (GYI: 8)
Program ID: 120-36-31-220

Charlotte
Carolina's Medical Center Program
Carolina's Medical Center
Program Director: Mary N. Hall, MD
Family Practice Residency Program
Carolina's Medical Center
Box 2859
Charlotte, NC 28223-2861
704 355-3732
Length: 3 Year(s) Total Positions: 21 (GYI: 8)
Program ID: 120-36-11-221

Durham
Duke University Program
Duke University Medical Center
durham Regional Hospital
Program Director: Katrina M Andraides, MD MPH
Duke University Medical Center
Dept of Family Practice
303 Hospital Rd
Durham, NC 27710
919 686-3260
Length: 3 Year(s) Total Positions: 30 (GYI: 10)
Program ID: 120-36-21-222

Fayetteville
Duke University/Fayetteville Area Health Education Center Program
Cape Fear Valley Medical Center
Program Director: Jessie A. Jokun, MD
1001 Owen Dr
Fayetteville, NC 28304-3482
910 484-7210
Length: 3 Year(s) Total Positions: 22 (GYI: 7)
Program ID: 120-36-31-225

Fort Bragg
Womack Army Medical Center Program
Womack Army Medical Center
Program Director: LCU Glenn G Griffiths, MD
Womack Army Medical Center Department of Family Medicine
Family Practice Residency Program
5000 Normandy Dr
Fort Bragg, NC 28302-5000
910 433-5422
Length: 3 Year(s) Total Positions: 36 (GYI: 12)
Program ID: 120-36-21-011

Greensboro
Moses H Cone Memorial Hospital Program
Moses H Cone Memorial Hospital
Program Director: Thomas A. Cople, MD
Moses H Cone Memorial Hospital
Family Practice/Center
1225 N Church St
Greensboro, NC 27401-1007
919 574-8152
Length: 3 Year(s) Total Positions: 25 (GYI: 8)
Program ID: 120-36-11-244

Greenville
East Carolina University (Ahoskie) Program
East Carolina University School of Medicine
Marvin General Hospital
Pitt County Memorial Hospital
Étatnoke Chowan Hospital
Program Director: Dana B King, MD
Dept of Family Med
BCOM School of Med
Family Practice/OE
Greensboro, NC 27858-4354
919 816-5457
Length: 3 Year(s) Total Positions: 8 (GYI: 4)
Program ID: 120-36-31-398

East Carolina University Program
East Carolina University School of Medicine
Pitt County Memorial Hospital
Program Director: D Sean Patton, MD
Dept of Family Medicine
BCOM School of Med
Family Practice Center
Greensboro, NC 27858-4354
919 816-4016
Length: 2 Year(s) Total Positions: 38 (GYI: 14)
Subspecialties: FFP
Program ID: 120-36-13-325

Winston-Salem
Bowman Gray School of Medicine Program
North Carolina Baptist Hospital
Forsyth Memorial Hospital
Program Director: Mark Kondro, MD
Bowman Gray School of Medicine
Medical Center Blvd
Winston-Salem, NC 27107-1084
919 715-2002
Length: 3 Year(s) Total Positions: 24 (GYI: 8)
Program ID: 120-36-31-226

North Dakota
Grand Forks
University of North Dakota (Bismarck) Program
Univ of North Dakota School of Medicine
Market One Inc
St Alexius Medical Center
Program Director: Russell J. Stray, MD
USD Family Practice Center
515 E Broadway
Bismarck, ND 58501
701 328-9930
Length: 3 Year(s) Total Positions: 15 (GYI: 5)
Program ID: 120-37-31-227

University of North Dakota (Fargo) Program
Univ of North Dakota School of Medicine
St Luke’s Hospitals
Fargo Hospital
Program Director: Ronald D. Wismann, MD
Univ of North Dakota Family Health Care Center
600 S Fourth St
Fargo, ND 58103
701 238-7111
Length: 3 Year(s) Total Positions: 12 (GYI: 4)
Program ID: 120-37-31-228

University of North Dakota (Grand Forks) Program*
Univ of North Dakota School of Medicine
United Hospital
Program Director: William S. Mann, MD
Larry O. Halvorson MD
221 S Fourth St
Grand Forks, ND 58201
701 780-3308
Length: 3 Year(s) Total Positions: 15 (GYI: 5)
Program ID: 120-37-31-229

* Updated information not provided.
University of North Dakota (Minot) Program
Univ of North Dakota School of Medicine
St Joseph’s Hospital
Trinity Medical Center
Program Director: C Milton Smith, MD
William Henry MD
University of North Dakota
Minot Center for Family Medicine
123 First St SW
Minot, ND 58701
701-857-5140
Length: 3 Year(s) Total Positions: 10 (GYF: 5)
Program ID: 120-37-31-239

Ohio

Akron
Akron City Hospital (Summa Health System/NEOUCOM Program)
Akron City Hospital (Summa Health System)
Program Director: Jay C Williamson, MD
Family Center of Akron
76 Arch St Ste 002
Akron, OH 44304
330-793-3141
Length: 3 Year(s) Total Positions: 24 (GYF: 8)
Program ID: 120-38-21-231
Akron General Medical Center/NEOUCOM Program
Akron General Medical Center
Program Director: Margaret P Proctor, MD
Akron General Medical Center
400 Wabash Ave
Akron, OH 44307
330-836-6802
Length: 3 Year(s) Total Positions: 15 (GYF: 5)
Program ID: 120-38-31-232

Barberton
Barberton Citizens Hospital Program
Barberton Citizens Hospital
Program Director: Anthony J Costa, MD
Barberton Citizens Hosp
155 Fifth St NE
Barberton OH 44203
216-746-5098
Length: 3 Year(s) Total Positions: 18 (GYF: 6)
Program ID: 120-38-21-437

Canton
Aultman Hospital/NEOUCOM Program
Aultman Hospital
Program Director: Susan Moyer, MD
Family Practice Center of Aultman Hospital
2600 Seventh St SW
Canton, OH 44710
330-436-6280
Length: 3 Year(s) Total Positions: 21 (GYF: 7)
Program ID: 120-38-11-234

Cincinnati
Bethesda Hospital Program
Bethesda Hospital Inc
Program Director: V Franklin Colon, MD
Bethesda Hospital Family Practice
619 Oak St
Cincinnati, OH 45206-1690
513-569-5023
Length: 3 Year(s) Total Positions: 18 (GYF: 6)
Program ID: 120-38-21-474
University of Cincinnati Hospital Group Program
University of Cincinnati Hospital Providence Hospital
Program Director: Jeffery E Hech, MD
Univ of Cincinnati Med Ctr
Dept of Family Medicine
2446 Kipling Ave
Cincinnati, OH 45239
513-853-4350
Length: 3 Year(s) Total Positions: 26 (GYF: 8)
Subspecialties: FPG
Program ID: 120-38-21-235

Cleveland
Case Western Reserve University (MetroHealth Program
MetroHealth Medical Center
Program Director: Ilfeld M Morris, MD
MetroHealth Medical Center
Dept of Family Practice
MetroHealth Medical Center
Cleveland, OH 44109-1989
216-459-5065
Length: 3 Year(s) Total Positions: 19 (GYF: 5)
Program ID: 120-38-11-237
Case Western Reserve University Program*
University Hospitals of Cleveland
Mount Sinai Medical Center of Cleveland
Program Director: Sim S Galazka, MD
Family Practice Ctr of Univ Hosp
1100 Euclid Ave
Cleveland, OH 44106
216-844-3791
Length: 3 Year(s) Total Positions: 20 (GYF: 6)
Program ID: 120-38-11-238
Health Cleveland Program
Health Cleveland Corporation
Health Cleveland (Fairview General Hospital)
Program Director: J Christopher Shank, MD
Hasler Ctr for Family Medicine
18300 Lorain Ave
Cleveland, OH 44111-5438
216-476-7085
Length: 3 Year(s) Total Positions: 18 (GYF: 6)
Program ID: 120-38-11-238

Columbus
Grant Medical Center Program
Grant Medical Center
Program Director: Mark Stock, MD
Grant Medical Center Medical Education Dept
115 S Grant Ave
Columbus, OH 43215
614-461-3200
Length: 3 Year(s) Total Positions: 38 (GYF: 13)
Program ID: 120-38-31-239
Mount Carmel Health Program
Mount Carmel Medical Center
Program Director: William P Paul, MD
Mount Carmel Health
763 W State St
Columbus, OH 43222
614-225-5364
Length: 3 Year(s) Total Positions: 18 (GYF: 6)
Program ID: 120-38-32-240
Ohio State University Program
Ohio State University Medical Center
Park Medical Center
Program Director: R Trent Sickle, MD
Ohio State University
Dept of Family Medicine
456 W Tenth Ave Rm B80028
Columbus, OH 43210-1228
614-293-8002
Length: 3 Year(s) Total Positions: 22 (GYF: 6)
Program ID: 120-38-21-241
Riverside Methodist Hospitals Program
Riverside Methodist Hospitals
Program Director: Edward K Tappe, MD
Riverside Methodist Hospitals
Riverside Family Practice Center
727 Thomas Ln
Columbus, OH 43214
614-566-4398
Length: 3 Year(s) Total Positions: 19 (GYF: 6)
Program ID: 120-38-21-242

Dayton
St Elizabeth Medical Center Program
St Elizabeth Medical Center
Program Director: Michael Olen, MD
St Elizabeth Medical Center
601 Edwin C Moses Blvd
Dayton, OH 45409-1488
513-229-6494
Length: 3 Year(s) Total Positions: 36 (GYF: 12)
Program ID: 120-38-11-245
Wright State University (Miami Valley) Program
Miami Valley Hospital
Program Director: Walter C Ferris, MD
Miami Valley Hosp Family Hth Ctr
101 Wyoming St
Dayton, OH 45409-2703
937-228-2457
Length: 3 Year(s) Total Positions: 15 (GYF: 5)
Program ID: 120-38-31-244

* Updated information not provided.
Accredited Programs in Family Practice

Wright State University Program
Good Samaritan Hospital and Health Center
Program Director: Michael P Bunworth, DO
Family Practice Center
2157 Benson Dr
Dayton, OH 45406
513 274-4141
Length: 3 Year(s) Total Positions: 15 (GYI: 5)
Program ID: 120-38-31-243

Sylvania
Flower Memorial Hospital Program
Flower Hospital
Program Director: Crystal B Goelia, MD
Flower Hospital
Family Physicians Association
5000 Harrow Rd
Sylvania, OH 43560
419 544-3970
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 120-38-11-346

Toledo
Medical College of Ohio at Toledo Program
Medical College of Ohio Hospital
St Vincent Medical Center
Program Director: Larry W Johnson, MD
Dept of Family Medicine
Medical College of Ohio
PO Box 10008
Toledo, OH 43690-0008
419 381-5580
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 120-38-31-247

Mercy Hospital of Toledo Program
Mercy Hospital of Toledo
Program Director: Gerry A Steiner, MD
Mercy Family Practice Center
2127 Jefferson Ave
Toledo, OH 43604
419 253-1400
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 120-38-31-249

Toledo Hospital Program
Toledo Hospital
Program Director: Gary M Fox, MD
The Toledo Hospital Family Practice Residency
2061 W Central Ave
Toledo, OH 43606
419 530-2061
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 120-38-31-250

Youngstown
St Elizabeth Hospital Medical Center/NEOUCOM Program
St Elizabeth Hospital Medical Center
Program Director: Ronald S Scott, MD
Family Health Center
1068 Belmont Ave
Youngstown, OH 44501-1790
216 744-9301
Length: 3 Year(s) Total Positions: 12 (GYI: 4)
Program ID: 120-38-11-251

Western Reserve Care System/NEOUCOM Program
Western Reserve Care System
Northside Medical Center
Southside Medical Center
Program Director: W Clare Reese, MD
Western Reserve Care System
Family Practice Center
500 Gypsy Ln
Youngstown, OH 44401
216 740-3020
Length: 3 Year(s) Total Positions: 12 (GYI: 4)
Program ID: 120-38-11-359

Oklahoma
Enid
University of Oklahoma/Garfield County Medical Society Program
Base Memorial Baptist Hospital
St Mary's Hospital
University Hospital and Clinics
Program Director: J Michael Pootinos, MD
Enid Family Medicine Clinic
620 S Madison St 304
Enid, OK 73701-7266
405 242-1300
Length: 3 Year(s) Total Positions: 12 (GYI: 4)
Program ID: 120-38-11-253

Oklahoma City
St Anthony Hospital Program
St Anthony Hospital
Program Director: Richard L Boothe II, MD
St Anthony Hospital
Family Practice Residency
600 N W Ninth St Ste 1000
Oklahoma City, OK 73102
405 227-7491
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 120-38-31-613

University of Oklahoma Health Sciences Center Program
University of Oklahoma College of Medicine-Oklahoma City
University Hospital and Clinics
Program Director: John P Zubalde, MD
800 NE 15th Rd 503
PO Box 25901
Oklahoma City, OK 73196
405 271-2229
Length: 3 Year(s) Total Positions: 36 (GYI: 12)
Program ID: 120-39-21-254

Tulsa
In His Image at Hillcrest Medical Center Program
In His Image Inc
Hillcrest Medical Center
Program Director: John R Crouch Jr, MD
In His Image Family Practice Residency
7000 S Lewis Ave
Tulsa, OK 74136
918 483-7889
Length: 3 Year(s) Total Positions: 26 (GYI: 10)
Program ID: 120-38-31-419

University of Oklahoma College of Medicine-Tulsa Program
University of Oklahoma College of Medicine-Tulsa
Hillcrest Medical Center
St Francis Hospital
St John Medical Center
Program Director: Michael C Foster, MD
Medicaid Family Practice Residency
Dept of Family Medicine
9920 E 21st St
Tulsa, OK 74129
918 630-6685
Length: 3 Year(s) Total Positions: 36 (GYI: 12)
Program ID: 120-39-21-256

Oregon
Portland
Oregon Health Sciences University (Cascades East) Program
Oregon Health Sciences University Hospital
Merle West Medical Center
St Charles Medical Center
Program Director: James F Palven Jr, MD
Cascades East Family Practice Residency Program
2800 Daggett Ave
Klamath Falls, OR 97601
503 885-0325
Length: 3 Year(s) Total Positions: 12 (GYI: 4)
Program ID: 120-40-21-540

Oregon Health Sciences University Program
Oregon Health Sciences University Hospital
Program Director: Patricia Ed, MD
Oregon Health Sci Univ Dept of Family Med
3181 SW Sam Jackson Park Rd
Mail Code: PF
Portland, OR 97201-3088
503 444-9400
Length: 3 Year(s) Total Positions: 30 (GYI: 10)
Program ID: 120-40-21-371

Pennsylvania
Abington
Abington Memorial Hospital Program
Abington Memorial Hospital
Program Director: Todd Sagis, MD
Abington Memorial Hospital
Family Practice Residency Program
1200 Old York Rd
Abington, PA 19001
215 576-3739
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 120-41-11-258

* Updated information not provided.
Allentown
Temple University (Allentown) Program
Sacred Heart Hospital
Program Director:
Raymond B. Bunch, MD
Sacred Heart Hospital
Fourth & Chew Sts
Allentown, PA 18102-3480
215 776-4380
Length: 3 Year(s) Total Positions: 21 (GYI: 8)
Program ID: 120-41-21-209

Altoona
Altoona Hospital Program
Altoona Hospital
Program Director:
Richard L. Decker, MD
Allegheny Family Physicians of Altoona Hospital
501 Howard Ave Ste F2
Altoona, PA 16601-4882
814 946-4380
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 120-41-11-204

Beaver
The Medical Center (Beaver PA) Program
The Medical Center (Beaver PA)
Program Director:
James P. McKenna, MD
Family Practice Center
918 Third Ave
Beaver Falls, PA 15010
412 843-6000
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 120-41-21-409

Bryn Mawr
Bryn Mawr Hospital Program
Bryn Mawr Hospital
Program Director:
Gerard F. Elzinga, MD
Bryn Mawr Hospital
Family Practice Center
101 S Bryn Mawr Ave Ste 120
Bryn Mawr, PA 19012-3120
215 569-2500
Length: 3 Year(s) Total Positions: 15 (GYI: 6)
Program ID: 120-41-31-204

Danville
Geisinger Medical Center Program
Geisinger Medical Center
Program Director:
Mark Burd, MD
Geisinger Medical Center
N Academy Ave
Danville, PA 17822
717 271-2070
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 120-41-11-204

Erie
Hamon Medical Center Program
Hamon Medical Center
Program Director:
Mark J. Levine, MD
Hamon Family Practice Center
104 E Second St
Erie, PA 16507
814 427-1187
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 120-41-11-204

St Vincent Health Center Program
St Vincent Health Center
Program Director:
Richard L. Cooley, MD
St Vincent Family Practice Residency
2114 Sassafras St Ste 300
Erie, PA 16602
814 452-5100
Length: 3 Year(s) Total Positions: 19 (GYI: 7)
Program ID: 120-41-11-204

Harrisburg
Harrisburg Hospital Program
Harrisburg Hospital
Program Director:
Joshua Bennett, MD
Harrisburg Hospital
Dept of Family Practice
205 S Front St PO Box 8700
Harrisburg, PA 17105-8700
717 233-8660
Length: 3 Year(s) Total Positions: 25 (GYI: 10)
Program ID: 120-41-11-204

Polyclinic Medical Center Program
Polyclinic Medical Center
Program Director:
John H. Surry, MD
Polyclinic Medical Center
2601 N Third St
Harrisburg, PA 17110
717 782-2163
Length: 3 Year(s) Total Positions: 17 (GYI: 6)
Program ID: 120-41-11-204

Hershey
Pennsylvania State University/Good Samaritan Hospital Program
Penn State University Hospital-Milton S Hershey Med Ctr
Good Samaritan Hospital
Program Director:
Edward Paul, MD
Penn State University
Good Samaritan Hospital
618 Cornwall Rd Bldg 2
Lebanon, PA 17042
717 279-1499
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 120-41-11-204

Johnstown
Conemaugh Valley Memorial Hospital Program
Conemaugh Valley Memorial Hospital
Program Director:
Ralph R. Kuebler, MD
Conemaugh Valley Memorial Hospital Dept of Family Practice
109 Franklin St
Johnstown, PA 15905-4388
814 533-9100
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 120-41-11-204

Kingston
United Health and Hospital Services Program
Nesbitt Memorial Hospital
Wilkes-Barre General Hospital
Program Director:
Julie A. Dostal, MD
United Health and Hospital Services Inc
540 Pierce St
Kingston, PA 18704
717 388-7461
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 120-41-11-204

Lancaster
Lancaster General Hospital Program
Lancaster General Hospital
Program Director:
Nikitas J. Zervas, MD
Lancaster General Hospital
550 N Duke St PO Box 1356
Lancaster, PA 17604-3555
717 290-4400
Length: 3 Year(s) Total Positions: 20 (GYI: 13)
Program ID: 120-41-11-204

Latrobe
Thomas Jefferson University (Latrobe) Program
Latrobe Area Hospital
Program Director:
Joseph B. Gori, MD
Latrobe Area Hospital
Dept of Family Practice
121 W Second Ave
Latrobe, PA 15650-1996
412 387-1495
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 120-41-11-204

McKeesport
McKeesport Hospital Program
McKeesport Hospital
Program Director:
Rudolph L. Buck, MD
McKeesport Hospital
1500 Fifth Ave
McKeesport, PA 15132-2483
412 664-2111
Length: 3 Year(s) Total Positions: 21 (GYI: 7)
Program ID: 120-41-11-204

Monroeville (Pittsburgh)
Forbes Health System Program
Forbes Regional Hospital
Program Director:
Martin I. Setman, MD
Forbes Health System
500 Fitness St
Pittsburgh, PA 15205
412 888-2788
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 120-41-13-204

* Updated information not provided.
Accredited Programs in Family Practice

Norristown
Montgomery Hospital Program
Montgomery Hospital
Program Director: William H Rodgers III, MD
Montgomery Family Practice Residency Program
1350 Powell St, Ste 408
Norristown, PA 19401
610 277-0894
Length: 3 year(s) Total Positions: 15 (GYT: 5)
Program ID: 120-41-11-272

Philadelphia
Chestnut Hill Hospital Program
Chestnut Hill Hospital
Program Director: Marc W McKenna, MD
Chestnut Hill Hosp Family Practice Unit
8815 Germantown Ave
Philly Floor
Philadelphia, PA 19118
215 248-8145
Length: 3 year(s) Total Positions: 15 (GYT: 5)
Program ID: 120-41-31-276

Thomas Jefferson University Program
Thomas Jefferson University Hospital
Program Director: Richard C Weender, MD
Thomas Jefferson University Hospital
1015 Walnut St, RM 401
Philadelphia, PA 19107
215 696-2366
Length: 3 year(s) Total Positions: 20 (GYT: 7)
Subspecialties: FPG
Program ID: 120-41-21-276

Pittsburgh
Shadyside Hospital Program
Shadyside Hospital
Program Director: David B Reed, MD
Shadyside Hospital
6250 Centre Ave
Pittsburgh, PA 15224
412 623-2294
Length: 3 year(s) Total Positions: 25 (GYT: 8)
Program ID: 120-41-12-280

St Margaret Memorial Hospital Program
St Margaret Memorial Hospital
Program Director: Donald B Middleton, MD
St Margaret Memorial Hospital
815 Freepoint Rd
Pittsburgh, PA 15215-3984
412 754-4252
Length: 3 year(s) Total Positions: 42 (GYT: 12)
Subspecialties: FPG
Program ID: 12041-12-279

Reading
Reading Hospital and Medical Center Program
Reading Hospital and Medical Center
Program Director: D Michael Baxter, MD
Reading Hospital and Medical Center
Family Health Care Center
PO Box 16952
Reading, PA 18612-6052
610 578-8155
Length: 3 year(s) Total Positions: 14 (GYT: 5)
Program ID: 120-41-12-281

St Joseph Hospital Program*
St Joseph Hospital
Program Director: Lucien P Capobianco, MD
St Joseph Hospital Family Practice Program
200 N 13th St Ste 200
Reading, PA 19604
610 378-2808
Length: 3 year(s) Total Positions: 15 (GYT: 5)
Program ID: 120-41-11-282

Sayre
Guthrie Healthcare System Program
Guthrie Healthcare System
Program Director: Franklyn D Dormest, MD
Dept of Medical Education
Robert Packer Hospital
GuthrieSq
Sayre, PA 18680
717 869-3292
Length: 3 year(s) Total Positions: 12 (GYT: 4)
Program ID: 120-41-21-518

Upland
Delco Family Health Associates Program
Delaware County Memorial Hospital
Program Director: John A Zapp, MD
Grove-Keystone Ctr for Family Hlth
1260 E Woodland Ave
Ste #200
Springfield, PA 19064-3888
610 690-4460
Length: 3 year(s) Total Positions: 21 (GYT: 7)
Program ID: 120-41-21-477

Washington
Washington Hospital Program*
Washington Hospital
Program Director: Paul T Callen, MD
Washington Hospital
155 Wilson Ave
Washington, PA 15301
412 223-3100
Length: 2 year(s) Total Positions: 18 (GYT: 6)
Program ID: 120-41-12-283

Williamsport
Williamsport Hospital and Medical Center Program
Williamsport Hospital and Medical Center
Program Director: Jeffrey W Weetstone, MD
Williamsport Hospital
699 Rural Ave
Williamsport, PA 17701-3198
717 321-3540
Length: 3 year(s) Total Positions: 21 (GYT: 7)
Program ID: 120-41-13-285

York
York Hospital Program
York Hospital
Program Director: Richard W Sloan, MD
York Hospital
1001 S George St
York, PA 17406
717 851-2005
Length: 3 year(s) Total Positions: 12 (GYT: 6)
Program ID: 120-41-11-286

Puerto Rico
Bayamon
Hospital San Pablo Program
Hospital San Pablo
Program Director: Felix Betanacourt-Borco, MD
Dept of Family Practice
Calle Sta Cruz #70 Urb Sta Cruz
PO Box 296
Bayamon, PR 00960-6006
809 786-6845
Length: 3 year(s) Total Positions: 13 (GYT: 5)
Program ID: 120-42-21-448

Universidad Central del Caribe Program
University Hospital Ramon Ruiz Armas
Program Director: Harry E Mercado, MD
Family Medicine Dept
Universidad Central del Caribe
Call Box 50-327
Bayamon, PR 00960-6006
809-740-4343
Length: 3 year(s) Total Positions: 18 (GYT: 6)
Program ID: 120-42-21-518

Caguas
University of Puerto Rico Program
Caguas Regional Hospital
Program Director: Helen Rosa-Santiago, MD
Family Practice Center
Box 427
Gurabo, PR 00775
809 737-6690
Length: 3 year(s) Total Positions: 26 (GYT: 8)
Subspecialties: FPG
Program ID: 120-42-21-287

Manati
Dr Alejandro Otero Lopez Hospital Program*
Hospital Dr Alejandro Otero Lopez
Program Director: Enrique M Mateo-Beyes, MD
Dr Alejandro Otero Lopez Hospital
PO Box 1142
Manati, PR 00671
809 854-3700
Length: 3 year(s) Total Positions: 20 (GYT: 7)
Program ID: 120-42-21-501

Ponce
Dr Pila Hospital/Ponce School of Medicine Program
Dr Pila Hospital
Ponce Regional Hospital
Program Director: Rafael I Irizar, MD
Family Practice Program Dr Pila Hospital
PO Box 1910
Ponce, PR 00733-1910
809 844-6400
Length: 3 year(s) Total Positions: 12 (GYT: 4)
Program ID: 120-42-21-466

* Updated information not provided.
Rhode Island

Pawtucket

Brown University Program
Memorial Hospital of Rhode Island
Program Director: John Murphy, MD
Memorial Hospital Of RI / Brown University
111 Brewster St
Pawtucket, RI 02860
401 729-2236
Length: 3 Year(s) Total Positions: 38 (GYT: 13)
Program ID: 120-45-21-288

South Carolina

Anderson

Anderson Area Medical Center Program
Anderson Area Medical Center
Program Director: James H Buehler, MD
Dept of Family Practice
600 N Faris St
Anderson, SC 29621
864 324-5100
Length: 3 Year(s) Total Positions: 24 (GYT: 8)
Program ID: 120-45-11-289

Charleston

Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
SUMC Medical Center
Program Director: Clive Brock, MD GIB
Medical University of South Carolina
Dept of Family Medicine
171 Ashley Ave
Charleston, SC 29425-5820
843 792-3869
Length: 3 Year(s) Total Positions: 25 (GYT: 9)
Program ID: 120-45-21-290

Columbia

Richland Memorial Hospital-University of South Carolina School of Medicine Program
Richland Memorial Hospital- Unv of South Carolina Sch of Med
Program Director: Libby G Baxley, MD
Family Practice Center Richland Memorial Hospital
6 Richland Medical Park
Columbia, SC 29003
803 434-6116
Length: 3 Year(s) Total Positions: 29 (GYT: 13)
Program ID: 120-45-11-291

Florence

McLeod Regional Medical Center Program
McLeod Regional Medical Center
Program Director: William H Hester, MD
McLeod Family Medicine Center
555 E Chestnut St
Florence, SC 29505-3617
803 667-2808
Length: 3 Year(s) Total Positions: 22 (GYT: 8)
Program ID: 120-45-21-375

Greenville

Greenville Hospital System Program
Greenville Hospital System
Program Director: Palmira S Snape, MD
Center for Family Medicine
701 Grove Rd
Greenville, SC 29605
864 455-7831
Length: 3 Year(s) Total Positions: 25 (GYT: 8)
Program ID: 120-45-11-292

Greenwood

Greenwood Family Practice Program
Self Memorial Hospital
Program Director: Stoney A Abercrombie, MD
Montgomery Center for Family Medicine
160 Academy Ave
Greenwood, SC 29646
803 227-4869
Length: 3 Year(s) Total Positions: 25 (GYT: 8)
Program ID: 120-45-11-297

Spartanburg

Spartanburg Regional Medical Center Program
Spartanburg Regional Medical Center
Program Director: Otis L Baughman III, MD
Spartanburg Family Medicine Residency Program
210 Catawba St Lower Level
Spartanburg, SC 29302-2136
864 560-6196
Length: 3 Year(s) Total Positions: 36 (GYT: 12)
Program ID: 120-45-11-298

South Dakota

Rapid City

Rapid City Regional Hospital Program
Rapid City Regional Hospital
Program Director: Douglas A Bright, MD
Rapid City Regional Hospital
353 Fairmont Blvd
Rapid City, SD 57701
605 341-8828
Length: 3 Year(s) Total Positions: 10 (GYT: 8)
Program ID: 120-45-51-547

Sioux Falls

University of South Dakota (Brookings/Watertown) Program
University of South Dakota School of Medicine
Brookings Hospital
McKensan Hospital
Prairie Lakes Health Care Center
Sioux Valley Hospital
Program Director: Earl D Kemp, MD
Family Practice Ctr Inc
2300 S Dakota Ave
Sioux Falls, SD 78105
605 339-1783
Length: 3 Year(s) Total Positions: 3 (GYT: 9)
Program ID: 120-45-31-632

University of South Dakota Program
University of South Dakota School of Medicine
McKensan Hospital
Sioux Valley Hospital
Program Director: Earl D Kemp, MD
Family Practice Ctr Inc
2300 S Dakota Ave
Sioux Falls, SD 78105
605 339-1783
Length: 3 Year(s) Total Positions: 24 (GYT: 11)
Program ID: 120-45-11-294

Tennessee

Jackson

University of Tennessee (Jackson) Program
Jackson Madison County General Hospital
University of Tennessee College of Medicine
Program Director: James H Demoll, MD
Dept of Family Medicine
284 Summit Dr
Jackson, TN 38301-3883
901 425-1862
Length: 3 Year(s) Total Positions: 26 (GYT: 8)
Program ID: 120-47-21-299

Johnson City

East Tennessee State University (Bristol) Program
James H Quillen College of Medicine
Bristol Regional Medical Center
Program Director: Jo Ann Rosenthal, MD
Bristol Family Practice Center
100 Bristol College Dr
Bristol, TN 37620
423 989-4000
Length: 3 Year(s) Total Positions: 30 (GYT: 8)
Program ID: 120-47-31-236

East Tennessee State University (Kingsport) Program
James H Quillen College of Medicine
Holston Valley Hospital and Medical Center
Program Director: L H Miller, MD
Kingsport Family Practice Center
201 Cassel Dr
Kingsport, TN 37660
423 242-4660
Length: 3 Year(s) Total Positions: 20 (GYT: 8)
Program ID: 120-47-31-237

East Tennessee State University Program
James H Quillen College of Medicine
Johnson City Medical Center Hospital
Veterans Affairs Medical Center (Mountain Home)
Program Director: Daniel J Davis, MD
East Tennessee State Unv Dept of Family Medicine
Family Medicine Associates
917 W Walnut St
Johnson City, TN 37604
423 929-6643
Length: 3 Year(s) Total Positions: 18 (GYT: 8)
Program ID: 120-47-21-410

* Updated information not provided.
Knoxville
University of Tennessee Medical Center at Knoxville Program
University of Tennessee Graduate School of Medicine
University of Tennessee Medical Center
Program Director: George E. Shacklett, MD
The University of Tennessee
Graduate School of Medicine
1924 Alcoa Hwy U-67
Knoxville, TN 37902
615-544-8252
Length: 3 Year(s) Total Positions: 24 (GY: 8) Program ID: 120-47-11-298

Memphis
University of Tennessee (Healthplex) Program
University of Tennessee College of Medicine
Baptist Memorial Hospital
Program Director: W. MacMillan Rodney, MD
Healthplex Family Practice
1121 Union Ave
Memphis, TN 38103
901-528-7131
Length: 3 Year(s) Total Positions: 18 (GY: 6) Program ID: 120-47-21-462

University of Tennessee Program
University of Tennessee College of Medicine
St Jude’s Hospital
Program Director: Clarke S. Smith, MD
University of Tennessee Medical Center
Program Director: W. MacMillan Rodney, MD
Healthplex Family Practice
1121 Union Ave
Memphis, TN 38103
901-528-7131
Length: 3 Year(s) Total Positions: 23 (GY: 8) Program ID: 120-47-21-463

Austin
Central Texas Medical Foundation Program
Central Texas Medical Foundation
Brackenridge Hospital
Program Director: David P. Wright, MD
Department of Family Medicine
4014 N IH 35
Austin, TX 78701
512-458-2763
Length: 3 Year(s) Total Positions: 21 (GY: 6) Program ID: 120-48-11-302

Baytown
San Jacinto Methodist Hospital Program
San Jacinto Methodist Hospital
Program Director: David W. Garns, MD
San Jacinto Methodist Hospital
4301 Garth Rd
Baytown, TX 77521
713 420-8495
Length: 3 Year(s) Total Positions: 24 (GY: 8) Program ID: 120-48-21-432

Corpus Christi
Memorial Medical Center Program
Memorial Medical Center
Program Director: Robert D. Proy, MD
Memorial Medical Center Family Practice Center
2005 Hospital Blvd
PO Box 5926
Corpus Christi, TX 78405
512-902-4849
Length: 3 Year(s) Total Positions: 30 (GY: 10) Program ID: 120-48-22-303

Dallas
University of Texas Southwestern Medical Center (Methodist) Program
Methodist Hospitals of Dallas
Charter Mission Hospital
Dallas County Hospital District-Parkland Memorial Hospital
Program Director: Bruce A. Bills, MD
The UT Southwestern Med Ctr at Dallas
2400 W Wheatland Rd
Dallas, TX 75237-3496
214-706-2227
Length: 3 Year(s) Total Positions: 18 (GY: 6) Program ID: 120-48-21-433

University of Texas Southwestern Medical Center Program
St Paul Medical Center
Dallas County Hospital District-Parkland Memorial Hospital
Program Director: Clara M. McCullough, MD
Family Practice Center
6011 Harry Hines Blvd
Ste 401
Dallas, TX 75235
214-778-2084
Length: 3 Year(s) Total Positions: 12 (GY: 4) Program ID: 120-48-21-281

El Paso
Texas Tech University (El Paso) Program
Texas Tech University Health Sciences Center at El Paso
Reumathon General Hospital
Program Director: J. Dennis Mull, MD
Texas Tech Family Medicine
10000 Basking
El Paso, TX 79924-3803
915-757-5176
Length: 3 Year(s) Total Positions: 18 (GY: 6) Program ID: 120-48-11-309

Fort Worth
University of Texas Southwestern Medical School (Fort Worth) Program
John Peter Smith Hospital (Barnard County Hospital)
Program Director: David Dugger, MD
John Peter Smith Hospital
Dept of Family Practice
1500 S Main St
Fort Worth, TX 76104
817-927-1200
Length: 3 Year(s) Total Positions: 72 (GY: 24) Program ID: 120-48-31-304

Galveston
University of Texas Medical Branch Hospitals (Conroe) Program
University of Texas Medical Branch Hospitals
Montgomery County Medical Center Hospital
Program Director: Gordon G. Erentz, MD
Family Practice Center
101 E Davis St Ste C
Conroe, TX 77301-3018
409-639-4004
Length: 3 Year(s) Total Positions: 18 (GY: 6) Program ID: 120-48-21-464

University of Texas Medical Branch Hospitals Program
University of Texas Medical Branch Hospitals
Program Director: Michael Lynn O’Dee, MD
Univ of Texas Med Branch
Dept of Family Medicine
415 Texas Ave
Galveston, TX 77555-6653
409-772-3123
Length: 3 Year(s) Total Positions: 36 (GY: 14) Program ID: 120-48-51-305

Houston
Baylor College of Medicine Program
Baylor College of Medicine
AMF Park Plaza Hospital
Harris County Hospital District Ben Taub General Hospital
St Luke’s Episcopal Hospital
Program Director: Michael A. Crouch, MD
Baylor Family Practice Center
5510 Greenbriar
Houston, TX 77005
713-795-7791
Length: 3 Year(s) Total Positions: 48 (GY: 24) Program ID: 120-48-11-306

Texas
Amarillo
Texas Tech University (Amarillo) Program
Texas Tech University Health Sciences Center at Amarillo
Northwest Texas Health Care System
St Anthony’s Hospital
Program Director: Charles V. Wright, Jr, MD
Texas Tech Uni Sci Ctr
Center For Family Medicine
731 N Taylor Ste 300
Amarillo, TX 79107-1017
806-355-5147
Length: 3 Year(s) Total Positions: 18 (GY: 6) Program ID: 120-48-21-511

* Updated information not provided.
University of Texas at Houston (Memorial) Program
University of Texas Medical School at Houston Memorial Hospital System
Program Director:
Edward L Langston, RPh MD
Memorial Family Practice Residency Program
7701 Southwest Freeway #420
Houston, TX 77074
713-776-5160
Length: 3 Year(s) Total Positions: 50 (GY: 17)
Program ID: 120-48-21-307

University of Texas at Houston Program
University of Texas Medical School at Houston Hermann Hospital
Lyndon B Johnson General Hospital
Program Director:
Grant Fowler, MD
University of Texas-Houston Medical School
Depts of Family Practice
6431 Fannin Ste 2.104 MSB
Houston, TX 77030
713-792-5853
Length: 3 Year(s) Total Positions: 56 (GY: 15)
Program ID: 120-48-21-490

Lubbock
Texas Tech University (Lubbock) Program
Texas Tech University Health Sciences Center at Lubbock
St Mary of the Plains Hospital University Medical Center
Program Director:
Richard V Homan, MD
Texas Tech University Health Sciences Center
Depts of Family Medicine
Lubbock, TX 79430
806-743-2770
Length: 3 Year(s) Total Positions: 30 (GY: 10)
Program ID: 120-48-21-510

Odessa
Texas Tech University (Odessa) Program
Texas Tech University Health Sciences Center at Odessa Medical Center Hospital
Program Director:
Leonard W Morgan, MD
Texas Tech University HSC
500 W Fourth St.
Odessa, TX 79763-4302
915-386-5311
Length: 3 Year(s) Total Positions: 35 (GY: 5)
Program ID: 120-48-21-467

Port Arthur
University of Texas Medical Branch (Port Arthur) Program
St Mary Hospital
Program Director:
William D George Jr, MD
St Mary Hospital Family Practice Center
3636 Gates Blvd Ste 100
Port Arthur, TX 77642
409-448-1147
Length: 3 Year(s) Total Positions: 12 (GY: 4)
Program ID: 120-48-21-424

San Antonio
University of Texas at San Antonio (McAllen) Program
University of Texas Medical School at San Antonio McAllen Medical Center
Program Director:
Juan J Trevino, MD
McAllen Medical Center
206 E'Torreon
McAllen, TX 78503
210-692-6156
Length: 3 Year(s) Total Positions: 18 (GY: 6)
Program ID: 120-48-11-311

University of Texas Health Science Center at San Antonio Program
University of Texas Medical School at San Antonio Audie L Murphy Memorial Veterans Hospital (San Antonio)
University Health Center-Downtown
University Hospital-South Texas Medical Center
Program Director:
Janet P Realini, MD MPH
University of Texas Health Science Center
Dept of Family Practice
7730 Floyd Curl Dr
San Antonio, TX 78284-7796
210-258-5831
Length: 3 Year(s) Total Positions: 44 (GY: 15)
Program ID: 120-48-21-812

Temple
Texas A&M College of Medicine-Scott and White Program
Scott and White Memorial Hospital
Program Director:
Craig W Glantoe, MD
Texas A&M-Scott and White Graduate Medical Education
2401 S 31st St
Temple, TX 76508-0001
800-290-4463
Length: 3 Year(s) Total Positions: 13 (GY: 6)
Program ID: 120-48-21-409

Tyler
University of Texas Health Center at Tyler Program*
University of Texas Health Center at Tyler Mother Frances Hospital Regional Health Care Center
Program Director:
Richard M Vikesen, MD
Univ of Texas Hlth Ctr at Tyler
PO Box 2003
Intersection of US 271 & State 155
Tyler, TX 75711
903-877-2594
Length: 3 Year(s) Total Positions: 19 (GY: 0)
Program ID: 120-48-21-644

Waco
McLennan County Medical Education and Research Foundation Program
McLennan County Medical Education and Research Foundation
Hillcrest Baptist Medical Center
Prudence Health Center
Program Director:
Robert G Brown, MD
Dept of Family Practice
1600 Providence Dr
Waco, TX 76707
917-754-2471
Length: 3 Year(s) Total Positions: 35 (GY: 12)
Program ID: 120-48-11-313

Wichita Falls
North Central Texas Medical Foundation Program
North Central Texas Medical Foundation
Bethania Regional Health Care Center
Wichita General Hospital
Program Director:
D Clifford Burrows, MD
North Central Texas Medical Foundation
1301 Third St
Wichita Falls, TX 76301
917-777-0143
Length: 3 Year(s) Total Positions: 18 (GY: 6)
Program ID: 120-48-21-485

Utah
Salt Lake City
RHP of Utah Program
PHP of Utah Inc
RHP of Utah Hospital
Program Director:
John W Robinson, MD
2490 S State
Salt Lake City, UT 84115
801-815-1865
Length: 3 Year(s) Total Positions: 8 (GY: 4)
Program ID: 120-48-21-529

University of Utah (Ogden) Program
University of Utah Medical Center McKay Dee Hospital Center
Program Director:
Richard C Arbogast, MD
Porter Family Practice Center
3955 Harrison Blvd
Ogden, UT 84403
801-625-2749
Length: 3 Year(s) Total Positions: 15 (GY: 6)
Program ID: 120-48-21-496

University of Utah Program
University of Utah Medical Center
Holy Cross Hospital
Program Director:
Rita Kilbeau, MD
Univ of Utah Med Ctr
Dept of Family & Preventive Med
56 N Medical Dr
Salt Lake City, UT 84132
801-581-7224
Length: 3 Year(s) Total Positions: 32 (GY: 12)
Program ID: 120-48-21-515

* Updated information not provided.
Accredited Programs in Family Practice

Vermont

Burlington

Medical Center Hospital of Vermont Program
Medical Center Hospital of Vermont
Program Director: Thomas C Peterson, MD
Univ of Vermont College of Medicine
Villemaine Family Health Center
23 Meadow Ln
Milton, VT 05468
802-863-0138
Length: 3 Year(s) Total Positions: 17 (GYI: 6)
Program ID: 120-50-21-316

Virginia

Charlottesville

University of Virginia Program
University of Virginia Medical Center
Program Director: Richard S Hays, MD
Univ of Virginia
Dept of Family Med
PO Box 414
Charlottesville, VA 22908
804-984-1560
Length: 3 Year(s) Total Positions: 34 (GYI: 8)
Program ID: 120-51-11-317

Fort Belvoir

DeWitt Army Community Hospital Program
DeWitt Army Community Hospital
Program Director: Thomas M Michel, MD
DeWitt Army Community Hospital
DeWitt Primary Care Group
9501 Parcell Rd Ste GC-11
Fort Belvoir, VA 22052-5141
703-805-0045
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 120-51-12-012

Lynchburg

Centra Health Program
Centra Health Inc
Program Director: Harold S Crow, MD
Lynchburg Family Practice Residency
2097 Langhorne Rd
Lynchburg, VA 24501
804-297-2210
Length: 3 Year(s) Total Positions: 12 (GYI: 4)
Program ID: 120-51-21-318

Norfolk

Eastern Virginia Graduate School of Medicine (Ghent) Program
Eastern Virginia Graduate School of Medicine
Sentara Norfolk General Hospital
Program Director: Benjamin P Eng, MD
Ghent Family Practice Residency
721 Fairfax Ave 3rd Fl
Norfolk, VA 23507
804-446-6883
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 120-51-21-319

Eastern Virginia Graduate School of Medicine (Portsmouth) Program
Eastern Virginia Graduate School of Medicine
Portsmouth General Hospital
Maryview Hospital
Program Director: Alexander Berger, MD
Portsmouth Family Medicine Ctr
2706 Leaden Blvd
Portsmouth, VA 23707
804-446-7400
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 120-51-21-442

Richmond

Medical College of Virginia/Virginia Commonwealth University (Blackstone) Program
Medical College of Virginia/Virginia Commonwealth University
Blackstone Family Practice Center
Medical College of Virginia Hospitals
Program Director: Steven N Spence, MD
Blackstone Family Practice Center
920 S Main St
Blackstone, VA 23824
804-292-7251
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 120-51-11-321

Medical College of Virginia/Virginia Commonwealth University (Chippenham) Program
Medical College of Virginia/Virginia Commonwealth University
HCA Chippenham Medical Center
Program Director: W Jefferson McCarter, MD
Chesterfield Family Practice Center
2500 Pooshock Pl
Richmond, VA 23233
804-276-6365
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 120-51-11-320

Medical College of Virginia/Virginia Commonwealth University (Fall Church) Program
Medical College of Virginia/Virginia Commonwealth University
Fairfax Hospital
Program Director: Samuel M Jones, MD
Fairfax Family Practice Center
3650 Joseph Siewick Dr #400
Fairfax, VA 22033
703-391-2020
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 120-51-11-322

Medical College of Virginia/Virginia Commonwealth University (Newport News) Program
Medical College of Virginia/Virginia Commonwealth University
Riverside Regional Medical Center
Program Director: Paul E Evans III, MD
Riverside Family Practice Center
316 Main St
Newport News, VA 23601-3810
804-584-3878
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 120-51-11-323

Medical College of Virginia/Virginia Commonwealth University Program
Medical College of Virginia/Virginia Commonwealth University
Medical College of Virginia Hospitals
Program Director: Michael J Petrutz, MD
Hanover Family Physicians PC
10290 Allen Station Rd
Mechanicsville, VA 23111
804-730-4510
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 120-51-21-485

Roanoke

Carilion Health System Program
Carilion Health System
Community Hospital of Roanoke Valley
Roanoke Memorial Hospitals
Program Director: J A Hays, MD
Southeast Roanoke Family Med Ctr
2145 Mt Pleasant Blvd SE
Roanoke, VA 24014-5099
703-427-3255
Length: 3 Year(s) Total Positions: 36 (GYI: 12)
Program ID: 120-51-11-325

Washington

Bremerton

Naval Hospital (Bremerton) Program
Naval Hospital (Bremerton)
Program Director: Larry H Johnson, MD
Puget Sound Family Medicine Program
Naval Hospital
Boone Rd
Bremerton, WA 98312-1898
206-478-5345
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 120-51-21-484

Olympia

St Peter Hospital Program
St Peter Hospital
Program Director: Keith Frey, MD
St Peter Hospital Family Practice Residency Program
525 Lilly Rd NE
Olympia, WA 98506
206-465-4015
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 120-51-21-471

Renton

Valley Medical Center Program
Valley Medical Center
Program Director: Andrew Oliveira, MD
Valley Professional Center North
3915 Talbot Rd S Ste 401
Renton, WA 98055
206-572-2722
Length: 3 Year(s) Total Positions: 24 (GYI: 8)
Program ID: 120-51-21-470

* Updated information not provided.
Seattle
Group Health Cooperative of Puget Sound Program
Group Health Cooperative of Puget Sound
Program Director:
Michael Wadner, MD
Group Health Cooperative of Puget Sound
200 15th Ave E CWB100
Seattle, WA 98112
206 326-3585
Length: 3 Year(s) Total Positions: 15 (GYI: 5)
Program ID: 120-54-21327

Providence Medical Center Program
Providence Medical Center
Program Director:
Kevin F Murray MD
Providence Family Med Ctr
560 10th Ave Ste 100
Seattle, WA 98112
206 232-2238
Length: 3 Year(s) Total Positions: 27 (GYI: 11)
Program ID: 120-64-21358

Swedish Hospital Medical Center-Seward Program
Swedish Medical Center-Seattle
Program Director:
Joseph N Scardpane, MD
Swedish Medical Center/Seattle
1101 Madison #300
Seattle, WA 98104
206 285-6054
Length: 3 Year(s) Total Positions: 30 (GYI: 10)
Program ID: 120-64-31306

University of Washington Program
University of Washington School of Medicine
University of Washington Medical Center
Program Director:
David P Leach, MD
University of Washington Medical Center
Dept of Family Medicine RF-30
Seattle, WA 98195
206 685-6054
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 120-64-31339

Spokane
Inland Empire Hospital Services Association Program
Inland Empire Hospital Services Association
Deaconess Medical Center
Sacred Heart Medical Center
Program Director:
Philip D Cleveland, MD
Spokane Family Medicine Program
S 610 Cowley
Spokane, WA 99202-1338
509 624-2313
Length: 3 Year(s) Total Positions: 21 (GYI: 7)
Program ID: 120-64-21330

Inland Empire Hospital Services Association Rural Program
Inland Empire Hospital Services Association
Program Director:
Philip D Cleveland, MD
Family Med Spokane
S 610 Cowley
Spokane, WA 99202-1228
509 624-3313
Length: 3 Year(s) Total Positions: 6 (GYI: 2)
Program ID: 120-64-31602

Tacoma
Madigan Army Medical Center Program
Madigan Army Medical Center
Program Director:
Wayne A Schrimmer, DO
Madigan Army Med Ctr
Attn: HSHU-PP
Tacoma, WA 98431-6000
254 966-2006
Length: 3 Year(s) Total Positions: 17 (GYI: 5)
Program ID: 120-64-21018

Tacoma General Hospital Program
Tacoma General Hospital
Mary Bridge Children's Hospital and Health Center
Program Director:
Judy Pauwels, MD
Tacoma Family Med
331 S K St
Tacoma, WA 98405-4272
206 552-2938
Length: 3 Year(s) Total Positions: 28 (GYI: 8)
Program ID: 120-64-31381

Vancouver
Southwest Washington Medical Center Program
Southwest Washington Medical Center
Program Director:
David Ruiz, MD
9005 NE 148th St
Buhl Prairie, WA 98606
360 260-2560
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 120-64-31446

Yakima
Yakima Valley Memorial Hospital/St Elizabeth Medical Center Program
Yakima Valley Memorial Hospital
St Elizabeth Medical Center
Program Director:
Michael W Maples, MD
Central Washington Family Medicine
1504 W Lincoln
Yakima, WA 98902
509 552-4520
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 120-64-21322

West Virginia
Charleston
West Virginia University (Charleston Division) Program
Charleston Area Medical Center
Program Director:
Jeffrey V Ashley, MD
Dept of Family Medicine
1291 Washington St E #108
Charleston, WV 25301
304 346-2022
Length: 3 Year(s) Total Positions: 54 (GYI: 8)
Program ID: 120-65-11337

Clarksburg
United Hospital Center Program
United Hospital Center
Program Director:
George T Fredrick, MD
One Hospital Plaza
PO Box 2599
Clarksburg, WV 26302-2599
304 754-7588
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 120-55-22334

Huntington
Marshall University School of Medicine Program
Marshall University School of Medicine
Cabell Huntington Hospital
Program Director:
Stephen M Petras, MD
Marshall University School of Medicine
Dept of Family Medicine
1801 Sixth Ave
Huntington, WV 25755-9420
304 520-7046
Length: 3 Year(s) Total Positions: 34 (GYI: 8)
Program ID: 120-55-21335

Morgantown
West Virginia University Program
West Virginia University Hospitals
Program Director:
James G Arhugad, MD
Dept of Family Med
Robert C Byrd HCS of WVU
PO Box 9152
Morgantown, WV 26506-0152
304 691-5368
Length: 3 Year(s) Total Positions: 20 (GYI: 9)
Program ID: 120-64-11336

Wheeling
Wheeling Hospital Program
Wheeling Hospital
Program Director:
Terry Lillibro, MD
Family Health Center
40 Medical Park Ste 401
Wheeling, WV 26003-6110
304 243-3380
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 120-55-32-338

Wisconsin
Appleton
University of Wisconsin (Appleton) Program
Appleton Medical Center
St Elizabeth Hospital
Program Director:
Lee M Vogel, MD
Appleton Family Practice Residency
228 S Morrison
Appleton, WI 54911-5760
414 738-8413
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 120-64-21-488

* Updated information not provided.
Accredited Programs in Family Practice

Eau Claire
University of Wisconsin (Eau Claire) Program
Luther Hospital
Sacred Heart Hospital
Program Director:
William J Hueston, MD
Eau Claire Family Medicine Program
807 S Farwell St
Eau Claire, WI 54701
715 836-5177
Length: 3 Year(s) Total Positions: 20 (GY: 7)
Program ID: 120-56-31-342

Janesville
Mercy Health System Program
Mercy Health System
Program Director:
Gregory L Darrow, MD
Mercy Health System Family Practice Residency Program
840 Kellogg Ave
Janesville, WI 53545-5978
608 256-6677
Length: 3 Year(s) Total Positions: 18 (GY: 6)
Program ID: 120-56-21-503

La Crosse
St Francis Medical Center Program
St Francis Medical Center
Program Director:
Thomas J Grau, MD
St Francis-Mayo Family Practice Residency
700 West Ave S
La Crosse, WI 54601
608 782-5040
Length: 3 Year(s) Total Positions: 18 (GY: 6)
Program ID: 120-56-11-339

Madison
University of Wisconsin Program
St Mary's Hospital Medical Center
Program Director:
John W Beasley, MD
Dept of Family Medicine
Madison Family Medicine Pgm
777 S Mills St
Madison, WI 53715-1896
608 285-6568
Length: 3 Year(s) Total Positions: 38 (GY: 14)
Program ID: 120-56-11-343

Milwaukee
Medical College of Wisconsin (Columbia) Program
Medical College of Wisconsin Affiliated Hospitals Inc
Columbia Hospital
Program Director:
Russell J Robertson, MD
Columbia Family Practice Residency Program
210 W Capitol Dr
Milwaukee, WI 53212
414 951-1810
Length: 3 Year(s) Total Positions: 20 (GY: 6)
Program ID: 120-56-21-496

Medical College of Wisconsin (Kenosha) Program
Medical College of Wisconsin Affiliated Hospitals Inc
St Catherine's Hospital
Program Director:
Philip K Wong, MD
L Kevin Hambrecht, PhD
St Catherine's Family Practice Center
PO Box 598
Kenosha, WI 53141
414 553-0430
Length: 3 Year(s) Total Positions: 18 (GY: 6)
Program ID: 120-56-21-688

Medical College of Wisconsin (St Mary's) Program
Medical College of Wisconsin Affiliated Hospitals Inc
St Mary's Hospital of Milwaukee
Program Director:
Loren A Leshtek, MD
St Mary's Family Practice Center
2240 N Prospect Ave
Milwaukee, WI 53202
414 258-7107
Length: 3 Year(s) Total Positions: 20 (GY: 8)
Program ID: 120-56-21-344

Medical College of Wisconsin (St Michael) Program
Medical College of Wisconsin Affiliated Hospitals Inc
St Michael Hospital
Program Director:
David S Smith, MD
St Michael Hospital
2400 W Villard Ave
Milwaukee, WI 53209
414 247-8340
Length: 3 Year(s) Total Positions: 18 (GY: 2)
Program ID: 120-56-11-349

Medical College of Wisconsin (Waukesha) Program
Medical College of Wisconsin Affiliated Hospitals Inc
Waukesha Memorial Hospital
Program Director:
Richard B Lawa, MD
Waukesha Family Practice Ctr
210 NW Barstow St
Ste 101
Waukesha, WI 53188
414 648-6807
Length: 3 Year(s) Total Positions: 18 (GY: 6)
Program ID: 120-56-21-948

University of Wisconsin (Milwaukee) Program
St Luke's Medical Center
Program Director:
Dennis J Baumgardner, MD
St Luke's Family Practice Residency Pgm
2901 W Kinnickinnic River Pkwy
Ste 175
Milwaukee, WI 53215
414 448-7900
Length: 3 Year(s) Total Positions: 23 (GY: 8)
Program ID: 120-56-21-949

Wausau
University of Wisconsin (Wausau) Program
Wausau Hospital
Program Director:
Kevin J O'Connell, MD
Wausau Family Practice Center
995 Campus Dr
Wausau, WI 54401-1888
715 675-3391
Length: 3 Year(s) Total Positions: 18 (GY: 6)
Program ID: 120-56-21-309

Wyoming
Laramie
University of Wyoming (Cheyenne) Program
University of Wyoming College of Health Sciences
United Medical Center
Program Director:
Robert A Marlow, MD
University of Wyoming Family Practice Program at Cheyenne
821 E 18th St
Cheyenne, WY 82001-4777
307 777-7011
Length: 3 Year(s) Total Positions: 18 (GY: 6)
Program ID: 120-57-12-369

University of Wyoming (Laramie) Program
University of Wyoming College of Health Sciences
Wyoming Medical Center
Program Director:
Joe K Schoener, MD
Univ of Wyoming/Casper
Dept of Family Practice
1552 E A St
Casper, WY 82601
307 265-3076
Length: 3 Year(s) Total Positions: 25 (GY: 8)
Program ID: 120-57-12-361

* Updated information not provided.
<table>
<thead>
<tr>
<th>State</th>
<th>Program Details</th>
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<tbody>
<tr>
<td>Alabama</td>
<td>University of Alabama Medical Center Program, 1511 8th Ave S, Birmingham, AL 35233, 205-874-0432.</td>
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<tr>
<td>California</td>
<td>San Bernardino County Coroner's Office Program at San Bernardino County Medical Examiner's Office, 1890 N Waterman Ave, San Bernardino, CA 92415-0052, 909-387-6116.</td>
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<tr>
<td>Florida</td>
<td>Broward County Medical Examiner's Office Program at Broward County Medical Examiner's Office, 205 S 1st Ave, Fort Lauderdale, FL 33312-6198, 954-462-0118.</td>
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<tr>
<td>Miami</td>
<td>University of Miami-Dade County Medical Examiner's Office Program at Metropolitan Dade County Office of Medical Examiner, 305-546-2425.</td>
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<tr>
<td>Colorado</td>
<td>Denver Health and Hospitals Program at Denver Health and Hospitals, 777 Bannock St, Denver, CO 80204-4607, 303-861-7411.</td>
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<tr>
<td>District of Columbia</td>
<td>Armed Forces Institute of Pathology Program at Armed Forces Institute of Pathology, 14th &amp; Alaska Ave NW, Washington, DC 20306-0056, 202-576-0235.</td>
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<tr>
<td>Georgia</td>
<td>Emory University Program at Emory University School of Medicine, 5052 Windward Avenue SE, Atlanta, GA 30303, 404-727-5320.</td>
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<td>Georgia</td>
<td>Atlanta Medical College at Emory University, 3030 Windward Avenue SE, Atlanta, GA 30303, 404-727-5320.</td>
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*Updated information not provided.*
Illinois

Chicago
Office of the Medical Examiner of Cook County Program
Office of the Medical Examiner of Cook County Program
Program Director: Edmund R Donohue Jr, MD
Office of the Medical Examiner of Cook County
2121 W Harrison St
Chicago, IL 60612-3705
312 667-4500
Length: 1 Year(s) Total Positions: 2 (GY: 0)
Program ID: 310-16-21-605

Kentucky

Louisville
University of Louisville Program
University of Louisville School of Medicine
Office of Chief Medical Examiner
University of Louisville Hospital
Program Director: George R Nichols II, MD
Office of the Medical Examiner
Urban County Government Center
810 Barret Ave
Louisville, KY 40204
502 958-5587
Length: 1 Year(s) Total Positions: 1 (GY: 0)
Program ID: 310-20-21-068

Maryland

Baltimore
Office of the Chief Medical Examiner/State of Maryland Program*
Office of the Chief Medical Examiner Program
Program Director: John E Sniezek, MD
Office of the Chief Medical Examiner
111 Penn St
Baltimore, MD 21201
301 333-3225
Length: 1 Year(s)
Program ID: 310-23-11-012

Massachusetts

Boston
Eastern Massachusetts Medical Examiner's Office Program
Eastern Massachusetts Medical Examiner's Office Program
Program Director: Stanton C Kessler, MD
Office of the Chief Medical Examiner
784 Massachusetts Ave
Boston, MA 02115
617 267-6767
Length: 1 Year(s) Total Positions: 2 (GY: 2)
Program ID: 310-34-21-661

Michigan

Detroit
Wayne County Medical Examiner's Office Program*
Wayne County Medical Examiner's Office Program
Program Director: Bader J Cassius, MD
Wayne County Medical Examiner's Office
400 E Lafayette
Detroit, MI 48226
313 224-5648
Length: 1 Year(s)
Program ID: 310-25-11-013

Minnesota

Minneapolis
Hennepin County Medical Examiner Program
Hennepin County Medical Examiner Program
Program Director: Garry P Petersen, MD, JD
730 S Seventh St
Minneapolis, MN 55415-1736
612 347-2135
Length: 1 Year(s) Total Positions: 1 (GY: 0)
Program ID: 310-36-13-014

New Mexico

Albuquerque
University of New Mexico Program
University of New Mexico School of Medicine
Office of the Medical Investigator
Program Director: Rose E Zumwalt, MD
Office of the Medical Investigator-State of New Mexico
University of New Mexico Health Sciences Center
Albuquerque, NM 87131-5091
505 277-3653
Length: 1 Year(s) Total Positions: 2 (GY: 0)
Program ID: 310-34-21-015

New York

East Meadow
Nassau County Medical Examiner's Office Program*
Nassau County Medical Examiner's Office Program
Program Director: Leslie Lukaish, MD
Nassau County Medical Examiner
PO Box 160
East Meadow, NY 11554
516 542-5150
Length: 1 Year(s) Total Positions: 1
Program ID: 310-36-31-016

New York

Office of the Chief Medical Examiner-City of New York Program
Office of the Chief Medical Examiner-City of New York Program
Program Director: Charles S Hirsch, MD
Office of the Chief Medical Examiner
520 First Ave
New York, NY 10016
212 447-2634
Length: 1 Year(s) Total Positions: 4 (GY: 0)
Program ID: 310-35-21-068

North Carolina

Chapel Hill
University of North Carolina Hospitals Program*
University of North Carolina Hospitals
Office of the Chief Medical Examiner Program
Program Director: John D Bates, MD
Office of the Medical Investigator-State of New Mexico
University of New Mexico Health Sciences Center
Albuquerque, NM 87131-5091
505 277-3653
Length: 1 Year(s) Total Positions: 1
Program ID: 310-36-21-019

Ohio

Cincinnati
Hamilton County Coroner's Office Program
Hamilton County Coroner's Office Program
Program Director: Elliot M Gross, MD
Institute of Forensic Medicine
3168 Eileen Ave
Cincinnati, OH 45210-2260
513 221-4534
Length: 1 Year(s) Total Positions: 1 (GY: 0)
Program ID: 310-36-11-020

* Updated Information not provided.
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<tr>
<th>State</th>
<th>City</th>
<th>Programs</th>
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<tr>
<td>Cleveland</td>
<td>Cuyahoga County Coroner's Office Program</td>
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<td>Program: Cuyahoga County Coroner's Office</td>
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<tr>
<td></td>
<td>Program Director: Elizabeth K. Salzaj, MD</td>
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<td>Cuyahoga County Coroner's Office</td>
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<tr>
<td></td>
<td>2015 Adelbert Rd</td>
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<tr>
<td></td>
<td>Cleveland, OH 44106</td>
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<tr>
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<td>216 771-5610</td>
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<tr>
<td>Dayton</td>
<td>Office of the Montgomery County Coroner Program</td>
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<td>Program Director: James B. Davis, MD</td>
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<td>Montgomery County Coroner's Office</td>
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<tr>
<td></td>
<td>300 W 3rd St</td>
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<td>Dayton, OH 45402</td>
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<td>512 225-4156</td>
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<td>Length: 1 Year(s) Total Positions: 1 (GY: 0)</td>
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<td>Oklahoma City</td>
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<td>Program: Office of the Chief Medical Examiner-State of Oklahoma</td>
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<td>Program Director: Fred B. Jonas, MD</td>
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<td>Office of Chief Medical Examiner</td>
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<tr>
<td></td>
<td>901 N Snowball</td>
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<td>Oklahoma City, OK 73117</td>
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<td>Program Director: Harsh M. Marchandani, MD</td>
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<td>Office of the Medical Examiner</td>
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<tr>
<td></td>
<td>321 University Ave</td>
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<td>Philadelphia, PA 19104</td>
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<td>Allegheny County Coroner's Office Program</td>
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<td>Program Director: Abdulrezzaq Shakeri, MD</td>
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<tr>
<td></td>
<td>542 Fourth Ave</td>
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<td>Pittsburgh, PA 15219-2186</td>
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*Updated information not provided.*
Gastroenterology (Internal Medicine)

California

La Jolla
Scripps Clinic and Research Foundation Program
Program Director: Vance D. Rodgers, MD
Dept of Gastroenterology and Hepatology
10565 N Torrey Pines Rd
La Jolla CA 92037-1083
619 554-8877
Length: 2 Year(s) Total Positions: 6
Program ID: 144-05-21-127

Loma Linda
Loma Linda University Medical Center
Jerry L. Pettis Memorial Veterans Hospital
Kaiser Foundation Hospital (Fontana)
Program Director: Michael H. Walter, MD
Dept of Medicine
Bloom 1652
Loma Linda, CA 92354
909 354-4846
Length: 2 Year(s) Total Positions: 5
Program ID: 144-05-21-087

Los Angeles
UCLA Medical Center Program*
UCLA School of Medicine
Cedars-Sinai Medical Center
LAC-Olive View Medical Center
Los Angeles County- Harbor-UCLA Medical Center
UCLA Medical Center
Veterans Affairs Medical Center (Sepulveda)
Veterans Affairs Medical Center (West Los Angeles)
Program Director: Andrew Solt, MD
UCLA School of Medicine
1001 D Littke Rd Sprg
Los Angeles, CA 90034-1736
310 826-3187
Length: 2 Year(s) Total Positions: 21
Program ID: 144-05-11-190

University of Southern California Program*
Los Angeles County-USC Medical Center
LAC-Rancho Los Amigos Medical Center
Program Director: Neil Kaplowitz, MD
Div of Gastroenterology & Liver Diseases/Dept of Med
1200 W State St Rm 12-137
Los Angeles, CA 90033
213 236-7994
Length: 2 Year(s) Total Positions: 11
Program ID: 144-05-21-053

Orange
University of California (Irvine) Program
University of California (Irvine) Medical Center
Long Beach Memorial Medical Center
Veterans Affairs Medical Center (Long Beach)
Program Director: Hooshang Mehdipour, MD
Univ of California (Irvine) Department of Medicine/Gastro
C340 Med Sc I
Irvine, CA 92217-4088
714 824-7405
Length: 2 Year(s) Total Positions: 8
Program ID: 144-05-21-151

Pasadena
Southern California Kaiser Permanente Medical Care (Los Angeles) Program
Southern California Kaiser Permanente Medical Group
Kaiser Foundation Hospital (Los Angeles)
Program Director: Chris Contessa, MD
Donahue Gerety MD
Kaiser Foundation Hospital
1526 Edgmont St 7th Fl
Los Angeles, CA 90023
213 967-8360
Length: 2 Year(s) Total Positions: 3
Program ID: 144-05-12-097

Sacramento
University of California (Davis) Program
University of California (Davis) Medical Center
Kaiser Foundation Hospital (Sacramento)
Program Director: Joseph Leung, MD
University of California (Davis) Medical Center
4911 X St
Sacramento, CA 95817
916 734-3761
Length: 2 Year(s) Total Positions: 9
Program ID: 144-05-21-094

San Diego
Naval Medical Center (San Diego) Program*
Naval Medical Center (San Diego)
Program Director: Capt Michael D. Mottet, MD
Department of the Navy
Naval Hospital
San Diego, CA 92134-5000
619 592-9275
Length: 2 Year(s) Total Positions: 2
Program ID: 144-05-12-152

University of California (San Diego) Program
University of California (San Diego) Medical Center
Mount Zion Medical Center of the University of California
Veterans Affairs Medical Center (San Diego)
Program Director: Kip D. Lynch, MD
200 W Arbor Dr
San Diego, CA 92103-8413
619 543-3123
Length: 2 Year(s) Total Positions: 9
Program ID: 144-05-21-174

Arkansas

Little Rock
University of Arkansas for Medical Sciences Program
University of Arkansas College of Medicine
John L McClellan Memorial Veterans Hospital
University of Arkansas Hospital
Program Director: Roger Leary, MD
University of Arkansas For Medical Sciences
4901 W Markham Slot 567
Little Rock, AR 72205
501 686-6217
Length: 2 Year(s) Total Positions: 5
Program ID: 144-05-21-111

Arizona

Tucson
University of Arizona Program
University of Arizona College of Medicine
Good Samaritan Regional Medical Center
University Medical Center
Veterans Affairs Medical Center (Tucson)
Program Director: Richard B. Sampiner, MD
Univ of Arizona Gastroenterology Section AHSC Rm 6466
1501 N Campbell Ave
Tucson, AZ 85724
602 526-6177
Length: 2 Year(s) Total Positions: 9
Program ID: 144-05-21-110

California

La Jolla
Scripps Clinic and Research Foundation Program
Scripps Clinic and Research Foundation
Program Director: Vance D. Rodgers, MD
Dept of Gastroenterology and Hepatology
10565 N Torrey Pines Rd
La Jolla, CA 92037-1083
619 554-8877
Length: 2 Year(s) Total Positions: 6
Program ID: 144-05-21-127

Loma Linda
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Kaiser Foundation Hospital (Fontana)
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Loma Linda University Medical Center
Dept of Medicine
Bloom 1652
Loma Linda, CA 92354
909 354-4846
Length: 2 Year(s) Total Positions: 5
Program ID: 144-05-21-087

Los Angeles
UCLA Medical Center Program*
UCLA School of Medicine
Cedars-Sinai Medical Center
LAC-Olive View Medical Center
Los Angeles County- Harbor-UCLA Medical Center
UCLA Medical Center
Veterans Affairs Medical Center (Sepulveda)
Veterans Affairs Medical Center (West Los Angeles)
Program Director: Andrew Solt, MD
UCLA School of Medicine
1001 D Littke Rd Sprg
Los Angeles, CA 90034-1736
310 826-3187
Length: 2 Year(s) Total Positions: 21
Program ID: 144-05-11-190

University of Southern California Program*
Los Angeles County-USC Medical Center
LAC-Rancho Los Amigos Medical Center
Program Director: Neil Kaplowitz, MD
Div of Gastroenterology & Liver Diseases/Dept of Med
1200 W State St Rm 12-137
Los Angeles, CA 90033
213 236-7994
Length: 2 Year(s) Total Positions: 11
Program ID: 144-05-21-053

Orange
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Veterans Affairs Medical Center (Long Beach)
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Univ of California (Irvine) Department of Medicine/Gastro
C340 Med Sc I
Irvine, CA 92217-4088
714 824-7405
Length: 2 Year(s) Total Positions: 8
Program ID: 144-05-21-151

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Southern California Kaiser Permanente Medical Group
Kaiser Foundation Hospital (Los Angeles)
Program Director: Chris Contessa, MD
Donahue Gerety MD
Kaiser Foundation Hospital
1526 Edgmont St 7th Fl
Los Angeles, CA 90023
213 967-8360
Length: 2 Year(s) Total Positions: 3
Program ID: 144-05-12-097

Sacramento
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University of California (Davis) Medical Center
Kaiser Foundation Hospital (Sacramento)
Program Director: Joseph Leung, MD
University of California (Davis) Medical Center
4901 X St
Sacramento, CA 95817
916 734-3761
Length: 2 Year(s) Total Positions: 9
Program ID: 144-05-21-094

San Diego
Naval Medical Center (San Diego) Program*
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Department of the Navy
Naval Hospital
San Diego, CA 92134-5000
619 592-9275
Length: 2 Year(s) Total Positions: 2
Program ID: 144-05-12-152

University of California (San Diego) Program
University of California (San Diego) Medical Center
Mount Zion Medical Center of the University of California
Veterans Affairs Medical Center (San Diego)
Program Director: Kip D. Lynch, MD
200 W Arbor Dr
San Diego, CA 92103-8413
619 543-3123
Length: 2 Year(s) Total Positions: 9
Program ID: 144-05-21-174

Arkansas

Little Rock
University of Arkansas for Medical Sciences Program
University of Arkansas College of Medicine
John L McClellan Memorial Veterans Hospital
University Hospital of Arkansas
Program Director: Roger Leary, MD
University of Arkansas For Medical Sciences
4901 W Markham Slot 567
Little Rock, AR 72205
501 686-6217
Length: 2 Year(s) Total Positions: 5
Program ID: 144-05-21-111

*Updated information not provided.

412 Graduate Medical Education Directory
San Francisco

California Pacific Medical Center Program
California Pacific Medical Center California Pacific Medical Center (Pacific Campus)

Program Director:
Michael Verhille, MD
California Pacific Med Ctr
2340 Clay St Ste 423
San Francisco, CA 94115
415-202-1580

Length: 2 Year(s) Total Positions: 1
Program ID: 144-08-12-153

University of California (San Francisco) Program*
University of California (San Francisco) School of Medicine
San Francisco General Hospital Medical Center
University of California (San Francisco) Medical Center
Veterans Affairs Medical Center (San Francisco)

Program Director:
Bruce F Schrammott, MD
University of California San Francisco Div of Gastroenterology
Box 0588 1120-HSW
San Francisco, CA 94143-0588
415-476-2776

Length: 2 Year(s) Total Positions: 18
Program ID: 144-08-21-154

Stanford

Stanford University Program*
Stanford University Hospital
Santa Clara Valley Medical Center
Veterans Affairs Medical Center (Palo Alto)

Program Director:
Harry B Greenberg, MD
Stanford University Medical Center
Gastroenterology 3-304
Stanford, CA 94305-0457
415-493-6000

Length: 2 Year(s) Total Positions: 6
Program ID: 144-08-21-022

Connecticut

Bridgetown

Yale University (Bridgetown) Program
Bridgetown Hospital

Program Director:
Thomas A Shaw-Stiffler, MD
Bridgetown Hospital
267 Grant St
Bridgetown, CT 06610-2870
203-284-3175

Length: 2 Year(s) Total Positions: 2
Program ID: 144-08-11-190

Norwalk

Yale University/Norwalk Hospital Program
Norwalk Hospital

Program Director:
Martin H Floch, MD
Norwalk Hospital Dept of Medicine
Maple St
Norwalk, CT 06856
203-832-2586

Length: 2 Year(s) Total Positions: 3
Program ID: 144-08-21-002

District of Columbia

Washington

George Washington University Program
George Washington University School of Medicine
George Washington University Hospital

Program Director:
Hana Proven, MD
George Washington Univ Hosp Div of Gastroenterology
2150 Pennsylvania Ave NW
5-403
Washington, DC 20037
202-941-4115

Length: 2 Year(s) Total Positions: 2
Program ID: 144-10-21-114

Georgetown University Program
Georgetown University Hospital
District of Columbia General Hospital
Veterans Affairs Medical Center (Washington DC)

Program Director:
Stanley B Benjamin, MD
Georgetown Univ Med Ctr Div of Gastroenterology
Main Hospital Ste M222
3800 Reservoir Rd NW
Washington, DC 20007-2197
202-687-9854

Length: 2 Year(s) Total Positions: 10
Program ID: 144-10-21-098

Howard University Program*
Howard University Hospital
District of Columbia General Hospital

Program Director:
Victor F Scott, MD
Howard University Hospital
2041 Georgia Ave NW
Ste SC04
Washington, DC 20060
202-865-6632

Length: 2 Year(s) Total Positions: 4
Program ID: 144-10-21-133

Walter Reed Army Medical Center Program
Walter Reed Army Medical Center

Program Director:
Roy S K Wong, MD
Chief Gastroenterology Service
Walter Reed Army Medical Center
6835 14th St NW
Washington, DC 20307-5001
202-789-7256

Length: 2 Year(s) Total Positions: 6
Program ID: 144-10-11-134

Colorado

Denver

University of Colorado Program
University of Colorado Health Sciences Center
Denver Health and Hospitals
Veterans Affairs Medical Center (Denver)

Program Director:
William T Brown, MD
Univ of Colorado Health Sciences Center Dept of Med
4200 E Ninth Ave
Campus Box B-158
Denver, CO 80262
242-393-6284

Length: 2 Year(s) Total Positions: 8
Program ID: 144-07-21-065

New Haven

Hospital of St Raphael Program
Hospital of St Raphael
Waterbury Hospital Health Center

Program Director:
Richard Ander, MD
Hospital of St Raphael
1450 Chapel St
New Haven, CT 06511
203-788-3262

Length: 2 Year(s) Total Positions: 3
Program ID: 144-08-21-269

Yale-New Haven Medical Center Program
Yale-New Haven Hospital

Program Director:
James E Yager, MD
Yale-New Haven Medical Center Dept of Medicine
PO Box 208919
332 Cedar St
New Haven, CT 06520-8919
203-785-4188

Length: 2 Year(s) Total Positions: 12
Program ID: 144-08-21-023

*Updated information not provided.
Accredited Programs in Gastroenterology (Internal Medicine)

Washington Hospital Center Program
Washington Hospital Center
Program Director: Michael Gold, MD
Frank Kim, MD
Washington Hospital Center
110 Irving St NW
Section of Gastroenterology 3S-1-05
Washington, DC 20010
202-877-7108
Length: 2 Year(s) Total Positions: 3
Program ID: 144-10-21-312

Georgia
Atlanta
Emory University Program
Emory University School of Medicine
Emory University Hospital
Grady Memorial Hospital
Veterans Affairs Medical Center (Atlanticas)
Program Director: Thomas B Boyer, MD
Emory University School of Medicine
Div of Digestive Diseases
PO Drawer AC
Atlanta, GA 30322-3465
404-777-5638
Length: 2 Year(s) Total Positions: 7
Program ID: 144-15-21-136

Florida
Gainesville
University of Florida Program
University of Florida College of Medicine
Shands Hospital at the University of Florida
Veterans Affairs Medical Center (Gainesville)
Program Director: Phillip P Boske, MD
Univ of Florida Dept of Medicine
Box 100277
J Hillis Miller Health Center
Gainesville, FL 32610
904-392-2877
Length: 2 Year(s) Total Positions: 9
Program ID: 144-11-21-039

Jacksonville
University of Florida Health Science Center/Jacksonville Program
University Medical Center (UFHSC)
Program Director: Byron E Kolts, MD
University of Florida Health Science Center/Jacksonville
655 West Eighth St 4th Fl
Jacksonville, FL 32209
904-649-3089
Length: 2 Year(s) Total Positions: 6
Program ID: 144-11-21-024

Miami
University of Miami-Jackson Memorial Medical Center Program
University of Miami-Jackson Memorial Medical Center
Mount Sinai Medical Center of Greater Miami
Veterans Affairs Medical Center (Miami)
Program Director: Martin H Kalser, MD PhD
University of Miami School of Medicine
PO Box 016860 (D-49)
Miami, FL 33014
305-585-3162
Length: 2 Year(s) Total Positions: 12
Program ID: 144-11-21-176

Tampa
University of South Florida Program
University of South Florida College of Medicine
James A Haley Veterans Hospital
Tampa General Healthcare
Program Director: H Jurgen Nord, MD
Univ of South Florida College of Medicine
12001 Bruce B Downs Blvd
MDC Box 18
Tampa, FL 33612-4790
813-974-3904
Length: 2 Year(s) Total Positions: 7
Program ID: 144-11-21-040

Illinois
Chicago
Cook County Hospital Program*
Cook County Hospital
Program Director: Baskar M Attar, MD
Cook County Hospital
2835 W Harrison
Chicago, IL 60612
312-633-7213
Length: 2 Year(s) Total Positions: 6
Program ID: 144-16-12-094

McGaw Medical Center of Northwestern University Program
Northwestern University Medical School
Evaston Hospital
Northwestern Memorial Hospital
Veterans Affairs Lakeside Medical Center (Chicago)
Program Director: Peter J Fahrman, MD
Northwestern University Medical School
747 Passavant Pavilion
303 S Superior St
Chicago, IL 60611
312-928-7280
Length: 2 Year(s) Total Positions: 8
Program ID: 144-16-11-1974

Rush-Presbyterian-St Luke’s Medical Center Program*
Rush-Presbyterian-St Luke’s Medical Center
Program Director: Seifmour M Sabin, MD
Rush-Presbyterian-St Luke’s Medical Center
1725 W Harrison St 204
Chicago, IL 60612
312-924-8910
Length: 2 Year(s) Total Positions: 8
Program ID: 144-16-11-187

University of Illinois College of Medicine at Chicago Program
University of Illinois College of Medicine at Chicago
Michael Reese Hospital and Medical Center
University of Illinois Hospital and Clinics
Veterans Affairs Western Lakeside Medical Center (Chicago)
Program Director: Thomas J Lanyon, MD
University of Illinois at Chicago
Dentist and Liver Diseases
840 S Wood St MC-778
Chicago, IL 60612-7233
312-996-4213
Length: 2 Year(s) Total Positions: 8
Program ID: 144-16-21-138

Maywood
Loyola University Program*
Foster G McGaw Hospital/Loyola University of Chicago
Edward J Hines Jr Veterans Affairs Hospital
Program Director: Martin G Durkin, MD
10 S Bdg 117
2150 S First Ave
Maywood, IL 60153
708-214-3307
Length: 2 Year(s) Total Positions: 13
Program ID: 144-16-12-004

North Chicago
Finch University of Health Sciences/Chicago Medical School Program
Finch University of Health Sciences/Chicago Medical School
Mount Sinai Hospital Medical Center of Chicago
Thorek Hospital and Medical Center
Veterans Affairs Medical Center (North Chicago)
Program Director: James B Hammond, MD
Univ of Hlth Sci/The Chicago Med Sci
Dep of Medicine
3333 Green Bay Rd
North Chicago, IL 60064-3095
708-578-3365
Length: 2 Year(s) Total Positions: 9
Program ID: 144-16-21-044

Park Ridge
University of Chicago (Park Ridge) Program
Lutheran General Hospital
Program Director: Hyrie Karrn, MD
Lutheran General Hospital
1775 Dempster St
Park Ridge, IL 60068-1174
708-686-8061
Length: 2 Year(s) Total Positions: 4
Program ID: 144-16-21-214

Springfield
Southern Illinois University Program
Southern Illinois University School of Medicine
Memorial Medical Center
St John’s Hospital
Program Director: Peter J Karras, MD
Memorial Medical Center
800 N Rutledge
Springfield, IL 62708
217-796-9173
Length: 2 Year(s) Total Positions: 4
Program ID: 144-16-21-208

* Updated information not provided.
Indiana
Indianapolis
Indiana University Medical Center Program
Indiana University Medical Center
Program Director: Lawrence Lunsford, MD
Indiana University Medical Center, Dept of Medicine
Med Res Library Bldg 434
975 W Walnut St
Indianapolis, IN 46202-5121
317-274-3505
Length: 2 Year(s) Total Positions: 11
Program ID: 144-17-21-156

Iowa
Iowa City
University of Iowa Hospitals and Clinics Program
University of Iowa Hospitals and Clinics
Program Director: Joel Weinstock, MD
University of Iowa Hospitals and Clinics
Dept of Internal Medicine
Iowa City, IA 52242-1009
319-356-3127
Length: 2 Year(s) Total Positions: 12
Program ID: 144-18-21-195

Kansas
Kansas City
University of Kansas Medical Center Program
University of Kansas School of Medicine
University of Kansas Medical Center
Program Director: Philip K Miner Jr, MD
University of Kansas Medical Center
Gastroenterology Div
3901 Rainbow Blvd
Kansas City, KS 66235-7360
913-588-6003
Length: 2 Year(s) Total Positions: 6
Program ID: 144-19-21-115

Kentucky
Lexington
University of Kentucky Medical Center Program
University of Kentucky Hospital- Albert B Chandler Medical Center
Veterans Affairs Medical Center (Lexington)
Program Director: Nicholas Nickel, MD
University Hospital Albert B Chandler Medical Center
Dept of Gastro and Nutrition
800 Rose St. M40 254
Lexington, KY 40536-0054
606-323-5375
Length: 2 Year(s) Total Positions: 6
Program ID: 144-20-21-177

Louisiana
New Orleans
Alton Ochsner Medical Foundation Program
Alton Ochsner Medical Foundation
Program Director: Robert P Perrillo, MD
Alton Ochsner Medical Foundation
Dept of Gastroenterology
1516 Jefferson Hwy
New Orleans, LA 70121
504-950-6451
Length: 2 Year(s) Total Positions: 5
Program ID: 144-21-21-119

Louisiana State University Program
Louisiana State University School of Medicine
Medical Center of Louisiana at New Orleans-LSU Division
Medical Center of Louisiana University Hospital Campus
Southern Baptist Hospital
Program Director: Fred M Hunter, MD
Louisiana State Medical Center
1542 Tulane Ave
New Orleans, LA 70112
504-568-8841
Length: 2 Year(s) Total Positions: 5
Program ID: 144-22-21-119

Tulane University Program
Tulane University School of Medicine
Medical Center of Louisiana at New Orleans-Tulane Division
Tulane University Hospital and Clinics
Veterans Affairs Medical Center-Tulane Service (New Orleans)
Program Director: Roy C Orlando, MD
Tulane University Medical School
Gastroenterology & Hepatology SL35
1430 Tulane Ave
New Orleans, LA 70112-2699
504-568-5529
Length: 2 Year(s) Total Positions: 7
Program ID: 144-22-21-188

Baltimore
Johns Hopkins University Bayview Medical Center Program
Johns Hopkins University School of Medicine
Johns Hopkins Bayview Medical Center
Program Director: Martin S Schuster, MD
Francis Scott Key Medical Center
6940 Eastern Ave
Baltimore, MD 21224
410-550-0780
Length: 2 Year(s) Total Positions: 4
Program ID: 144-23-11-140

Johns Hopkins University Program
Johns Hopkins University School of Medicine
Johns Hopkins Hospital
Program Director: Mark Donowitz, MD
Johns Hopkins University
Dept of Medicine
Baltimore, MD 21205
301-555-9975
Length: 2 Year(s) Total Positions: 6
Program ID: 144-23-11-075

University of Maryland Program
University of Maryland Medical System
Program Director: Stephen P James, MD
University of Maryland System
25 St Greene St. Br 8N362
Baltimore, MD 21201
410-328-8758
Length: 2 Year(s) Total Positions: 9
Program ID: 144-23-21-104

Bethesda
National Naval Medical Center (Bethesda) Program
National Naval Medical Center (Bethesda)
Program Director: Dan M Jones, MD
National Naval Medical Center
Div. of Gastroenterology
Bethesda, MD 20889-5600
301-265-2387
Length: 2 Year(s) Total Positions: 4
Program ID: 144-23-11-156

Massachusetts
Boston
Beth Israel Hospital Program
Beth Israel Hospital
Program Director: Raj K Goyal, MD
Beth Israel Hospital
330 Brookline Ave
Boston, MA 02215
617-735-2190
Length: 2 Year(s) Total Positions: 5
Program ID: 144-24-21-006
<table>
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<tr>
<th>Institution Name</th>
<th>Program Name</th>
<th>Program Description</th>
<th>Program Director</th>
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<td>Boston University School of Medicine</td>
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<td>58 Francis St</td>
<td>Boston, MA 02118</td>
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<td>University of Minnesota Program</td>
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<td>Program ID: 144-25-21-117</td>
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* Updated information not provided.
Rochester
Mayo Graduate School of Medicine Program
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Rochester)
Rochester Methodist Hospital
St Mary’s Hospital of Rochester
Program Director:
Randall K Pearson, MD
MGSM Application Processing Ctr
Siebens 5th Fl
Mayo Graduate Schl of Med
Rochester, MN 55905
652-284-3126
Length: 2 Year(s) Total Positions: 30
Program ID: 144-36-21-858

Mississippi
Jackson
University of Mississippi Medical Center Program
University of Mississippi School of Medicine
University Hospital
Veterans Affairs Medical Center (Jackson)
Program Director:
James L. Ashford, MD
University Mississippi Medical Center
3500 N State St
Jackson, MS 39216
661-984-4540
Length: 2 Year(s) Total Positions: 4
Program ID: 144-27-21-079

Missouri
Columbia
University of Missouri-Columbia Program
University of Missouri-Columbia School of Medicine
Harry S Truman Memorial Veterans Hospital
University and Children’s Hospital
Program Director:
Pete D King, MD
MA 421 Health Sciences Center
University of Missouri Hospital
Columbia, MO 65212
314-882-1013
Length: 2 Year(s) Total Positions: 6
Program ID: 144-28-21-080

Kansas City
University of Missouri at Kansas City Program
University of Missouri-Kansas City School of Medicine
Truman Medical Center-West
Program Director:
Stella G Quintero, MD
University of Missouri
2411 Holmes St
Kansas City, MO 64108
816-268-1890
Length: 2 Year(s) Total Positions: 2
Program ID: 144-28-31-115

St Louis
Barnes Hospital Group Program
Barnes Hospital
Program Director:
David H Alpers, MD
Gastroenterology Div
Washington Univ Dept of Medicine
660 S Euclid Box 8124
St Louis, MO 63110
314-362-8640
Length: 2 Year(s) Total Positions: 15
Program ID: 144-28-21-158

St Louis University Group of Hospitals Program
St Louis University School of Medicine
St Louis University Hospital
St Mary’s Health Center
Veterans Affairs Medical Center (St Louis)
Program Director:
Bruce R Bacon, MD
St Louis Univ School of Medicine
3655 Vista Ave at Grand Blvd
PO Box 19350
St Louis, MO 63110-0250
314-577-8764
Length: 2 Year(s) Total Positions: 12
Program ID: 144-28-21-182

Nebraska
Omaha
University of Nebraska Program
University of Nebraska Medical Center
Veterans Affairs Medical Center (Omaha)
Program Director:
Evanoff M Quigley, MD
Section of Gastroenterology and Hepatology
Univ of Nebraska Med Ctr
660 S 42nd St
Omaha, NE 68198-3000
402-559-8065
Length: 2 Year(s) Total Positions: 4
Program ID: 144-30-21-160

New Hampshire
Lebanon
Dartmouth-Hitchcock Medical Center Program
Mary Hitchcock Memorial Hospital
Veterans Affairs Medical Center (White River Junction)
Program Director:
Jack L McCreary, MD
Dartmouth-Hitchcock Medical Center
One Medical Center Dr
Lebanon, NH 03756-6001
603-656-5261
Length: 2 Year(s) Total Positions: 3
Program ID: 144-32-21-190

New Jersey
Camden
UMDNJ-Robert Wood Johnson Medical School (Camden) Program
Cooper Hospital-University Medical Center
Program Director:
Steven R Kelk, MD
402 Haddon Ave
Camden, NJ 08103
609-767-7732
Length: 2 Year(s) Total Positions: 3
Program ID: 144-33-21-050

Newark
UMDNJ-New Jersey Medical School Program
UMDNJ-New Jersey Medical School
Dept of Veterans Affairs Medical Center (East Orange)
UMDNJ-University Hospital
Program Director:
Bruce W Trotman, MD
UMDNJ-New Jersey Medical School
185 S Orange Ave
MSB H538
Newark, NJ 07103-2714
201-699-0592
Length: 2 Year(s) Total Positions: 11
Program ID: 144-33-21-200

Piscataway
UMDNJ-Robert Wood Johnson Medical School Program
UMDNJ-Robert Wood Johnson Medical School
Veterans Affairs Medical Center (Lapus)
Program Director:
Kiron M Das, MD, PhD
UMDNJ-Robert Wood Johnson Medical School
Dept of Medicine
One Robert Johnson Pl CN 19
New Brunswick, NJ 08903-0019
908-235-7784
Length: 2 Year(s) Total Positions: 4
Program ID: 144-33-21-426

South Orange
Seton Hall University School of Graduate Medical Education (Jersey City) Program
Seton Hall University School of Graduate Medical Education
Jersey City Medical Center
UMDNJ-Robert Wood Johnson Medical School
Program Director:
Sita Chakravarttia, MD
Jersey City Medical Center
50 Baldwin Ave Rm 221
Jersey City, NJ 07304
201-916-3435
Length: 2 Year(s) Total Positions: 3
Program ID: 144-33-21-185

Seton Hall University School of Graduate Medical Education Program
Seton Hall University School of Graduate Medical Education
St Joseph’s Hospital and Medical Center
Program Director:
Wald Baddoura, MD
St Joseph’s Hospital and Medical Center
701 Main St
Passaic, NJ 07055
201-977-2421
Length: 2 Year(s) Total Positions: 7
Program ID: 144-33-21-051

* Updated information not provided.

Graduate Medical Education Directory 417
New Mexico
Albuquerque
University of New Mexico Program
University of New Mexico School of Medicine
Lovelace Medical Center
University Hospital
Veterans Affairs Medical Center (Albuquerque)
Program Director:
Denis M McCarthy, MD
Univ of New Mexico School of Medicine
Dept of Medicine/G1
2211 Lomas NE ACC-B
Albuquerque, NM 87131-0371
505 272-4755
Length: 2 Year(s)  Total Positions: 4
Program ID: 144-35-61-143

New York
Albany
Albany Medical Center Program
Albany Medical Center Hospital
Program Director:
John B Rodgers, MD
Albany Medical College Dept of Medicine A-48
47 New Scotland Ave
Albany, NY 12208-3479
518 262-5276
Length: 2 Year(s)  Total Positions: 4
Program ID: 144-35-61-627

Bronx
Albert Einstein College of Medicine Program
Albert Einstein College of Medicine of Yeshiva University
Bronx Municipal Hospital Center
Montefiore Medical Center-Henry and Lucy Moses Division
Program Director:
Leslie H Bernstein, MD
Div of Gastroenterology
Montefiore Medical Center
111 E 210th St
Bronx, NY 10467
718 606-4846
Length: 2 Year(s)  Total Positions: 10
Program ID: 144-35-61-102

Bronx-Lebanon Hospital Center Program
Bronx-Lebanon Hospital Center
Program Director:
Alan A Bloom, MD
Bronx-Lebanon Hospital Center
1659 Grand Concourse
Bronx, NY 10467
718 615-5550
Length: 2 Year(s)  Total Positions: 6
Program ID: 144-35-11-103

Brooklyn
Brooklyn Hospital Center Program
Brooklyn Hospital Center
Program Director:
Maurice A Struill, MD
Brooklyn Hospital Center
121 DeKalb Ave
Brooklyn, NY 11201
718 780-6946
Length: 2 Year(s)  Total Positions: 4
Program ID: 144-35-12-185

Interfaith Medical Center Program
Interfaith Medical Center
Program Director:
Franklin Marsh Jr, MD
Interfaith Medical Center
555 Prospect Pl
Brooklyn, NY 11238
718 385-7205
Length: 2 Year(s)  Total Positions: 3
Program ID: 144-35-21-366

Long Island College Hospital Program
Long Island College Hospital
Woodhull Medical and Mental Health Center
Program Director:
Irwin M Grossman, MD
Long Island College Hospital
840 Henry St
Brooklyn, NY 11201
718 788-1798
Length: 2 Year(s)  Total Positions: 5
Program ID: 144-35-11-689

Maimonides Medical Center Program
Maimonides Medical Center
Program Director:
Eliot H Zimbalist, MD
Maimonides Medical Center
4802 Tenth Ave
Brooklyn, NY 11210
718 285-7476
Length: 2 Year(s)  Total Positions: 4
Program ID: 144-35-11-162

SUNY Health Science Center at Brooklyn Program
SUNY HSC at Brooklyn College of Medicine
Brooklyn Hospital Medical Center
Kings County Hospital Center
Saten Island University Hospital
University Hospital-SUNY Health Science Center at Brooklyn
Veterans Affairs Medical Center (Brooklyn)
Program Director:
Eugene W Strauss, MD
SUNY Downstate Medical Center
450 Clarkson Ave
Brooklyn, NY 11203
718 270-3446
Length: 2 Year(s)  Program ID: 144-35-21-011

Buffalo
SUNY at Buffalo Graduate Medical-Dental Education Consortium Program
SUNY at Buffalo Grad Medical-Dental Education Consortium
Buffalo General Hospital
Erie County Medical Center
Roswell Park Cancer Institute
Veterans Affairs Medical Center (Buffalo)
Program Director:
M Peter Lance, MD FRCP
Buffalo General Hospital
960 Egs-3
100 High St
Buffalo, NY 14203
716 845-2568
Length: 2 Year(s)  Total Positions: 6
Program ID: 144-35-31-009

East Meadow
SUNY at Stony Brook (East Meadow) Program
Nassau County Medical Center
Program Director:
Crescens P Pelechich, MD
Nassau County Medical Center
Div of Gastroenterology
1501 Hempstead Tpke
East Meadow, NY 11554-5400
516 672-4073
Length: 2 Year(s)  Total Positions: 4
Program ID: 144-35-21-090

Flushing
New York Hospital Medical Center of Queens Program
New York Hospital Medical Center of Queens
North Shore University Hospital
Program Director:
George T Martin, MD
The New York Hosp Med Ctr of Queens
56-45 Main St
Flushing, NY 11356-2966
718 670-1070
Length: 2 Year(s)  Total Positions: 4
Program ID: 144-35-11-901

Jamaica
Catholic Medical Center of Brooklyn and Queens Program
Catholic Medical Center of Brooklyn and Queens Inc
Catholic Medical Center (Mary Immaculate Hospital)
Catholic Medical Center (St. John's Queens Hospital)
Program Director:
Philip A Lo Presti, MD
Catholic Medical Center
88-25 155th St
Jamaica, NY 11432
718 331-5300
Length: 2 Year(s)  Total Positions: 5
Program ID: 144-35-22-652

Manhattan
North Shore University Hospital Program
North Shore University Hospital
Program Director:
Matthew J McKinley, MD
North Shore University Hospital
Dept of Medicine
Manhattan, NY 11020
516 562-4281
Length: 2 Year(s)  Total Positions: 3
Program ID: 144-35-21-170

Mineola
Winthrop-University Hospital Program
Winthrop-University Hospital
Program Director:
Robert Barakoff, MD
Div of Gastroenterology
221 Station Plaza N Ste 429
Mineola, NY 11501
516 663-2827
Length: 2 Year(s)  Total Positions: 4
Program ID: 144-35-11-109

* Updated information not provided.
New Hyde Park
Albert Einstein College of Medicine at Long Island Jewish Medical Center Program
Long Island Jewish Medical Center
Queens Hospital Center
Program Director: Simmy Bank, MD
Long Island Jewish Medical Center
270-85 76th Ave
New Hyde Park, NY 11040
718-470-4692
Length: 2 Year(s) Total Positions: 5
Program ID: 144-36-21-144

New York
Albert Einstein College of Medicine at Beth Israel Medical Center Program
Beth Israel Medical Center
Program Director: Alvin Gelb, MD
Beth Israel Medical Center
First Ave at 16th St
Dept of Gastroenterology
New York, NY (10007)
212-632-4015
Length: 2 Year(s) Total Positions: 6
Program ID: 144-36-11-010

Harlem Hospital Center Program
Harlem Hospital Center
Program Director: Lisa A Oudot, MD
Harlem Hospital Center
506 Lenox Ave
New York, NY (10037)
212-639-1850
Length: 2 Year(s) Total Positions: 3
Program ID: 144-36-11-172

Lenox Hill Hospital Program
Lenox Hill Hospital
Program Director: Burton I Kreisman, MD
Lenox Hill Hospital
100 E 77th St
New York, NY (10021-1893)
212-582-2145
Length: 2 Year(s) Total Positions: 4
Program ID: 144-36-11-194

Mount Sinai School of Medicine (Elmhurst) Program
Mount Sinai School of Medicine
Elmhurst Hospital Center-Mount Sinai Services
Mount Sinai Medical Center
Program Director: Pradnyana B Dave, MD
Elmhurst Hospital Center
Dept of Internal Medicine
70-00 Broadway
Elmhurst, NY 11373
718-264-2533
Length: 2 Year(s) Total Positions: 3
Program ID: 144-36-11-119

Mount Sinai School of Medicine Program*
Mount Sinai School of Medicine
Elmhurst Hospital Center-Mount Sinai Services
Mount Sinai Medical Center
Program Director: David B Soschak, MD
Mount Sinai Hospital
One Gustave L Levy Pl
Annenberg 23-02 Box 1660
New York, NY (10029-6764)
212-241-6748
Length: 2 Year(s) Total Positions: 14
Program ID: 144-35-31-163

New York Hospital/Cornell Medical Center Program 1*
New York Hospital
New York Methodist Hospital
Program Director: Basil Rigas, MD
New York Hospital
516 E 68th St
New York, NY (10021)
212-746-4400
Length: 2 Year(s) Total Positions: 4
Program ID: 144-35-31-171

New York Hospital/Cornell Medical Center Program 2*
Memorial Sloan-Kettering Cancer Center Program
Program Director: Robert C Kufe, MD
Memorial Sloan-Kettering Cancer Center
1275 York Ave
New York, NY (10021)
212-683-3620
Length: 2 Year(s) Total Positions: 4
Program ID: 144-35-21-179

New York University Medical Center Program
New York University Medical Center
Belfer Hospital Center
Veterans Affairs Medical Center (Manhattan)
Program Director: Arthur Lindner, MD
New York University Medical Center
550 First Ave
New York, NY (10016)
212-263-3574
Length: 2 Year(s) Total Positions: 6
Program ID: 144-35-31-120

Presbyterian Hospital in the City of New York Program*
Presbyterian Hospital in the City of New York
Program Director: Michael Feld, MD
Presbyterian Hospital in the City of New York
622 N 188th St
New York, NY (10023)
212-306-6156
Length: 2 Year(s) Total Positions: 8
Program ID: 144-35-31-070

St Luke’s-Roosevelt Hospital Center (St Luke’s) Program
St Luke’s-Roosevelt Hospital Center
St Luke’s-Roosevelt Hospital Center-St Luke’s Division
Program Director: Peter E Bell, MD
St Luke’s Hospital Center
1111 Amsterdam Ave
New York, NY (10025)
212-533-3680
Length: 2 Year(s) Total Positions: 5
Program ID: 144-35-31-185

Rochester
University of Rochester Program*
Strong Memorial Hospital of the University of Rochester
Geneseo Hospital
St Mary’s Hospital
Program Director: William Chey, MD
Strong Memorial Hospital
601 Elmwood Ave
PO Box 762
Rochester, NY (14642)
716-270-3044
Length: 2 Year(s) Total Positions: 5
Program ID: 144-35-21-250

Stony Brook
SUNY at Stony Brook Program
University Hospital-SUNY at Stony Brook
Veterans Affairs Medical Center (Northport)
Program Director: Gerald V Baksar, MD
Douglas Brasl, MD
81st Science Center
Dept of Medicine
T17 800
Stony Brook, NY (11794-8773)
516-444-2122
Length: 2 Year(s) Total Positions: 6
Program ID: 144-35-21-012

Syracuse
SUNY Health Science Center at Syracuse Program
University Hospital-SUNY Health Science Center at Syracuse
Veterans Affairs Medical Center (Syracuse)
Program Director: Philip G Holszapple, MD
Dept of Medicine
SUNY Health Science Center
760 E Adams St
Syracuse, NY (13210)
315-454-5684
Length: 2 Year(s) Total Positions: 3
Program ID: 144-35-21-106

Valhalla
New York Medical College (Cabrini) Program
New York Medical College
Cabrini Medical Center
Program Director: Gerald Salen, MD
Cabrini Medical Center
227 E 1st St
New York, NY (10003)
212-996-9504
Length: 2 Year(s) Total Positions: 2
Program ID: 144-35-31-098

New York Medical College (Our Lady of Mercy) Program
New York Medical College
Our Lady of Mercy Medical Center
Program Director: CS Pitchumoni, MD
Our Lady of Mercy Medical Center
Dept of Medicine
660 E 233rd St
Bronx, NY (10469)
718-930-9662
Length: 2 Year(s) Total Positions: 3
Program ID: 144-35-21-043

* Updated information not provided.
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<td>212.504.9335</td>
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<td>45267-0595</td>
<td>513.558.5744</td>
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<td>27514</td>
<td>919.966.7211</td>
<td>2 year(s)</td>
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<td>27710</td>
<td>919.916.0056</td>
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<td>East Carolina University Program*</td>
<td>East Carolina University School of Medicine</td>
<td>Pitt County Memorial Hospital</td>
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<td>27858-4354</td>
<td>212.355.4642</td>
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Oregon

Portland
Oregon Health Sciences University Program
Oregon Health Sciences University Hospital Veterans Affairs Medical Center (Portland)
Program Director: Clifford S. McNeil, MD
Oregon Health Sciences University Div of Gastroenterology PV-316
Portland, OR 97201-3088
503-494-8077
Length: 2 Year(s) Total Positions: 5
Program ID: 144-40-51-167

Pennsylvania

Danville
Geisinger Medical Center Program
Geisinger Medical Center
Program Director: Dale H. Wysock, MD
Geisinger Medical Center
Dept of Gastroenterology
100 W Academy Ave
Danville, PA 17821-1401
717 271-8465
Length: 2 Year(s) Total Positions: 2
Program ID: 144-41-21-2111

Hershey
Milton S Hershey Medical Center of Pennsylvania State University Program
Penn State University Hospital Milton S Hershey Med Ctr
Program Director: Ann Ong, MD
Milton S Hershey Medical Center of the Penn State Univ Gastroenterology Div Rm C-5060
P.O. Box 850
Hershey, PA 17033-0750
717 531-8261
Length: 2 Year(s) Total Positions: 6
Program ID: 144-41-21-1015

Philadelphia

Albert Einstein Medical Center Program
Albert Einstein Medical Center
Program Director: Gary M Levine, MD
Albert Einstein Medical Center
Div of Gastroenterology
5401 Old York Rd Klein Ste 350
Philadelphia, PA 19141
215 456-8210
Length: 2 Year(s) Total Positions: 3
Program ID: 144-41-21-3118

Graduate Hospital Program
Graduate Hospital Program
Program Director: David A Katzka, MD
Graduate Hospital
1801 Lombard St
Ste 100 Pepper Pavilion
Philadelphia, PA 19146
215 949-2955
Length: 2 Year(s) Total Positions: 6
Program ID: 144-41-11-187

MCPHU/Hahnemann University Hospital Program
Hahnemann University Hospital Crozer-Keystone Medical Center
Program Director: Harris R Cleaves, MD
Hahnemann University Hospital
Broad & Vine Sts
Mail Stop 151
Philadelphia, PA 19102
215 563-6100
Length: 2 Year(s) Total Positions: 3
Program ID: 144-41-21-1659

MCPHU/Medical College of Pennsylvania Hospital Program
Medical College of Pennsylvania Hospital
Program Director: Walter Rubin, MD
Medical College of Pennsylvania Hospital
3600 Henry Ave
Philadelphia, PA 19129
215 842-6050
Length: 2 Year(s) Total Positions: 4
Program ID: 144-41-21-122

Presbyterian Medical Center of Philadelphia Program
Presbyterian Medical Center of Philadelphia
Program Director: Anthony J DiMarino Jr, MD
Presbyterian Medical Center of Philadelphia
36th & Market Sts Ste W218
Philadelphia, PA 19104
215 662-5800
Length: 2 Year(s) Total Positions: 6
Program ID: 144-41-21-121

Temple University Program
Temple University Hospital
Albert Einstein Medical Center
Program Director: Robert S Fisher, MD
Temple University Hospital Department of Medicine
50 N Broad St
Philadelphia, PA 19140
215 707-3496
Length: 2 Year(s) Total Positions: 9
Program ID: 144-41-21-143

Thomas Jefferson University Program
Thomas Jefferson University Hospital
Program Director: Raymond A Rubin, MD
Jefferson Medical College
102 S Broad St
Ste 600 Main Bldg
Philadelphia, PA 19107-5244
215 865-6849
Length: 2 Year(s) Total Positions: 6
Program ID: 144-41-21-143

University of Pennsylvania Program
Hospital of the University of Pennsylvania
Program Director: Peter G Trabe, MD
Ste 600 CRB
422 Curie Blvd
Philadelphia, PA 19104-6144
215 662-3543
Length: 2 Year(s) Total Positions: 6
Program ID: 144-41-21-021

Pittsburgh

MCPHU/Allegheny General Hospital Program
Allegheny General Hospital
Program Director: Rad M Agawal, MD
Div of Gastroenterology
Allegheny General Hospital
320 5 North Ave
Pittsburgh, PA 15212-4772
412 353-3846
Length: 2 Year(s) Total Positions: 9
Program ID: 144-41-11-1445

Shadyside Hospital Program
Shadyside Hospital
Program Director: Farhad Ismaili-Beigi, MD
Shadyside Hospital
5200 Centre Ave
Pittsburgh, PA 15232
412 525-2396
Length: 2 Year(s) Total Positions: 2
Program ID: 144-41-22-0315

University Health Center of Pittsburgh Program
University Health Center of Pittsburgh Montefiore University Hospital (UMFC)
Pittsburgh-University Hospital/UPMC
Veterans Affairs Medical Center (Pittsburgh)
Program Director: James C Reynolds, MD
Pittsburgh University Hospital
200 Lothrop St
Seminole Level C-Wing
Pittsburgh, PA 15213-0562
412 668-0115
Length: 2 Year(s) Total Positions: 16
Program ID: 144-41-21-067

Western Pennsylvania Hospital Program
Western Pennsylvania Hospital
Program Director: Peter J Maloy, MD
Western Pennsylvania Hospital
Dept of Medicine
4800 Friendship Ave
Pittsburgh, PA 15224
412 578-5750
Length: 2 Year(s) Total Positions: 4
Program ID: 144-41-11-046

Sayre

Guthrie Healthcare System Program
Robert Packer Hospital
Program Director: Joseph A Scopelliti, MD
Guthrie Healthcare System
Guthrie Sq
Sayre, PA 18840-1098
717 888-6666
Length: 2 Year(s) Total Positions: 4
Program ID: 144-41-12-108

* Updated information not provided.

Graduate Medical Education Directory
Wynewood
Lankenau Hospital Program*
Lankenau Hospital
Program Director:
James J Thornton, MD
Lankenau Hospital
Dept of Medicine 114
100 Lancaster Ave W of City Line
Wynewood, PA 19065
215 886-7360
Length: 2 Year(s)  Total Positions: 2
Program ID: 144-41-11-032

Puerto Rico

Ponce
Hospital de Damas Program
Hospital de Damas
Ponce Regional Hospital
Program Director:
Alvan Rojas, MD
Ponce, PR 00991
809 748-5005
Length: 2 Year(s)  Total Positions: 2
Program ID: 144-42-21-206

San Juan
University of Puerto Rico Program
University of Puerto Rico School of Medicine
San Juan City Hospital
University Hospital
Veterans Affairs Medical Center (San Juan)
Program Director:
Gilbert Torres, MD
University Hospital Puerto Rico Medical Center
Box 5067
San Juan, PR 00936
809 751-3961
Length: 2 Year(s)  Total Positions: 6
Program ID: 144-42-21-104

Rhode Island

Providence
Brown University Program
Rhode Island Hospital
Roger Williams Medical Center
Veterans Affairs Medical Center (Providence)
Program Director:
Walter T Thayer, MD
Rhode Island Hospital
582 Eddy St
Providence, RI 02903
401 444-5091
Length: 2 Year(s)  Total Positions: 6
Program ID: 144-42-11-125

South Carolina

Charleston
Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
MUSC Medical Center
Veterans Affairs Medical Center (Charleston)
Program Director:
Peter B Cotton, MD FACP
Div of Gastroenterology 916 CSB
Med Univ of South Carolina
171 Ashley Ave
Charleston, SC 29425
803 796-2901
Length: 2 Year(s)  Total Positions: 6
Program ID: 144-44-21-107

Texas

Dallas
Baylor University Medical Center Program
Baylor University Medical Center
Program Director:
Daniel B Paller, MD
Baylor University Medical Center
3500 Gaston Ave
Dallas, TX 75246
214 626-2232
Length: 2 Year(s)  Total Positions: 4
Program ID: 144-44-81-148

University of Texas Southwestern Medical School Program
University of Texas Southwestern Medical School
Dallas County Hospital District Parkland Memorial Hospital
Veterans Affairs Medical Center (Dallas)
Program Director:
Walter L Peterson, MD
University of Texas Southwestern Medical Center
5323 Harry Hines Blvd
Dallas, TX 75355-8857
214 353-6441
Length: 2 Year(s)  Total Positions: 8
Program ID: 144-44-81-100

Fort Sam Houston
Brooke Army Medical Center Program
Brooke Army Medical Center
Program Director:
Shahlees C Kadakia, MBBS MD
Gastroenterology Service
Dept of Medicine
Brooke Army Medical Center
Fort Sam Houston, TX 78234-0200
210 922-6578
Length: 2 Year(s)  Total Positions: 5
Program ID: 144-44-81-147

Galveston
University of Texas Medical Branch Hospitals Program
University of Texas Medical Branch Hospitals
Program Director:
Roger D Sokolowsky, MD
4106 John Mc Callough Blvd G04
University of Texas Medical Branch
Galveston, TX 77555-0784
409 772-1501
Length: 2 Year(s)  Total Positions: 7
Program ID: 144-44-81-062

* Updated information not provided.
Houston

Baylor College of Medicine Program
Baylor College of Medicine
Harris County Hospital District-Ben Taub General Hospital
Methodist Hospital
Veterans Affairs Medical Center (Houston)

Program Director:
David J. Graham, MD
Dept of Med GI
6550 Fannin Ste 1122
Houston, TX 77030
713 796-6329
Length: 2 Year(s) Total Positions: 9
Program ID: 144-48-21-995

University of Texas at Houston Program
University of Texas Medical School at Houston
Hermann Hospital
Lyndon B Johnson General Hospital
University of Texas M D Anderson Cancer Center

Program Director:
Joseph H. Stilin, MD
Univ of Texas Medical School Dept of Medicine
PO Box 20768
Houston, TX 77025
713 796-3422
Length: 2 Year(s) Total Positions: 8
Program ID: 144-48-31-167

Lackland AFB

Wilford Hall USAF Medical Center Program
Wilford Hall USAF Medical Center (SG)

Program Director:
Clintin D Polhaus, MD
590th Medical Wing/PSMG
Attn: Colonel Polhaus
2290 Bergquist Dr Ste 1
Lackland AFB, TX 78255-5300
512 670-6479
Length: 2 Year(s) Total Positions: 6
Program ID: 144-48-12-063

Lubbock

Texas Tech University (Lubbock) Program
Texas Tech University Health Sciences Center at Lubbock
Medical University Center

Program Director:
Bargen A Joveros, MD MPH
Texas Tech University Health Sciences Center
3001 4th St
Div of Gastroenterology
Lubbock, TX 79430
806 743-3120
Length: 2 Year(s) Total Positions: 4
Program ID: 144-48-21-195

San Antonio

University of Texas Health Science Center at San Antonio Program
University of Texas Medical School at San Antonio Audie L Murphy Memorial Veterans Hospital (San Antonio)
University Hospital South Texas Medical Center

Program Director:
Steven Schenker, MD
University of Texas Health Science Center
Div of Gastroenterology & Nutrition
7803 Floyd Curl Dr
San Antonio, TX 78284-7878
210 587-4890
Length: 2 Year(s) Total Positions: 4
Program ID: 144-48-21-072

Temple

Texas A&M College of Medicine-Scott and White Program
Scott and White Memorial Hospital

Program Director:
Walter P. Dyck, MD
Texas A&M College of Medicine-Scott and White
Div of Gastroenterology
2401 S 35th St
Temple, TX 76508
903 224-2237
Length: 2 Year(s) Total Positions: 6
Program ID: 144-49-21-108

Utah

Salt Lake City

University of Utah Program
University of Utah Medical Center
Veterans Affairs Medical Center (Salt Lake City)

Program Director:
Keith O Tolman, MD
University of Utah Medical Center
99 N Medical Dr
Salt Lake City, UT 84132
801 581-7892
Length: 2 Year(s) Total Positions: 8
Program ID: 144-49-21-166

Vermont

Burlington

Medical Center Hospital of Vermont Program
Medical Center Hospital of Vermont

Program Director:
Edward L. Krawitz, MD
University of Vermont College of Medicine
Dept of Medicine
Givin Med Bldg C317
Burlington, VT 05405-0068
020 658-3554
Length: 2 Year(s) Total Positions: 2
Program ID: 144-50-21-109

Virginia

Charlottesville

University of Virginia Program
University of Virginia Medical Center
Veterans Affairs Medical Center (Salem)

Program Director:
Richard W McCallum, MD
Sidney Barritt, MD
University of Virginia Hospitals Dept of Medicine
Box 145
Charlottesville, VA 22908
804 982-8602
Length: 2 Year(s) Total Positions: 12
Program ID: 144-61-21-819

Portsmouth

Naval Medical Center (Portsmouth) Program
Naval Medical Center (Portsmouth)

Program Director:
J Mark Lawson, MD
Naval Hospital
Div of Gastroenterology
11th Fl
Portsmouth, VA 23708-5640
804 398-9271
Length: 2 Year(s)
Program ID: 144-51-11-204

Richmond

Medical College of Virginia/Virginia Commonwealth University Program*
Medical College of Virginia/Virginia Commonwealth University
Medical College of Virginia Hospitals

Program Director:
2 Beno Yudice, MD
1801 Virginia Commonwealth Univ
PO Box 846711
Richmond, VA 23288-0711
804 786-5850
Length: 2 Year(s)
Program ID: 144-61-21-120

Washington

Seattle

University of Washington Program
University of Washington School of Medicine
University of Washington Medical Center

Program Director:
David R Stains, MD
University Hospital
1909 NE Pacific St
Seattle, WA 98195
206 543-3666
Length: 2 Year(s) Total Positions: 9
Program ID: 144-61-21-894

West Virginia

Morgantown

West Virginia University Program
West Virginia University Hospitals

Program Director:
Ronald D Daskas, MD
Robert C Byrd Health Science Center of West Virginia Univ
Dept of Internal Medicine
PO Box 9161
 Morgantown, WV 26506-9161
304 293-4123
Length: 2 Year(s) Total Positions: 2
Program ID: 144-66-11-101

* Updated information not provided.
Wisconsin
Madison
University of Wisconsin Program
University of Wisconsin Hospital and Clinics
William J. Middleton Veterans Hospital
Program Director:
Ward A. Olsen, MD
University of Wisconsin Hospital and Clinics
601 Highland Ave RM 1H6/116
Madison, WI 53792-5124
608 262-7321
Length: 2 Year(s)  Total Positions: 5
Program ID: 144-66-21-138

Milwaukee
Medical College of Wisconsin Program
Medical College of Wisconsin Affiliated Hospitals Inc
Procter Memorial Lutheran Hospital
St. Joseph's Hospital
Program Director:
Kurt H. Soergel, MD
Medical College of Wisconsin
9200 W Wisconsin Ave
Milwaukee, WI 53226-2586
414 253-3048
Length: 2 Year(s)  Total Positions: 8
Program ID: 144-65-31-348

University of Wisconsin-Madison Program
Sinai Samaritan Medical Center
Program Director:
Vincents Diebold, MD
Sinai Samaritan Medical Center
PO Box 852
945 N 12th St
Milwaukee, WI 53201-0942
414 263-7085
Length: 2 Year(s)  Total Positions: 3
Program ID: 144-65-21-310

Geriatric Medicine
(Family Practice)

Arizona
Tucson
University of Arizona Program
University of Arizona College of Medicine
Veterans Affairs Medical Center (Tucson)
Program Director:
John T. Boyer, MD
Arizona Center on Aging
1511 E Elm St
Tucson, AZ 85719
602 626-6664
Length: 2 Year(s)  Total Positions: 2
Program ID: 125-05-12-002

California
Pasadena
Southern California Kaiser Permanente Medical Care (Los Angeles) Program
Southern California Kaiser Permanente Medical Group
Kaiser Foundation Hospital (Los Angeles)
Program Director:
Jimmy Hsu, MD
Kaiser Foundation Hospital
393 E Wilm St
Pasadena, CA 91106-8013
626 541-7940
Length: 2 Year(s)  Total Positions: 2
Program ID: 125-05-21-026

Whittier
University of Southern California Program*
Presbyterian Intercommunity Hospital
LAC-Rancho Los Amigos Medical Center
Program Director:
Laura Munoz, MD
Rancho Los Amigos Center
7500 Glendora St
Downey, CA 90242
Length: 2 Year(s)  Total Positions: 2
Program ID: 125-05-21-022

District of Columbia
Washington
Georgetown University/Providence Hospital Program
Georgetown University School of Medicine
Providence Hospital
Program Director:
Charles A. Cellier, MD
Port Lincoln Family Medicine
4151 Bladenburg Rd
Colmar Manor, MD 20722
301 866-7400
Length: 2 Year(s)  Total Positions: 3
Program ID: 125-10-21-026

Illinois
Park Ridge
Lutheran General Hospital Program
Lutheran General Hospital
Program Director:
Robert J. Moss, MD
Herbert Serz, MD
Lutheran General Hospital
1775 Dempster St
Park Ridge, IL 60068-1174
708 686-5164
Length: 2 Year(s)  Total Positions: 4
Program ID: 125-16-11-404

Iowa
Iowa City
University of Iowa Hospitals and Clinics Program
University of Iowa Hospitals and Clinics
Mercy Hospital
Program Director:
Gerald Jorgensen, MD
University of Iowa Hospitals and Clinics
1820 Sevedler Blvd
Iowa City, IA 52242-1009
319 335-4449
Length: 2 Year(s)  Total Positions: 2
Program ID: 125-18-11-005

Michigan
Lansing
St. Lawrence Hospital and Health Care Services/Michigan State University Program
St. Lawrence Hospital and Health Care Services
Program Director:
John W. Jones, MD
Gastroenteric Assessment Center
St. Lawrence Hospital
1210 W Saginaw
Lansing, MI 48915-1808
517 277-0030
Length: 2 Year(s)  Total Positions: 2
Program ID: 125-27-31-021

Minnesota
Minneapolis
University of Minnesota Program
University of Minnesota Medical School
Fairview Riverside Medical Center
St. Paul-Ramsey Medical Center
University of Minnesota Hospital and Clinic
Veterans Affairs Medical Center (Minneapolis)
Program Director:
Richard J. Reed, MD MPH
Dept of Family Practice and Community Health
825 Washington Ave SE
Box 25
Minneapolis, MN 5544-3004
612 232-8239
Length: 2 Year(s)  Total Positions: 8
Program ID: 125-26-21-030

* Updated information not provided.
Missouri
Columbia
University of Missouri-Columbia Program
University of Missouri-Columbia School of Medicine
Harry S Truman Memorial Veterans Hospital
University and Children's Hospital
Program Director:
David R Meht, MD MS
Univ of Missouri-Columbia School of Medicine
Dept of Family and Community Med
M256 Medical Sciences Bldg
Columbia, MO 65212
314 882-6576
Length: 2 Year(s) Total Positions: 4
Program ID: 125-28-31-020

Kansas City
University of Missouri at Kansas City Program
University of Missouri-Kansas City School of Medicine
Truman Medical Center-East
Program Director:
Jon P Dodon, MD
Dept of Community & Family Med
Truman Med Ctr-East
7600 Le's Summit Rd
Kansas City, MO 64110
816 378-6258
Length: 2 Year(s) Total Positions: 2
Program ID: 125-28-31-027

New Jersey
Piscataway
UMDNJ-Robert Wood Johnson Medical School Program
UMDNJ-Robert Wood Johnson Medical School
St Peter's Medical Center
Veterans Affairs Medical Center (Lyons)
Program Director:
David P Rowbotham, MD MPH
UMDNJ-Robert Wood Johnson Medical School
Dept of Family Medicine
One Robert Wood Johnson Pk
New Brunswick, NJ 08903-0010
201 285-7609
Length: 2 Year(s) Total Positions: 7
Program ID: 125-27-21-099

Ohio
Cincinnati
University of Cincinnati Hospital Group Program
University of Cincinnati Hospital
Duke Center
Program Director:
Gregg A Warshaw, MD
Dept of Family Medicine
201 Bethesda Ave ML582
Cincinnati, OH 45267-0902
513 558-9860
Length: 2 Year(s) Total Positions: 4
Program ID: 125-28-21-012

Pennsylvania
Philadelphia
Thomas Jefferson University Program*
Thomas Jefferson University Hospital
Program Director:
Edward H McGough, MD
Thomas Jefferson Univ Hosp
1015 Walnut St Rm 401
Philadelphia, PA 19107
215 955-2693
Length: 2 Year(s) Total Positions: 4
Program ID: 125-31-31-015

Pittsburgh
St Margaret Memorial Hospital Program
St Margaret Memorial Hospital
Program Director:
Judith S Black, MD
St Margaret Memorial Hosp
Dept of Gerontology
St Margaret's Hosp
Pittsburgh, PA 15235
412 784-5970
Length: 2 Year(s) Total Positions: 2
Program ID: 125-41-13-018

Puerto Rico
Caguas
University of Puerto Rico Program
Caguas Regional Hospital
Program Director:
Richard M De Amicis, MD
Dept of Family Medicine
GPO Box 427
Omarbo, PR 00778
809 737-6990
Length: 2 Year(s) Total Positions: 5
Program ID: 125-42-01-017

Geriatric Medicine
(Internal Medicine)
Alabama
Birmingham
University of Alabama Medical Center Program
University of Alabama Hospital
Veterans Affairs Medical Center (Birmingham)
Program Director:
Richard M Atten, MD
Community Health Services Blvd (CHSB-18)
933 S 18th St Ste 201
Birmingham, AL 35204-2041
205 994-9061
Length: 2 Year(s) Total Positions: 4
Program ID: 194-01-31-001

Arizona
Phoenix
Good Samaritan Regional Medical Center Program
Good Samaritan Regional Medical Center
Carl H Hayden Veterans Affairs Medical Center (Phoenix)
Program Director:
Paul C Rousseau, MD
Veterans Affairs Medical Center
850 E Indian School Rd
Phoenix, AZ 85016
602 277-5661
Length: 2 Year(s) Total Positions: 4
Program ID: 161-45-31-165

Arkansas
Little Rock
University of Arkansas for Medical Sciences Program
University of Arkansas College of Medicine
John L McClellan Memorial Veterans Hospital
University of Arkansas
Program Director:
David A Lipchitz, MD PhD
William J Carter, MD
GROCC (150LR)
VA Medical Center
4305 W Seventh St Rm 6B111
Little Rock, AR 72205
501 690-2081
Length: 2 Year(s) Total Positions: 3
Program ID: 161-04-21-063

* Updated information not provided.
California

Los Angeles

UCLA Medical Center Program
UCLA School of Medicine
UCLA Medical Center
Veterans Affairs Medical Center (Sepulveda)
Veterans Affairs Medical Center (West Los Angeles)

Program Director:
Dan Osterweil, MD
UCLA Med Ctr
10833 Le Conte Ave
92124 CHS
Los Angeles, CA 90024-1687
310 312-6530
Length: 2 Year(s)  Total Positions: 12
Program ID: 151-05-31-005

Orange

University of California (Irvine) Program
University of California (Irvine) Medical Center
Kaiser Foundation Hospital (Anaheim)
Long Beach Memorial Medical Center

Program Director:
Karen Douglas, MD
UCI Medical Center
101 City Drive S
Route 881 Family Medicine
Orange, CA 92668
714 455 5550
Length: 2 Year(s)  Total Positions: 4
Program ID: 151-05-21-056

Sacramento

University of California (Davis) Program
University of California (Davis) Medical Center

Program Director:
Calvin Borch, MD
University of California (Davis) Medical Center
4301 X St
Sacramento, CA 95817
916 734-7904
Length: 2 Year(s)  Total Positions: 2
Program ID: 151-05-21-006

San Diego

University of California (San Diego) Program
University of California (San Diego) Medical Center
Veterans Affairs Medical Center (San Diego)

Program Director:
Joe W. Ramsdell, MD
UCSD Medical Center
200 W Arbor Dr
San Diego, CA 92103-8416
619 543-6275
Length: 2 Year(s)  Total Positions: 6
Program ID: 151-05-21-046

San Francisco

University of California (San Francisco)/Mount Zion Program
University of California (San Francisco) School of Medicine
Mount Zion Medical Center of the University of California

Program Director:
Jay Luxenberg, MD
UCSF/Mount Zion
1600 Divisadero
San Francisco, CA 94115
415 885-7574
Length: 2 Year(s)  Total Positions: 12
Program ID: 151-05-31-006

New Haven

Yale-New Haven Medical Center Program
Yale New Haven Hospital
Veterans Affairs Medical Center (West Haven)

Program Director:
Leo M Connolly, MD
Yale University
20 York St
New Haven, CT 06504
203 777-2304
Length: 2 Year(s)  Total Positions: 12
Program ID: 151-05-31-007

Stanford

Stanford University Program
Stanford University Hospital
Veterans Affairs Medical Center (Livermore)
Veterans Affairs Medical Center (Palo Alto)

Program Director:
Gerald M. Beaven, MD
Veterans Affairs Medical Center
3801 Miranda Ave
GRC 182 B
Palo Alto, CA 94304-1200
415 493-5000
Length: 2 Year(s)  Total Positions: 12
Program ID: 151-05-21-053

District of Columbia

District of Columbia

Washington

George Washington University Program
George Washington University School of Medicine
George Washington University Hospital
Veterans Affairs Medical Center (Washington DC)

Program Director:
Gary Simon, MD
George Washington University Medical Center
Dept of Medicine
2110 Pennsylvania Ave NW #01
Washington, DC 20037
202 994-4717
Length: 2 Year(s)  Total Positions: 4
Program ID: 151-12-21-055

Florida

Gainesville

University of Florida Program
University of Florida College of Medicine
Shands Hospital at the University of Florida
Veterans Affairs Medical Center (Gainesville)

Program Director:
George J. Curran, MD
University of Florida College of Medicine
Box 100277
J HILLS Miller Health Center
Gainesville, FL 32610
904 385-8651
Length: 2 Year(s)  Total Positions: 4
Program ID: 151-05-21-005

Connecticut

Farmington

University of Connecticut Program
University of Connecticut School of Medicine
Univ of Connecticut Health Center/St John Dempsey Hospital

Program Director:
Richard W. Badine, MD
University of Connecticut Health Center
Travellers Center on Aging
MC-5215
Farmington, CT 06005-5215
203 679-5956
Length: 2 Year(s)  Total Positions: 12
Program ID: 151-05-31-006

Miami

University of Miami-Jackson Memorial Medical Center Program
University of Miami-Jackson Memorial Medical Center
Miami Jewish Home and Hospital for the Aged
Mount Sinai Medical Center of Greater Miami
Veterans Affairs Medical Center (Miami)

Program Director:
Michael J. Mintzer, MD
ACOS for Geriatrics and Extended Care
Miami VA Medical Center (11A)
1201 NW 16th St
Miami, FL 33125
305 324-3804
Length: 2 Year(s)  Total Positions: 4
Program ID: 151-12-21-010

* Updated information not provided.
Illinois

Chicago

McGaw Medical Center of Northwestern University Program
Northwestern University Medical School
Northwestern Memorial Hospital
Veterans Affairs Lakeside Medical Center (Chicago)

Program Director:
James B. Webster Jr., MD
Division of Geriatrics R317
Northwestern U Medical School
303 E Chicago Ave
Chicago, IL 60611-3008
312 503-0560
Length: 2 Year(s) Total Positions: 1
Program ID: 151-16-21-079

Rush-Presbyterian-St Luke's Medical Center Program*
Rush-Presbyterian-St Luke's Medical Center

Program Director:
Thomas J. Schnitzer, MD PhD
Rush-Presbyterian-St Luke's Medical Center
1653 W Congress Pkwy
225 IRB
Chicago, IL 60612-3864
312 942-4100
Length: 2 Year(s) Total Positions: 4
Program ID: 151-16-11-081

University of Chicago Program
University of Chicago Hospitals

Program Director:
Martin Gorbien, MD
University of Chicago
5841 S Maryland Ave
M3068
Chicago, IL 60637-4740
312 702-7265
Length: 2 Year(s) Total Positions: 2
Program ID: 151-16-11-012

University of Illinois College of Medicine at Chicago Program
University of Illinois College of Medicine at Chicago University of Illinois Hospital and Clinics
Veterans Affairs Chicago Medical Center (Chicago)

Program Director:
Alvaro Steinberg, MD PhD
University of Illinois Hospital
840 S Wood St M/C 787
Chicago, IL 60612
312 926-4750
Length: 2 Year(s) Total Positions: 3
Program ID: 151-16-21-091

Idaho

Boise

University of Washington Program 2*
Veterans Affairs Medical Center (Boise) St Luke's Regional Medical Center

Program Director:
Barry J. Cosack, MD
Robert E. Vosel, MD
VA Medical Center
Medical Service (111)
600 W Port Rd
Boise, ID 83706-4008
208 338-7220
Length: 2 Year(s) Total Positions: 2
Program ID: 151-15-21-081

Kentucky

Lexington

University of Kentucky Medical Center Program
University Hospital/Albert B Chandler Medical Center

Program Director:
Eugene C Rich, MD
Sanders-Brown Center on Aging
915 S Limestone
Lexington, KY 40503-1048
606 258-6550
Length: 2 Year(s) Total Positions: 1
Program ID: 151-28-21-087

* Updated information not provided.
Maryland

Baltimore

Johns Hopkins University Program
Johns Hopkins University School of Medicine
Johns Hopkins Bayview Medical Center
Johns Hopkins Hospital
Program Director:
Jesse Roth, MD
Jona R. Burton MD
Johns Hopkins Asthma and Allergy Center
5601 Hopkins Bayview Circle
Baltimore, MD 21224-2780
410 550-1824
Length: 2 Year(s) Total Positions: 9 Program Id: 131-23-11-018

University of Maryland Program*
University of Maryland Medical System
Veterans Affairs Medical Center (Baltimore)
Program Director:
Andrew F. Goldberg, MD
Baltimore VA Medical Center
Geriatrics Service (18)
10 N Greene St
Baltimore, MD 21201
410 472-9922
Length: 2 Year(s) Total Positions: 2 Program Id: 151-23-21-104

Massachusetts

Boston

Beth Israel Hospital Program
Beth Israel Hospital
Brookline West Roxbury Veterans Affairs Medical Center
Program Director:
Jeanette Y. Wei, MD PhD
Harvard Medical School Division on Aging
643 Huntington Ave
Boston, MA 02115
617 732-1849
Length: 2 Year(s) Total Positions: 6 Program Id: 131-24-24-101

Boston University Program
Boston University School of Medicine
Boston University Medical Center/University Hospital
Edith Nourse Rogers Memorial Veterans Hospital
Program Director:
Patria F. Barry, MD
Boston University Medical Center
720 Harrison Ave
Ste 1101
Boston, MA 02118
617 638-8893
Length: 2 Year(s) Total Positions: 9 Program Id: 151-24-21-050

Worcester

University of Massachusetts Medical Center Program*
University of Massachusetts Medical Center
Boston University Medical Center/University Hospital
Medical Center of Central Massachusetts
Program Director:
James E. Pateake, MD
Medical Center of Central Massachusetts
119 Belmont St
Worcester, MA 01605
608 786-6283
Length: 2 Year(s) Total Positions: 2 Program Id: 151-24-21-022

Michigan

Ann Arbor

University of Michigan Program
University of Michigan Hospitals
Veterans Affairs Medical Center (Ann Arbor)
Program Director:
Jeffrey B. Hite, MD
University of Michigan Geriatrics Center
300 N Ingalls St SBA000/4005
Ann Arbor, MI 48109-0405
313 763-4205
Length: 2 Year(s) Total Positions: 8 Program Id: 151-23-21-024

Detroit

Wayne State University/Detroit Medical Center Program*
Wayne State University School of Medicine
Veterans Affairs Medical Center (Allen Park)
Program Director:
Joel Steinberg, MD
2000 St Antoine
Detroit, MI 48201
313 877-2020
Length: 2 Year(s) Total Positions: 5 Program Id: 161-23-21-111

Minnesota

Minneapolis

University of Minnesota Program
University of Minnesota Medical School
St Paul-Ramsey Medical Center
Veterans Affairs Medical Center (Minneapolis)
Program Director:
Michael T. Spillane, MD
St Paul-Ramsey Medical Center
604 Jackson St
St Paul, MN 55101
651 221-3245
Length: 2 Year(s) Total Positions: 4 Program Id: 151-26-21-028

Rochester

Mayo Graduate School of Medicine Program
Mayo School of Medicine-Mayo Foundation
Mayo Clinic (Rochester)
Rochester Methodist Hospital
1795 St Mary's Hospital of Rochester
Program Director:
Darrell T. Hutt, MD
Mayo Application Processing Center
Mayo Graduate School of Medicine
300 First St SW
Rochester, MN 55905
507 284-1286
Length: 2 Year(s) Total Positions: 2 Program Id: 151-26-21-065

Missouri

St Louis

St Louis University Group of Hospitals Program
St Louis University School of Medicine
St Louis University Hospital
Veterans Affairs Medical Center (St Louis)
Program Director:
John E. Motley, MB BCH
St Louis University Hospital
MD 208
1402 S Grand Blvd
St Louis, MO 63104
314 577-4102
Length: 2 Year(s) Total Positions: 9 Program Id: 161-26-21-095

Washington University Program
St Louis Jewish Hospital of St Louis
Barnes Hospital
Program Director:
Samuel W. Jones, MD
Dept of Geriatric Medicine
St Louis, MO 63110
314 454-8150
Length: 2 Year(s) Total Positions: 5 Program Id: 151-28-21-027

Nebraska

Omaha

University of Nebraska Program
University of Nebraska Medical Center
Program Director:
Jane F. Potter, MD
University of Nebraska Medical Center
Univ Geriatric Ctr
600 S 42nd St
Omaha, NE 68198-5620
402 550-7512
Length: 2 Year(s) Total Positions: 2 Program Id: 151-28-21-028

New Jersey

Newark

UMDNJ-New Jersey Medical School Program
UMDNJ-New Jersey Medical School
Newark Beth Israel Medical Center
UMDNJ University Hospital
Program Director:
Diana B. DeCesare, MD
UMDNJ University Hospital
150 Bergen St
Rm H-351
Newark, NJ 07103
201 999-5822
Length: 2 Year(s) Total Positions: 3 Program Id: 151-33-21-003

* Updated information not provided.
New Mexico
Albuquerque
University of New Mexico Program
University of New Mexico School of Medicine
University Hospital
Veterans Affairs Medical Center (Albuquerque)
Program Director:
Robert D Lindeman, MD
Dir of Geriatric Medicine Dept of Medicine
UNM Hoop SMMC
Albuquerque, NM 87131-8271
505 272-5022
Length: 2 Year(s)
Program ID: 161-04-21-093

New York
Albany
Albany Medical Center Program* 
Albany Medical Center Hospital
Veterans Affairs Medical Center (Albany)
Program Director:
Dean A Thompson, MD
Medical Service (111)
Albany VAMC
115 Holland Ave
Albany, NY 12208-3473
518 462-3517
Length: 2 Year(s) Total Positions: 2
Program ID: 161-35-31-058

Bronx
Albert Einstein College of Medicine Program
Albert Einstein College of Medicine of Yeshiva University
Montefiore Medical Center-Henry and Lucy Moses Division
Program Director:
Laurie G Jacobs, MD
Montefiore Medical Center
Div of Geriatric Medicine
111 E 210th St
Bronx NY 10467
718 730-6721
Length: 2 Year(s) Total Positions: 6
Program ID: 161-35-21-008

Buffalo
SUNY at Buffalo Graduate Medical-Dental Education Consortium Program
SUNY at Buffalo Grad Medical-Dental Education Consortium
Veterans Affairs Medical Center (Buffalo)
Program Director:
June I Chang, MD
Div of Geriatrics
VA Medical Center
3161 Bailey Ave
Buffalo, NY 14215
716 892-0381
Length: 2 Year(s) Total Positions: 4
Program ID: 16130-31-099

Manhasset
North Shore University Hospital Program
North Shore University Hospital
Program Director:
Howard J Gunz, MD
North Shore University Hospital
900 Community Dr
Manhasset, NY 11030
516 682-9090
Length: 2 Year(s) Total Positions: 4
Program ID: 161-35-21-084

Mineola
Winthrop-University Hospital Program
Winthrop-University Hospital
Program Director:
Ronald D Adelman, MD
Winthrop-University Hospital
222 Station Plaza N
Rm 330
Mineola, NY 11501
516 663-2588
Length: 2 Year(s) Total Positions: 3
Program ID: 151-35-21-088

New Hyde Park
Albert Einstein College of Medicine at Long Island Jewish Medical Center Program
Long Island Jewish Medical Center
Program Director:
Conn J Foley, MD
The Parker Jewish Geriatric Institute
271-71 76th Ave
New Hyde Park, NY 11040-1433
718 944-2100
Length: 2 Year(s) Total Positions: 7
Program ID: 161-35-21-091

New York
Mount Sinai School of Medicine Program
Mount Sinai School of Medicine
Mount Sinai Medical Center
Program Director:
Myron Miller, MD
Dept of Geriatrics & Adult Development Box 1070
Mount Sinai Medical Center
One Gustave L Levy Pl
New York, NY 10029
212 444-5551
Length: 2 Year(s) Total Positions: 11
Program ID: 161-35-31-042

New York University Medical Center Program
New York University Medical Center
Scheie Hospital Center
Hospital for Joint Diseases Orthopaedic Institute
Program Director:
Michael L Freedman, MD
Scheie Hospital Center
Room 2-N-48
First Ave & 27th St
New York, NY 10016
212 651-6300
Length: 2 Year(s) Total Positions: 6
Program ID: 161-35-21-101

St Luke’s-Roosevelt Hospital Center (St Luke’s) Program
St Luke’s-Roosevelt Hospital Center
St Luke’s-Roosevelt Hospital Center-Roosevelt Division
St Luke’s-Roosevelt Hospital Center-St Luke’s Division
Program Director:
Patricia A Bloom, MD
St Luke’s-Roosevelt Hospital Center
Scrymsire 1812
1111 Amsterdam Ave
New York, NY 10025
212 623-9034
Length: 2 Year(s) Total Positions: 2
Program ID: 151-35-21-094

Rochester
University of Rochester Program*
Strong Memorial Hospital of the University of Rochester
Monroe Community Hospital
Highland Hospital of Rochester
Rochester General Hospital
Program Director:
Paul R Katz, MD
Monroe Community Hospital
435 E Greece Rd
Rochester, NY 14620
716 274-7100
Length: 2 Year(s) Total Positions: 6
Program ID: 151-35-81-105

Staten Island
Staten Island University Hospital Program
Staten Island University Hospital
Program Director:
Vincent Calamia, MD
Staten Island University Hospital
Dept of Medicine
475 Seaview Ave
Staten Island, NY 10305
718 226-6346
Length: 2 Year(s) Total Positions: 5
Program ID: 151-35-21-110

Stony Brook
SUNY at Stony Brook Program
University Hospital-SUNY at Stony Brook
Veterans Affairs Medical Center (Northport)
Program Director:
William P Fields, MD
Dept of Medicine
SUNY Stony Brook
HSC-T-16-000
Stony Brook, NY 11794-8163
516 444-7840
Length: 2 Year(s) Total Positions: 4
Program ID: 151-35-21-109

Syracuse
SUNY Health Science Center at Syracuse Program
University Hospital-SUNY Health Science Center at Syracuse
Program Director:
Sharon A Bragman, MD
SUNY Health Science Center at Syracuse
760 E Adams St
Syracuse, NY 13210
315 444-5157
Length: 2 Year(s) Total Positions: 1
Program ID: 151-35-21-097

* Updated information not provided.
North Carolina

Chapel Hill
University of North Carolina Hospitals Program
University of North Carolina Hospitals
Program Director: Mark E. Williams, MD
UNC School of Medicine
Program on Aging
141 Macon Bldg CB#4750
Chapel Hill, NC 27599-7550
919-981-3345
Length: 2 Year(s) Total Positions: 6
Program ID: 151-36-21-069

Durham
Duke University Program
Duke University Medical Center
Veterans Affairs Medical Center (Durham)
Program Director: Harvey J Cohen, MD
Duke University Medical Center
Box 3003
Durham, NC 27710
919-660-7503
Length: 2 Year(s) Total Positions: 10
Program ID: 151-36-21-083

Winston-Salem
Bowman Gray School of Medicine Program
North Carolina Baptist Hospital
Program Director: Walter H. Bittenger Jr, MD
Bowman Gray School of Medicine
Medical Center Blvd
Winston-Salem, NC 27157-1061
336-716-2000
Length: 2 Year(s) Total Positions: 24
Program ID: 151-36-21-084

Pennsylvania

Philadelphia
Albert Einstein Medical Center Program
Albert Einstein Medical Center
Program Director: Todd H. Goldberg, MD
Philadelphia Geriatric Research Center
5301 Old York Rd
Philadelphia, PA 19141
215-652-5345
Length: 2 Year(s) Total Positions: 4
Program ID: 151-40-31-498

MCP/University of Pennsylvania Hospital Program
Medical College of Pennsylvania Hospital
Program Director: Robert J. Potts, MD
University of Pennsylvania Hospital
3400 Spruce St
Philadelphia, PA 19104
215-349-4280
Length: 2 Year(s) Total Positions: 6
Program ID: 151-41-21-498

University of Pennsylvania Program*
Hospital of the University of Pennsylvania
Veterans Affairs Medical Center (Philadelphia)
Program Director: Jerry Johnson, MD
Hospital of The University of Pennsylvania
Dept of Medicine 708
3400 Spruce St
Philadelphia, PA 19104
215-349-4280
Length: 2 Year(s) Total Positions: 10
Program ID: 151-41-21-060

Pittsburgh
Shadyside Hospital Program
Shadyside Hospital
Program Director: David C. Martin, MD
Shadyside Hospital
5230 Centre Ave
Pittsburgh, PA 15232
412-625-2500
Length: 2 Year(s) Total Positions: 2
Program ID: 151-41-21-483
**University Health Center of Pittsburgh**

**Program**
University Health Center of Pittsburgh
Presbyterian-University Hospital/UPMC
Veterans Affairs Medical Center (Pittsburgh)

**Program Director:**
Paula Bonino, MD MPE
Veterans Administration Medical Center 11A
University Dr C
Pittsburgh, PA 15240
412-692-3065
Length: 2 Year(s)  Total Positions: 4
Program ID: 151-41-21-977

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**Puerto Rico**

**San Juan**

**University of Puerto Rico Program**
University of Puerto Rico School of Medicine
Hospital Fr Pedro P Trilla
University Hospital
Veterans Affairs Medical Center (San Juan)

**Program Director:**
Irene Jimenez, MD
University of Puerto Rico School of Medicine
Box 5667
San Juan, PR 00909
692-755-2236
Length: 2 Year(s)  Total Positions: 2
Program ID: 151-43-21-980

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**Texas**

**Galveston**

**University of Texas Medical Branch**
Hospitals Program
University of Texas Medical Branch Hospitals

**Program Director:**
James S Goodwin, MD
University of Texas Medical Branch
Dep of Geriatrics
213 University Blvd
Galveston, TX 77555-0460
409 772-1867
Length: 2 Year(s)  Total Positions: 1
Program ID: 151-42-21-176

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**Houston**

**Baylor College of Medicine Program**
Baylor College of Medicine
Veterans Affairs Medical Center (Houston)

**Program Director:**
George E Jeffet, MD
Baylor College of Medicine
Huffine Center on Aging
One Baylor Plaza M220
Houston, TX 77030-3468
713-798-5804
Length: 2 Year(s)  Total Positions: 5
Program ID: 151-48-31-040

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**San Antonio**

**University of Texas Health Science Center at San Antonio Program**
University of Texas Medical School at San Antonio
Audie L Murphy Memorial Veterans Hospital (San Antonio)
University Hospital South Texas Medical Center

**Program Director:**
Michael S Katz, MD
Audie L Murphy Memorial Veterans Hospital
Int Med-Geriatric Medicine
7400 Merton Minter Dr
San Antonio, TX 78284
210-517-6397
Length: 2 Year(s)  Total Positions: 6
Program ID: 151-48-21-476

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**Virginia**

**Charlottesville**

**University of Virginia Program**
University of Virginia Medical Center

**Program Director:**
Richard W Lindsay, MD
University of Virginia Hospitals
Dept of Internal Medicine
Box 167
Charlottesville, VA 22908
804-540-8985
Length: 2 Year(s)  Total Positions: 1
Program ID: 151-51-21-043

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**Richmond**

**Medical College of Virginia/Virginia Commonwealth University Program**
Medical College of Virginia/Virginia Commonwealth University
Hunter Holmes McGuire VA Medical Center (Richmond)
Medical College of Virginia Hospitals

**Program Director:**
Thomas Mulhgan, MD
Geriatrics Medicine Section (181)
VA Medical Center
1201 Broad Rock Blvd
Richmond, VA 23298
804-20-1303
Length: 2 Year(s)  Total Positions: 6
Program ID: 151-51-21-043

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**Washington**

**Seattle**

**University of Washington Program 1**
University of Washington School of Medicine
Harborview Medical Center
Veterans Affairs Medical Center (Seattle)

**Program Director:**
Hamaz H Abrass, MD
Harborview Medical Center
Medicine/Gerontology
325 Ninth Ave 3A 87 (H3565)
Seattle, WA 98104-3499
206-223-3039
Length: 2 Year(s)  Total Positions: 4
Program ID: 151-54-21-044

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**Tacoma**

**Madigan Army Medical Center Program**
Madigan Army Medical Center
Veterans Affairs Medical Center (Tacoma)

**Program Director:**
Sharon Falahat, MD
Madigan Army Medical Center
Dept of Medicine
Tacoma, WA 98431-5000
253-982-8440
Length: 2 Year(s)  Total Positions: 4
Program ID: 151-54-12-074

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* Updated information not provided.
Accredited Programs in Geriatric Medicine (Internal Medicine)

**West Virginia**

**Huntington**

**Marshall University School of Medicine Program**
Marshall University School of Medicine
Cabell Huntington Hospital
St Mary's Hospital
Veterans Affairs Medical Center (Huntington)

**Program Director:**
Shirley N. Reich, MD
Marshall University School of Medicine
Dept of Internal Medicine
1901 Sixth Ave
Huntington, WV 25701
304 696-7837

Length: 2 Year(s)  Total Positions: 2  
Program ID: 151-55-21-096

**Wisconsin**

**Madison**

**University of Wisconsin Program**
University of Wisconsin Hospital and Clinics
William J. Middleton Veterans Hospital

**Program Director:**
Molly Carne, MD
Wm J Middleton Memorial Veteran's Hospital

**Program Director:**
6000 Overlook Terrace
Madison, WI 53796
608 262-7000

Length: 2 Year(s)  Total Positions: 6  
Program ID: 151-56-21-049

**Marshfield**

**University of Wisconsin (Marshfield) Program**
Marshfield Clinic-St Joseph's Hospital

**Program Director:**
Robert E. Phillips, MD
Marshfield Clinic
1000 N Oak Ave
Marshfield, WI 54449
715 387-6663

Length: 2 Year(s)  Total Positions: 4  
Program ID: 151-56-21-099

**Milwaukee**

**Medical College of Wisconsin Program**
Medical College of Wisconsin Affiliated Hospitals Inc
Clement J. Zablocki Veterans Affairs Medical Center

**Program Director:**
Edward H. Doughty, Jr, MD
Medical College of Wisconsin
Division of Geriatrics (111P)
5000 W National Ave
Milwaukee, WI 53285
414 384-2900

Length: 2 Year(s)  Total Positions: 2  
Program ID: 151-56-51-048

**University of Wisconsin (Milwaukee) Program**
Sinai Samaritan Medical Center

**Program Director:**
Nirmala J. Romario, MD PhD
Sinai Samaritan Medical Center
F0 Box 342
Milwaukee, WI 53201-0342
414 383-2887

Length: 2 Year(s)  Total Positions: 2  
Program ID: 151-56-21-076

**Hand Surgery (Orthopaedic Surgery)**

**Alabama**

**Birmingham**

**University of Alabama Medical Center Program**
University of Alabama Hospital

**Program Director:**
John M. Cuckler, MD
University of Alabama Birmingham Medical Center
Director of Orthopaedics
1313 6th Ave S
Birmingham, AL 35233-3285
205 934-6668

Length: 1 Year(s)  Total Positions: 4  
Program ID: 263-01-20-018

**Arizona**

**Phoenix**

**Maricopa Medical Center Program**
Maricopa Medical Center

**Program Director:**
C A Luevano Jr, MD
Maricopa Medical Center
Div of Hand Surgery
2601 E Roosevelt
Phoenix, AZ 85008
602 267-5402

Length: 1 Year(s)  Total Positions: 1  
Program ID: 263-03-21-044

**California**

**Loma Linda**

**Loma Linda University Program**
Loma Linda University Medical Center
San Bernardino County Medical Center

**Program Director:**
Vincenzo D'Andrea, MD
Loma Linda University Medical Center
11234 Anderson St
Rancho Cucamonga, CA 91730
909 824-0010

Length: 1 Year(s)  Total Positions: 3  
Program ID: 263-05-21-006

**Los Angeles**

**UCLA Medical Center Program**
UCLA School of Medicine
UCLA Medical Center
Veterans Affairs Medical Center (Sepulveda)

**Program Director:**
Neil F. Jones, MD
Universities of California Los Angeles School of Medicine
Dept of Orthopaedic Surgery
UCLA Medical Education Section
Los Angeles, CA 90024-6002
310 825-6886

Length: 1 Year(s)  Total Positions: 1  
Program ID: 263-05-21-014

* Updated information not provided.
**University of Southern California**
Program:
Los Angeles County-USC Medical Center
Joseph H Boyce Foundation
Program Director:
Francis Shiller, MD
LAC-USC Medical Center
Dept of Orthopaedic Surgery
1200 N State St G-6 RM 5900
Los Angeles, CA 90033
213 232-7345
Length: 1 Year(s)
Program ID: 263-05-21-039

**Sacramento**
University of California (Davis) Program
University of California (Davis) Medical Center
Program Director:
Robert M Stobo, MD
University of California, Davis Medical Center
Dept of Orthopaedics
2221 Stockton Blvd
Sacramento, CA 95817-1419
916 734-3678
Length: 1 Year(s)  Total Positions: 1
Program ID: 263-05-21-020

**San Diego**
Naval Medical Center (San Diego) Program*
Naval Medical Center (San Diego)
Program Director:
Gregory R Mack, MD
Naval Hospital
San Diego, CA 02194-5000
619 522-8235
Length: 1 Year(s)
Program ID: 263-05-21-050

University of California (San Diego) Program
University of California (San Diego) Medical Center
Veterans Affairs Medical Center (San Diego)
Program Director:
Reid A Abrams, MD
University of California San Diego Medical Center
200 W Arbor Dr MCH 8844
San Diego, CA 92103
619 543-5555
Length: 1 Year(s)  Total Positions: 2
Program ID: 263-05-21-024

**San Francisco**
California Pacific Medical Center Program
California Pacific Medical Center
California Pacific Medical Center (Pacific Campus)
San Francisco SurgCentre
Program Director:
Leonard Gordon, MD
California Pacific Medical Center
Hand & Microsurgery Lab
2300 California St 8900
San Francisco, CA 94115
415 923-6863
Length: 1 Year(s)  Total Positions: 1
Program ID: 263-05-21-049

University of California (San Francisco) Program
University of California (San Francisco) School of Medicine
University of California (San Francisco) Medical Center
Program Director:
Edward Diao, MD
University of California San Francisco
Hand and Microvascular Surgery Serv
500 Parnassus Ave Res M4250 W
San Francisco, CA 94143-0728
415 476-1167
Length: 1 Year(s)  Total Positions: 1
Program ID: 263-05-21-019

**Stanford**
Stanford University Program
Stanford University Hospital
Lucille Salter Packard Children's Hospital at Stanford
Veterans Affairs Medical Center (Palo Alto)
Program Director:
Amy L Ladd, MD
Stanford University Medical Center
Dept of Hand Surgery
300 Pasteur Dr R132
Stanford, CA 94305
415 723-3731
Length: 1 Year(s)  Total Positions: 1
Program ID: 263-05-31-454

**Connecticut**
Farmington
University of Connecticut Program
University of Connecticut School of Medicine
Hartford Hospital
Newington Children's Hospital
University of Connecticut Health Center/John Dempsey Hospital
Program Director:
H Kirk Watson, MD
Connecticut Combined Hand Serv
85 Seymour St Ste 818
Hartford, CT 06106
203 527-7161
Length: 1 Year(s)  Total Positions: 2
Program ID: 263-05-21-030

**Florida**
Gainesville
University of Florida Program
University of Florida College of Medicine
Shands Hospital at the University of Florida
Program Director:
Paul C Dei, MD
University of Florida
JHM Health Center Box 100246
1500 SW Archer Rd
Gainesville, FL 32610
904 392-4251
Length: 1 Year(s)  Total Positions: 2
Program ID: 263-11-21-011

**Miami**
University of Miami-Jackson Memorial Medical Center Program
University of Miami-Jackson Memorial Medical Center
Veterans Affairs Medical Center (Miami)
Program Director:
Elizabeth A Ouellette, MD
University of Miami-Jackson School of Medicine
Dept of Orthopaedics and Rehab
PO Box 010600 (D-27)
Miami, FL 33101
305 586-7122
Length: 1 Year(s)  Total Positions: 2
Program ID: 263-11-21-013

**Tampa**
Tampa General Healthcare Program*
Tampa General Healthcare
Shriners Hospital for Crippled Children (Tampa)
Program Director:
Thomas Groome, MD
Florida Orthopaedic Institute
Dept of Hand Surgery
4175 E Fowler Ave
Tampa, FL 33612
813 973-5700
Length: 1 Year(s)
Program ID: 263-11-21-043

**Illinois**
Chicago
University of Chicago Program
University of Chicago Hospitals
Program Director:
Daniel F Maas, MD
University of Chicago Medical Center
Hand Surgery Service
3841 S Maryland 5002
Chicago, IL 60617
312 702-5206
Length: 1 Year(s)  Total Positions: 1
Program ID: 263-16-21-035

**Indiana**
Indianapolis
Indiana University Medical Center Program
Indiana Hand Center
Indiana University Medical Center
Program Director:
Richard S Edler, MD
The Indiana Hand Center
8091 Harcourt Rd
Indianapolis, IN 46205
317 876-5160
Length: 1 Year(s)  Total Positions: 6
Program ID: 263-17-21-041
Iowa

Iowa City
University of Iowa Hospitals and Clinics
Program
University of Iowa Hospitals and Clinics Veterans Affairs Medical Center (Iowa City)
Program Director:
Curtis M Steyer, MD
University of Iowa
Dept of Orthopaedic Surgery
Iowa City, IA 52242-1099
319 356-3943
Length: 1 Year(s) Total Positions: 1
Program ID: 269-18-21-000

Michigan

Grand Rapids
Bridget Memorial Medical Center
Program
Bridget Memorial Medical Center Butterworth Hospital
Program Director:
Alfred B Swanson, MD
Bridget Memorial Medical Center
Dept of Orthopaedic Surgery
2000 West 86th St SE
Grand Rapids, MI 49506
616 774-7420
Length: 1 Year(s) Total Positions: 2
Program ID: 269-35-21-068

Massachusetts

Boston

Harvard Medical School (Massachusetts General) Program
Massachusetts General Hospital
Program Director:
Richard H Gelberman, MD
Massachusetts General Hospital
Dept of Hand Surgery
15 Parkman St
Boston, MA 02114
617 732-2946
Length: 1 Year(s)
Program ID: 269-24-21-007

Harvard Medical School Program
Brigham and Women's Hospital
Beth Israel Hospital
Brookline-West Roxbury Veterans Affairs Medical Center Children's Hospital
Program Director:
Barry P Simmons, MD
Brigham and Women's Hospital
Dept of Orthopaedic Surgery
75 Francis St
Boston, MA 02215-6105
617 732-5378
Length: 1 Year(s) Total Positions: 3
Program ID: 269-24-21-034

Tufts University Program
New England Medical Center Hospitals
New England Baptist Hospital
Newton-Wellesley Hospital
Program Director:
Leonard K Ruby, MD
New England Medical Center
750 Washington St Box 26
Boston, MA 02111
617 955-5155
Length: 1 Year(s) Total Positions: 2
Program ID: 269-24-21-029

Minnesota

Minneapolis
University of Minnesota Program
University of Minnesota Medical School
Methodist Hospital
University of Minnesota Hospital and Clinic Veterans Affairs Medical Center (Minneapolis)
Program Director:
James H House, MD
Matthew D Putnam, MD
University of Minnesota Health Center
Dept of Orthopaedic Surgery
420 Delaware St SE PO Box 492
Minneapolis, MN 55455
612 628-1570
Length: 1 Year(s) Total Positions: 2
Program ID: 269-24-21-037

Rochester
Mayo Graduate School of Medicine Program
Mayo Graduate School of Medicine-Mayo Foundation Mayo Clinic (Rochester)
Rochester Methodist Hospital St Mary's Hospital of Rochester
Program Director:
Robert D Beckenbaugh, MD
Mayo Graduate School of Medicine MGS Medical Application Processing Center
200 First St SW
Rochester, MN 55905
507 284-6351
Length: 1 Year(s) Total Positions: 3
Program ID: 269-35-21-007

Mississippi

Jackson
University of Mississippi Medical Center Program
University of Mississippi School of Medicine
University Hospital
Program Director:
Alan E Freeland, MD
University of Mississippi Medical Center
Dept of Orthopaedic Surgery
2500 N State St
Jackson, MS 39216-4505
601 984-5183
Length: 1 Year(s) Total Positions: 1
Program ID: 269-37-21-032

Missouri

St Louis
Washington University Program
Barnes Hospital
Program Director:
Paul B Maitre, MD
Barnes Hospital
One Barnes Hospital Plaza
Ste 11800
St Louis, MO 63110
314 362-4080
Length: 1 Year(s) Total Positions: 1
Program ID: 269-26-21-003

New Mexico

Albuquerque
University of New Mexico Program
University of New Mexico School of Medicine
University Hospital
Program Director:
Mohab S Mousim, MD
University of New Mexico Health Sciences Center
915 Camino de Salado NE
Department of Orthopaedics
Albuquerque, NM 87112-5296
505 272-4107
Length: 1 Year(s) Total Positions: 22
Program ID: 269-34-21-007

New York

Buffalo
SUNY at Buffalo Graduate Medical-Dental Education Consortium Program
SUNY at Buffalo Grad Medical-Dental Education Consortium
 Erie County Medical Center
Millard Fillmore Hospitals
Program Director:
Clayton A Feiner, MD
Millard Fillmore Hospital
3 Gates Circle
Buffalo, NY 14203
716 897-4506
Length: 1 Year(s) Total Positions: 3
Program ID: 269-35-21-012

New York

Columbia University Program
Presbyterian Hospital in the City of New York
Program Director:
S Ashley Graventhorn, MD
New York Orthopaedic Hospital
161 Ft Washington Ave
Rm 248
New York, NY 10023
212 308-5974
Length: 1 Year(s) Total Positions: 1
Program ID: 269-85-31-008

* Updated information not provided.
Hospital for Joint Diseases Orthopaedic Institute Program*
Hospital for Joint Diseases Orthopaedic Institute
Program Director: Martin A. Fouser, MD
Hospital for Joint Diseases Orthopaedic Institute
Dept of Hand Serv
2 E 88th St
New York, NY 10128
312 345-0644
Length: 1 Year(s)
Program ID: 263-35-21-047

Hospital for Special Surgery/Cornell Medical Center Program
Hospital for Special Surgery
New York Hospital
St Luke’s-Roosevelt Hospital Center
Program Director: Robert N. Hochkiss, MD
Director of Hand Surgery
Hospital for Special Surgery
535 E 70th St
New York, NY 10021
212 656-0584
Length: 1 Year(s)
Program ID: 263-35-21-017

St Luke’s-Roosevelt Hospital Center Program
St Luke’s-Roosevelt Hospital Center
St Luke’s-Roosevelt Hospital Center-Roosevelt Division
Program Director: Richard G. Eaton, MD
St Luke’s-Roosevelt Hospital Center
CV Starr Hand Surgery Center
1000 Tenth Ave
New York, NY 10019
212 293-7680
Length: 1 Year(s) Total Positions: 2
Program ID: 263-35-21-005

Rochester University of Rochester Program
Strong Memorial Hospital of the University of Rochester
Program Director: Richard I. Burton, MD
R Christie Wray, MD
University of Rochester Medical Center
601 Elmwood Ave
Box 665
Rochester, NY 14642
716 275-6167
Length: 1 Year(s) Total Positions: 2
Program ID: 263-35-21-010

Stony Brook SUNY at Stony Brook Program
University Hospital-SUNY at Stony Brook
Program Director: Lawrence C. Huntz, MD
SUNY Stony Brook
Div of Hand Surgery
HSC7-18
Stony Brook, NY 11794-8181
631 444-9861
Length: 1 Year(s) Total Positions: 1
Program ID: 263-35-21-028

Syracuse SUNY Health Science Center at Syracuse Program
University Hospital-SUNY Health Science Center at Syracuse
Grousse-Irving Memorial Hospital
Program Director: David G. Murray, MD
500 Harrison Ctr
Syracuse, NY 13202
315 472-2015
Length: 1 Year(s) Total Positions: 2
Program ID: 263-35-21-021

North Carolina Durham Duke University Program
Duke University Medical Center
Program Director: James R. Urbanoski, MD
Duke University Medical Center
PO Box 2912
Orthopaedic & Hand Surgery
Durham, NC 27710
919 668-5170
Length: 1 Year(s) Total Positions: 3
Program ID: 263-36-21-022

Ohio Cincinnati University of Cincinnati Hospital Group Program
University of Cincinnati Hospital
Beaumont Hospital Inc
Program Director: Peter J. Stern, MD
Mary S. Stern Hand Surgery Foundation
2800 Winslow Ave Ste 401
Cincinnati, OH 45209
513 861-4283
Length: 1 Year(s) Total Positions: 2
Program ID: 263-36-21-015

Cleveland Cleveland Combined Hand Fellowship Program
Cleveland Clinic Foundation
MetroHealth Medical Center
University Hospitals of Cleveland
Program Director: Stephen Lacey, MD
Earl Pfeiffer, MD
Cleveland Combined Hand Fellowship
PO Box 1098-109
Cleveland, OH 44115
216 444-2615
Length: 1 Year(s) Total Positions: 1
Program ID: 263-39-21-045

Columbus Ohio State University Program
Ohio State University Medical Center
Children’s Hospital
Riverside Methodist Hospitals
Program Director: Carl Richard Coleman, MD
Riverside Methodist Hospital
Med Educ Dept
3535 Olentangy River Rd
Columbus, OH 43214
614 596-5025
Length: 1 Year(s) Total Positions: 1
Program ID: 263-38-21-005

Oklahoma Oklahoma City Baptist Medical Center Program
Baptist Medical Center of Oklahoma
BCHA Presbyterian Hospital
University Hospital and Clinics
Program Director: Ghazi M. Bayat, MD
Physicians Building “D” Ste 700
3566 NW Expressway
Oklahoma City, OK 73112
405 945-4898
Length: 1 Year(s) Total Positions: 1
Program ID: 263-39-21-049

Pennsylvania Philadelphia Thomas Jefferson University Program
Thomas Jefferson University Hospital
Program Director: Lawrence H. Schneider, MD
Div Hand Surgery Dept of Orthopaedic Surgery
The Philadelphia Hand Center PC
901 Walnut St
Philadelphia, PA 19107
215 696-8980
Length: 1 Year(s) Total Positions: 4
Program ID: 263-41-21-001

University of Pennsylvania Program
Hospital of the University of Pennsylvania
Children’s Hospital of Philadelphia
Mercy Catholic Medical Center-Fitzgerald Mercy Division
Program Director: F William Bora Jr, MD
Hospital of the University of Pennsylvania
Penn Hand Specialist
8 Penn Tower
Philadelphia, PA 19104-4835
215 662-3560
Length: 1 Year(s) Total Positions: 3
Program ID: 263-41-21-004

* Updated information not provided.
Accredited Programs in Hand Surgery (Orthopaedic Surgery)

Pittsburgh
MCHU/Allegheny General Hospital Program
Allegheny General Hospital
Program Director:
Joseph 0. Treglia, MD
Allegheny General Hospital
Dept of Orthopaedic Surgery
320 E North Ave
Pittsburgh, PA 15212
412 321-1035
Length: 1 Year(s) Total Positions: 3
Program ID: 283-41-21-031

University Health Center of Pittsburgh Program
University Health Center of Pittsburgh
Children's Hospital of Pittsburgh
Veterans Affairs Medical Center (Pittsburgh)
Program Director:
James H Herndon, MD
University of Pittsburgh School of Medicine
Lillian Kaufmann Bldg Ste 1010
3471 Fifth Ave
Pittsburgh, PA 15213
412 887-3800
Length: 1 Year(s)
Program ID: 283-41-21-051

Tennessee
Memphis
University of Tennessee Program
University of Tennessee College of Medicine
Campbell Foundation-University of Tennessee
Program Director:
Phillip E Wright II, MD
University of Tennessee Campbell Clinic
Dept of Ortho & Hand Surgery
800 Madison Ave
Memphis, TN 38103-3433
901 732-1341
Length: 1 Year(s)
Program ID: 283-47-21-866

Texas
Houston
Baylor College of Medicine Program
Baylor College of Medicine
Harris County Hospital District-Ben Taub General Hospital
Methodist Hospital
Veterans Affairs Medical Center (Houston)
Program Director:
James B Bennett, MD
Baylor College of Medicine
Dept of Orthopaedic Surgery
6500 Fannin Ste 2025
Houston, TX 77030
713 790-3711
Length: 1 Year(s) Total Positions: 2
Program ID: 283-48-31-002

San Antonio
University of Texas Health Science Center at San Antonio Program
University of Texas Medical School at San Antonio
St Luke's Lutheran Hospital
University Hospital-South Texas Medical Center
Program Director:
David P Green, MD
The Hand Center of San Antonio
Ortho-Hand Surgery
7940 Floyd Curl Dr #900
San Antonio, TX 78229
210 614-7035
Length: 1 Year(s) Total Positions: 2
Program ID: 283-48-21-1035

Utah
Salt Lake City
University of Utah Program
University of Utah Medical Center
Program Director:
Graham D Lister, MD
Primary Children's Medical Center
100 N Medical Dr
Ste 4500
Salt Lake City, UT 84113-9901
801 588-3680
Length: 1 Year(s) Total Positions: 2
Program ID: 283-49-21-048

Washington
Seattle
University of Washington Program
University of Washington School of Medicine
Harborview Medical Center
University of Washington Medical Center
Program Director:
Thomas Trumble, MD
University of Washington Medical Center
Dept of Orthopaedics RR-20
Seattle, WA 98195
206 543-3960
Length: 1 Year(s) Total Positions: 2
Program ID: 283-54-21-083

Hand Surgery (Plastic Surgery)

California
Pasadena
University of Southern California Program
Southern California Kaiser Permanente Medical Group
Kaiser Foundation Hospital (West Los Angeles)
Kaiser Foundation Hospital (Los Angeles)
Kaiser Foundation Hospital (Woodland Hills)
Los Angeles County- USC Medical Center
Program Director:
Bradford W Edgerton, MD
Dept of Plastic Surgery/Kaiser Permanente Medical Center
West Los Angeles
6041 Cadillac Ave
Los Angeles, CA 90034
213 857-2758
Length: 1 Year(s) Total Positions: 1
Program ID: 803-05-21-014

San Francisco
University of California (San Francisco) Program
University of California (San Francisco) School of Medicine
Davies Medical Center
University of California (San Francisco) Medical Center
Program Director:
Harry J Brunicri, MD
Microsurgical Replantation-Transportation
Davies Medical Center
45 Castro St 140 N
San Francisco, CA 94114
41 566-6136
Length: 1 Year(s) Total Positions: 4
Program ID: 283-05-31-017

Illinois
Chicago
Rush-Presbyterian-St Luke's Medical Center Program*
Rush-Presbyterian-St Luke's Medical Center
Program Director:
Robert R Scheneck, MD
Rush-Presbyterian-St Luke's Medical Center
1725 W Harrison St
Ste 263
Chicago, IL 60613-3824
312 735-5426
Length: 1 Year(s) Total Positions: 1
Program ID: 363-16-21-003

* Updated Information not provided.
Kansas

Kansas City

University of Kansas Medical Center Program
University of Kansas School of Medicine
University of Kansas Medical Center

Program Director:
Lynn D. Ketchum, MD
Fred N. Wood, MD
1201 W. 10th St
Overland Park, KS 66212
913 402-2737
Length: Year(s)
Program ID: 365-19-21-021

Massachusetts

Boston

Beth Israel Hospital Program
Beth Israel Hospital
Cambridge Hospital
Mount Auburn Hospital

Program Director:
Joseph Upton, MD
800 Boylston St
Ste 202
Chestnut Hill, MA 02167
617 739-1875
Length: Year(s)
Program ID: 365-24-31-012

Brigham and Women’s Hospital/Children’s Hospital Program
Brigham and Women’s Hospital
Children’s Hospital

Program Director:
Julian T. Frihas, MD
86 Francis St
Boston, MA 02116
617 732-8990
Length: Year(s)
Program ID: 365-24-21-011

Massachusetts General Hospital Program
Massachusetts General Hospital

Program Director:
James W. May, MD
Massachusetts General Hospital
15 Parkman St
Suite 653
Boston, MA 02114
617 227-8230
Length: Year(s)
Program ID: 365-24-21-001

Michigan

Detroit

Wayne State University/Detroit Medical Center Program
Wayne State University School of Medicine
Harper Hospital

Program Director:
Michael M. Mehta, MB MS
Dept. of Surgery
Harper Hosp
3900 John Rd
Detroit, MI 48201
313 745-8773
Length: Year(s)
Program ID: 365-23-21-020

Missouri

St Louis

Washington University Program
Washington University School of Medicine
Barnes Hospital

Program Director:
Paul M. Weeks, MD
One Barnes Hospital Plaza
Ste 17424
St. Louis, MO 63110
314 362-4585
Length: Year(s)
Program ID: 365-26-21-005

New York

New York

New York University Medical Center Program
New York University Medical Center
Bellevue Hospital Center

Program Director:
Robert W. Beasley, MD
Institute of Reconstructive Plastic Surgery
New York University Medical Center
650 First Ave
New York, NY 10016
212 263-6694
Length: Year(s)
Program ID: 365-35-21-010

Pennsylvania

Pittsburgh

University Health Center of Pittsburgh Program
University Health Center of Pittsburgh
Presbyterian-University Hospital/UPMC

Program Director:
Kenneth C. Shepherd, MD
University of Pittsburgh
Div. of Plastic Surgery
667 Scaife Hall
Pittsburgh, PA 15261
412 641-6628
Length: Year(s)
Program ID: 365-41-21-016

* Updated information not provided.

Graduate Medical Education Directory 437
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</thead>
</table>

### Texas
**Dallas**

**University of Texas Southwestern Medical School Program**
- University of Texas Southwestern Medical School
- Dallas County Hospital District-Parkland Memorial Hospital
- Texas Scottish Rite Hospital for Children
  
  **Program Director:**
  - Harry H Orenstein, MD
  - Marybeth Eazir, MD
  - University of Texas Southwestern Medical Center
  - Div of Plastic Surgery
  - 5353 Harry Hines Blvd
  - Dallas, TX 75390-9132
  - 214-648-3961
  - Length: 2 Year(s)  Total Positions: 1
  - Program ID: 983-48-21-004

### Houston

**Baylor College of Medicine Program**
- Baylor College of Medicine
- Harris County Hospital District-Texas General Hospital
- St Luke's Episcopal Hospital
- Veterans Affairs Medical Center (Houston)
  
  **Program Director:**
  - Fred B Kessler, MD
  - St Luke's and Texas Children's Hospitals
  - 6524 Fannin #2730
  - Houston, TX 77030
  - 713-796-4860
  - Length: 2 Year(s)  Total Positions: 2
  - Program ID: 983-48-31-008

### Virginia
**Charlottesville**

**University of Virginia Program**
- University of Virginia Medical Center
  
  **Program Director:**
  - Raymond F Morgan, MD
  - University of Virginia Health Sciences Center
  - Dept of Plastic Surgery
  - PO Box 976
  - Charlottesville, VA 22908
  - 804-982-1254
  - Length: 2 Year(s)  Total Positions: 1
  - Program ID: 983-51-21-013

### Wisconsin
**Milwaukee**

**Medical College of Wisconsin Program**
- Medical College of Wisconsin Affiliated Hospitals Inc
- Children's Hospital of Wisconsin
- Froedtert Memorial Lutheran Hospital
- John H. Dunn Hospital
  
  **Program Director:**
  - Hari N Mathur, MD
  - Medical College of Wisconsin Dept of Plastic Surgery
  - MCW Clinics at Froedtert
  - 9200 W Wisconsin Ave
  - Milwaukee, WI 53226-3596
  - 414-454-3477
  - Length: 2 Year(s)  Total Positions: 2
  - Program ID: 983-56-21-007

### Hand Surgery (Surgery-General)

### Kentucky
**Louisville**

**University of Louisville Program**
- University of Louisville School of Medicine
- Jewish Hospital
  
  **Program Director:**
  - Thomas J Wallis, MD
  - 220 Abraham Flexner Way
  - One Medical Center Plaza Ste 800
  - Louisville, KY 40202
  - 602-562-8312
  - Length: 2 Year(s)  Total Positions: 3
  - Program ID: 983-60-21-003

### Maryland
**Baltimore**

**Union Memorial Hospital Program**
- Union Memorial Hospital
  
  **Program Director:**
  - B F Shaw Wilga, MD
  - The Union Memorial Hospital
  - Raymond M Curtis Hard Center
  - 201 E University Pkwy
  - Baltimore, MD 21218
  - 410-554-2770
  - Length: 2 Year(s)  Total Positions: 3
  - Program ID: 983-23-21-001

### Hematology (Internal Medicine)

### Arkansas
**Little Rock**

**University of Arkansas for Medical Sciences Program**
- University of Arkansas College of Medicine
- John L McCrory Memorial Veterans Hospital
- University Hospital of Arkansas
  
  **Program Director:**
  - Susan C Gupta, MD
  - Arthur Hart, MD
  - University of Arkansas for Medical Sciences
  - 4500 W Markham
  - Slot 528
  - Little Rock, AR 72205-1799
  - 501-686-5222
  - Length: 2 Year(s)  Total Positions: 13
  - Program ID: 145-04-21-006

### California
**La Jolla**

**Scripps Clinic and Research Foundation Program**
- Scripps Clinic and Research Foundation
  
  **Program Director:**
  - Michael F Koots, MD
  - Dept of Graduate Medical Education 493C
  - Scripps Clinic & Research Fnd
  - 10666 N Torrey Pines Rd
  - La Jolla, CA 92037-1001
  - 619-584-3882
  - Length: 2 Year(s)  Total Positions: 5
  - Program ID: 145-05-21-002

### Los Angeles
**UCLA Medical Center Program**
- UCLA School of Medicine
- UCLA Medical Center
  
  **Program Director:**
  - Robert A Flavin, MD
  - UCLA Sch of Med
  - Ctr for the Hlth Sci
  - Los Angeles, CA 90024-1706
  - 213-825-5788
  - Length: 2 Year(s)  Total Positions: 17
  - Program ID: 145-05-11-112

**University of Southern California Program**
- Los Angeles County-USC Medical Center
  
  **Program Director:**
  - Alexandra Levine, MD
  - University of Southern California School of Medicine
  - Norris Cancer Hospital
  - 1441 Eastlake Ave Rm 801
  - Los Angeles, CA 90033
  - 213-224-5412
  - Length: 2 Year(s)  Total Positions: 6
  - Program ID: 145-05-21-044

* Updated Information not provided.  

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Orange
University of California (Irvine) Program
University of California (Irvine) Medical Center
Long Beach Memorial Medical Center
Veterans Affairs Medical Center (Long Beach)
Program Director:
Nora Xu, MD
UCI Medical Center
Div of Hematology/Oncology
101 City Dr
Orange, CA 92665-8110
714 464-6192
Length: 2 Year(s)  Total Positions: 6
Program ID: 145-05-21-130

San Francisco
University of California (San Francisco) Program*
University of California (San Francisco) School of Medicine
San Francisco General Hospital Medical Center
University of California (San Francisco) Medical Center
Veterans Affairs Medical Center (San Francisco)
Program Director:
Marc Shuman, MD
UCSF Cancer Research Institute
565 Parnassus Box 0128
San Francisco, CA 94143
415 476-5701
Length: 2 Year(s)  Total Positions: 6
Program ID: 145-05-21-132

Stanford
Stanford University Program*
Stanford University Hospital
Veterans Affairs Medical Center (Palo Alto)
Program Director:
Stanley L Schrier, MD
Stanford University Medical Center
Div of Hematology Rm 5161
Stanford, CA 94305-5112
415 723-5007
Length: 2 Year(s)  Total Positions: 8
Program ID: 145-05-21-020

Torrance
Los Angeles County-Harbor-UCLA Medical Center Program
Los Angeles County-Harbor-UCLA Medical Center
Program Director:
Kouichi H Tanaka, MD
Los Angeles County-Harbor-UCLA Medical Center
100W W Carson St Box 400
Torrance, CA 90608-4910
310 222-2404
Length: 2 Year(s)  Total Positions: 1
Program ID: 145-05-11-151

Colorado
Denver
University of Colorado Program*
University of Colorado Health Sciences Center
Denver Health and Hospitals
Veterans Affairs Medical Center (Denver)
Program Director:
Catherine E Klein, MD
University of Colorado Medical Center
4000 E Ninth Ave
Box B-177
Denver, CO 80262
303 727-880
Length: 2 Year(s)  Total Positions: 6
Program ID: 145-07-21-066

Connecticut
New Haven
Yale-New Haven Medical Center Program
Yale-New Haven Hospital
Program Director:
Edward J Benzi Jr, MD
Yale University School of Medicine Dept of Int Med
Hematology Section WW 403
933 Cedar St
New Haven, CT 06519-8056
203 785-4144
Length: 2 Year(s)  Total Positions: 7
Program ID: 145-08-21-021

District of Columbia
Washington
George Washington University Program
George Washington University School of Medicine
George Washington University Hospital
Veterans Affairs Medical Center (Washington DC)
Program Director:
Catherine M Broome, MD
George Washington Univ Hospital Dept of Medicine
2150 Pennsylvania Ave NW
Washington, DC 20037
202 994-4200
Length: 2 Year(s)  Total Positions: 5
Program ID: 145-16-21-099

Georgetown University Program
Georgetown University Hospital
Program Director:
Edward P Gishman, MD
Georgetown University Hospital
Div of Hematology/Oncology
3800 Reservoir Rd NW
Washington, DC 20007
202 687-0198
Length: 2 Year(s)  Total Positions: 4
Program ID: 145-10-21-078

Howard University Program*
Howard University Hospital
District of Columbia General Hospital
Program Director:
Elliott Perlin, MD
Howard University Hospital
2041 Georgia Ave NW
Ste 69-49
Washington, DC 20060
202 865-1511
Length: 2 Year(s)  Total Positions: 2
Program ID: 145-10-21-174

Florida
Gainesville
University of Florida Program
University of Florida College of Medicine
Shands Hospital at the University of Florida
Veterans Affairs Medical Center (Gainesville)
Program Director:
Craig S Kitchens, MD
Roy S Weiner, MD
University of Florida Dept of Medicine
1600 SW Archer Rd
Box 100277 JHMHC
Gainesville, FL 32610
904 392-3301
Length: 2 Year(s)  Total Positions: 2
Program ID: 145-11-21-606

Illinois
Chicago
Cook County Hospital Program*
Cook County Hospital
Program Director:
Ashok R Patel, MD
Cook County Hospital
1825 W Harrison
Chicago, IL 60612
Length: 2 Year(s)  Total Positions: 8
Program ID: 145-16-12-037

Rush-Presbyterian-St Luke’s Medical Center Program*
Rush-Presbyterian-St Luke’s Medical Center
Program Director:
Walter Fried, MD
Rush-Presbyterian-St Luke’s Medical Center
1653 W Congress Pkwy
Section of Hematology
Chicago, IL 60612-3984
312 942-2354
Length: 2 Year(s)  Total Positions: 2
Program ID: 145-16-11-118

Evanston
St Francis Hospital of Evanston Program
St Francis Hospital of Evanston
Northwestern Memorial Hospital
Program Director:
Thomas N Gunn, MD
St Francis Hospital of Evanston
365 Ridge Ave
Evanston, IL 60202
708 482-6327
Length: 2 Year(s)  Total Positions: 3
Program ID: 145-16-11-193

* Updated information not provided.
Maywood
Loyola University Program*
Foster G McGaw Hospital-Loyola University of Chicago
Edward J Hinas Jr Veterans Affairs Hospital
Program Director:
Kenneth C Mietuch, MD
Loyola University Stritch School of Medicine
Section of Hematology/Oncology
2100 S First Ave
Maywood, IL 60153
708 216-5011
Length: 2 Year(s) Total Positions: 7
Program ID: 145-18-21-003

Kansas
Kansas City
University of Kansas Medical Center Program
University of Kansas School of Medicine
University of Kansas Medical Center
Program Director:
David C Bodenstedter, MD
University of Kansas Medical Center
Hematology/Oncology Div
3001 Rainbow Blvd
Kansas City, KS 66160-7233
913 586-6277
Length: 2 Year(s) Total Positions: 2
Program ID: 145-19-21-100

Kentucky
Lexington
University of Kentucky Medical Center Program
University Hospital-Albert B Chandler Medical Center
Veterans Affairs Medical Center (Lexington)
Program Director:
William J John, MD
University Hospital-Albert B Chandler Medical Center
Hematology/Oncology
Markey Cancer Ctr
Lexington, KY 40536-0604
606 257-4000
Length: 2 Year(s) Total Positions: 6
Program ID: 145-20-21-184

Louisiana
New Orleans
Louisiana State University Program
Louisiana State University School of Medicine
Medical Center of Louisiana at New Orleans-LSU Division
Medical Center of Louisiana University Hospital Campus
Program Director:
Robert Welth, MD
LSU Med Ctr
1542 Tulane Ave
New Orleans, LA 70112
504 568-9243
Length: 2 Year(s) Total Positions: 1
Program ID: 145-21-21-173

Maryland
Baltimore
Johns Hopkins University Program
Johns Hopkins University School of Medicine
Johns Hopkins Hospital
Program Director:
Chu V Dang, MD/PhD
Johns Hopkins University School of Medicine
Dept of Medicine
Baltimore, MD 21205-2106
410 614-2773
Length: 2 Year(s) Total Positions: 1
Program ID: 145-23-11-044

Bethesda
National Institutes of Health Clinical Center Program
NIH Warren Grant Magnuson Clinical Center
Program Director:
Cynthia E Dustar, MD
Clinical Hematology Branch Nati Heart Lung and Blood Inst
9000 Rockville Pike
Bldg 10 Rom 7J103
Bethesda, MD 20892
301 540-9093
Length: 2 Year(s) Total Positions: 16
Program ID: 145-25-21-177

National Naval Medical Center (Bethesda) Program
National Naval Medical Center (Bethesda)
Program Director:
John C Phares, MD
National Naval Medical Center
Dept of Medicine
Bethesda, MD 20889-5600
301 266-1180
Length: 2 Year(s) Total Positions: 6
Program ID: 145-23-11-184

Massachusetts
Boston
Brigham and Women’s Hospital Program
Brigham and Women’s Hospital
Program Director:
Robert I Handin, MD
Brigham and Women’s Hospital
75 Francis St
Boston, MA 02115
617 738-5040
Length: 2 Year(s) Total Positions: 21
Program ID: 145-24-21-005

Massachusetts General Hospital Program
Massachusetts General Hospital
Program Director:
Irene Kuter, MD, PhD
Massachusetts General Hospital
100 Vine St
Cox Bldg 285
Boston, MA 02114
617 726-9743
Length: 2 Year(s) Total Positions: 7
Program ID: 145-26-11-057

St Elizabeth’s Medical Center of Boston Program
St Elizabeth’s Medical Center of Boston
Program Director:
Jiri Palek, MD
St Elizabeth’s Medical Center
770 Cambridge St
Boston, MA 02135
617 789-2560
Length: 2 Year(s) Total Positions: 6
Program ID: 145-24-21-048

Michigan
Ann Arbor
University of Michigan Program
University of Michigan Hospitals
Veterans Affairs Medical Center (Ann Arbor)
Program Director:
Kemp B Coase, MD
University of Michigan Medical Center
102 Observatory
Ann Arbor, MI 48109-0724
313 365-6110
Length: 2 Year(s) Total Positions: 12
Program ID: 145-25-21-167

East Lansing
Michigan State University Program
Michigan State University College of Human Medicine
St Lawrence Hospital and HealthCare Services
Program Director:
Kenneth A Schwartz, MD
Michigan State University Hospitals
B 226 B Life Sciences Bldg
Dept of Medicine
East Lansing, MI 48824
517 432-3729
Length: 2 Year(s) Total Positions: 4
Program ID: 145-25-21-068

Mississippi
Jackson
University of Mississippi Medical Center Program
University of Mississippi School of Medicine
University Hospital
Veterans Affairs Medical Center (Jackson)
Program Director:
Joe C Pfeil, MD
University of Mississippi Medical Center
2500 N State St
Jackson, MS 39216-4505
601 984-5625
Length: 2 Year(s) Total Positions: 5
Program ID: 145-27-21-171

* Updated information not provided.
Missouri
Columbia
University of Missouri-Columbia Program
University of Missouri-Columbia School of Medicine
Harry S. Truman Memorial Veterans Hospital
University and Children's Hospital
Program Director:
Michael Perry, MD
University of Missouri Health Sciences Center
Ellis Fischel Cancer Center
115 Business Loop 70 W
Columbia, MO 65203-3290
511 562-5163
Length: 2 Year(s) Total Positions: 3
Program ID: 145-28-214069

New York
Albany
Albany Medical Center Program
Albany Medical Center Hospital
Program Director:
Peter T Burkart, MD
Albany Medical College
Div of Hematology (A-52)
47 New Scotland Ave
Albany, NY 12208
518 262-5695
Length: 2 Year(s) Total Positions: 2
Program ID: 145-35-31-025

Bronx
Albert Einstein College of Medicine Program
Albert Einstein College of Medicine of Yeshiva University
Bronx Municipal Hospital Center
Montefiore Medical Center-Henry and Lucy Moses Division
Program Director:
Shirley P. Levine, MD
Montefiore Medical Center
111 E 210th St
Bronx, NY 10467
718 820-7000
Length: 2 Year(s) Total Positions: 6
Program ID: 145-35-32-059

Brooklyn
Brooklyn Hospital Center Program
Brooklyn Hospital Center
Woodhull Medical and Mental Health Center
Program Director:
Angelica Z. Moioli, MD
The Brooklyn Hospital Center
Div of Hematology/Oncology
121 DeKalb Ave
Brooklyn, NY 11201
718 250-5660
Length: 2 Year(s) Total Positions: 2
Program ID: 145-35-32-161

Coney Island Hospital Program
Coney Island Hospital
Program Director:
Joel M. Schwartz, MD
Coney Island Hospital
2001 Ocean Pkwy BN8
Brooklyn, NY 11224
718 365-4782
Length: 2 Year(s) Total Positions: 4
Program ID: 145-35-31-119

Interfaith Medical Center Program
Interfaith Medical Center
Program Director:
Richard S. Stark, MD
Interfaith Medical Center
665 Prospect Pk
Brooklyn, NY 11238
718 935-7870
Length: 2 Year(s) Total Positions: 2
Program ID: 145-35-32-128

Long Island College Hospital Program*
Long Island College Hospital
Program Director:
Frank W. Di Pillo, MD
Long Island College Hospital
340 Henry St
Brooklyn, NY 11201
718 780-9021
Length: 2 Year(s) Total Positions: 3
Program ID: 145-35-11-650

New York Methodist Hospital Program
New York Methodist Hospital
Program Director:
Abdel F. Elzaine, MD
The Methodist Hosp
506 Sixth St
Brooklyn, NY 11215
718 790-8594
Length: 2 Year(s) Total Positions: 3
Program ID: 145-35-11-122

Buffalo
SUNY at Buffalo Graduate Medical-Dental Education Consortium Program*
SUNY at Buffalo Grad Medical-Dental Education Consortium
Buffalo General Hospital
Erie County Medical Center
Veterans Affairs Medical Center (Buffalo)
Program Director:
Gerald L. Logue, MD
VA Medical Center
Div of Hematology
385 Bailey Ave
Buffalo, NY 14215
716 852-3666
Length: 2 Year(s) Total Positions: 5
Program ID: 145-35-31-008

East Meadow
SUNY at Stony Brook (East Meadow) Program
Nassau County Medical Center
Program Director:
Stephen Peffer, MD
Nassau County Medical Center
2201 Hempstead Tpke
East Meadow, NY 11554-5406
516 572-4713
Length: 2 Year(s) Total Positions: 3
Program ID: 145-35-31-1094

Manhasset
North Shore University Hospital Program
North Shore University Hospital
Program Director:
Vincent Vigna, MD
North Shore University Hospital
Dept of Medicine
300 Community Dr
Manhasset, NY 11030-3890
516 563-8656
Length: 2 Year(s) Total Positions: 2
Program ID: 145-35-32-131

* Updated information not provided.

Graduate Medical Education Directory
### New York

**New York Hospital/Cornell Medical Center Program**
- **Memorial Sloan-Kettering Cancer Center**
  - **Program Director:** Dean Bajorin, MD
  - **Memorial Sloan-Kettering Cancer Center 1275 York Ave, New York, NY 10021**
  - **Length:** 2 Year(s)
  - **Program ID:** 146-36-01-145

**New York University Medical Center Program**
- **New York University Medical Center Bellevue Hospital Center**
  - **Program Director:** Simon Karpatkin, MD
  - **New York University Medical Center 500 First Ave, New York, NY 10016**
  - **Length:** 2 Year(s)
  - **Program ID:** 146-36-01-104

**St Luke's-Roosevelt Hospital Center (Roosevelt) Program**
- **St Luke's-Roosevelt Hospital Center**
  - **St Luke's-Roosevelt Hospital Center-Roosevelt Division**
    - **Program Director:** Harvey J Weiss, MD
    - **St Luke's-Roosevelt Hospital Center 1000 Tenth Ave, New York, NY 10019**
    - **Length:** 2 Year(s)
    - **Program ID:** 146-36-11-001

**St Luke's-Roosevelt Hospital Center (St Luke's) Program**
- **St Luke's-Roosevelt Hospital Center**
  - **St Luke's-Roosevelt Hospital Center-St Luke's Division**
    - **Program Director:** John F Bertles, MD
    - **St Luke's-Roosevelt Hospital Center-St Luke's Division 55 E 11th St, New York, NY 10003**
    - **Length:** 2 Year(s)
    - **Program ID:** 146-36-21-160

### Rochester

**University of Rochester Program**
- **Strong Memorial Hospital of the University of Rochester**
  - **Program Director:** Victor J Markert, MD
  - **University of Rochester 601 Elmwood Ave PO Box 81 Rochester, NY 14642**
  - **Length:** 2 Year(s)
  - **Program ID:** 146-36-11-144

### Syracuse

**SUNY Health Science Center at Syracuse Program**
- **University Hospital-SUNY Health Science Center at Syracuse**
  - **Veterans Affairs Medical Center (Syracuse)**
    - **Program Director:** Jonathan Wright, MD
    - **Dept of Medicine SUNY Health Science Center 750 E Adams St Syracuse, NY 13210**
    - **Length:** 2 Year(s)
    - **Program ID:** 146-35-31-092

### Valhalla

**New York Medical College at Westchester County Medical Center Program**
- **New York Medical College**
  - **Lincoln Medical and Mental Health Center Metropolitan Hospital Center**
    - **Our Lady of Mercy Medical Center**
    - **St Vincent's Medical Center of Richmond**
    - **Westchester County Medical Center**
    - **Program Director:** Robert L. Lerner, MD
    - **New York Medical College 1000 Tenth Ave New York, NY 10019**
    - **Length:** 2 Year(s)
    - **Program ID:** 146-35-31-011

### Ohio

**Cincinnati**

**University of Cincinnati Hospital Group Program**
- **University of Cincinnati Hospital Veterans Affairs Medical Center (Cincinnati)**
  - **Program Director:** Louis E Schroeder, MD
  - **Barrett Cancer Center/University Hospital 234 Goodman Ave Cincinnati, OH 45267-0501**
    - **Length:** 2 Year(s)
    - **Program ID:** 146-36-21-071

### Cleveland

**Case Western Reserve University Program**
- **University Hospitals of Cleveland MetroHealth Medical Center**
  - **Program Director:** Clark W Dietelhorst, MD
  - **Case Western Reserve University**
    - **Hematology/Oncology Division 10900 Euclid Ave (BBB)**
  - **Cleveland, OH 44106-4957**
    - **Length:** 2 Year(s)
    - **Program ID:** 146-35-31-109

### Oregon

**Portland**

**Oregon Health Sciences University Program**
- **Oregon Health Sciences University Hospital**
  - **Veterans Affairs Medical Center (Portland)**
    - **Program Director:** Gerald M Segal, MD
    - **Oregon Health Sciences University L500 2331 SW Sam Jackson Park Rd Portland, OR 97201-3988**
    - **Length:** 2 Year(s)
    - **Program ID:** 145-40-01-105

### Pennsylvania

**Philadelphia**

**MCPH/Medical College of Pennsylvania Hospital Program**
- **Medical College of Pennsylvania Hospital**
  - **Program Director:** Ronald E Joseph, MD
  - **Medical College of Pennsylvania Hospital 3300 Henry Ave Philadelphia, PA 19129**
    - **Length:** 2 Year(s)
    - **Program ID:** 145-41-21-105

**Presbyterian Medical Center of Philadelphia Program**
- **Presbyterian Medical Center of Philadelphia**
  - **Program Director:** Rene Rodstein-Rubin, MD
  - **Presbyterian Medical Center of Philadelphia 51 N 30th St Philadelphia, PA 19104-2640**
    - **Length:** 2 Year(s)
    - **Program ID:** 145-41-21-178

**Temple University Program**
- **Temple University Hospital Fox Chase Cancer Center**
  - **Program Director:** Robert W Coleman, MD
  - **Temple University School of Medicine**
    - **Thrombosis Research Center 3400 N Broad St Philadelphia, PA 19140**
    - **Length:** 2 Year(s)
    - **Program ID:** 145-41-21-003

**Thomas Jefferson University Program**
- **Thomas Jefferson University Hospital Program**
  - **Program Director:** Sanford S Shapiro, MD
  - **Cardiovascular Foundation for Hematologic Research Division of Hematology**
    - **1015 Walnut St Philadelphia, PA 19107-5009**
    - **Length:** 2 Year(s)
    - **Program ID:** 145-41-21-031

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* Updated information not provided.
University of Pennsylvania Program
Hospital of the University of Pennsylvania
Program Director:
Stephen C. Emerson, MD
Hematology-Oncology Div
University of Pennsylvania
1011 33rd St, Suite 480
Philadelphia, PA 19104-6100
215-662-3510
Length: 2 Year(s) Total Positions: 13
Program ID: 145-41-21-019

Pittsburgh
University Health Center of Pittsburgh Program
University of Pittsburgh Medical Center
Program Director:
David C. Smith, MD
Mountaineer University Hospital
200 Lothrop Street 7 Main N
Pittsburgh, PA 15213
412-685-5500
Length: 2 Year(s) Total Positions: 18
Program ID: 145-41-21-040

Western Pennsylvania Hospital Program
Western Pennsylvania Hospital
Program Director:
Richard S. Shadduck, MD
Western Pennsylvania Cancer Institute
4900 Friendship Ave
Pittsburgh, PA 15224
412-577-6071
Length: 2 Year(s) Total Positions: 3
Program ID: 145-41-21-179

Puerto Rico
Río Piedras
San Juan City Hospital Program*
San Juan City Hospital
University Hospital of Río Piedras
Veterans Affairs Medical Center (San Juan)
Program Director:
Luis Bes, MD
San Juan Municipal Hospital Dept of Medicine
909 758-7000
Length: 2 Year(s) Total Positions: 3
Program ID: 145-41-21-058

San Juan
University of Puerto Rico Program
University of Puerto Rico School of Medicine
Program Director:
Enrique Velázquez-Márquez, MD
University of Puerto Rico School of Medicine
Box 5657
San Juan, PR 00935
809-754-3895
Length: 2 Year(s)
Program ID: 145-41-21-107

Rhode Island
Providence
Brown University (Roger Williams) Program
Roger Williams Medical Center
Memorial Hospital of Rhode Island
Miriam Hospital
Veterans Affairs Medical Center (Providence)
Program Director:
Mark Alter, MD
Brown University
Box G PMU
Providence, RI 02912
401-722-6000
Length: 2 Year(s) Total Positions: 6
Program ID: 145-43-31-041

Tennessee
Memphis
University of Tennessee Program
University of Tennessee College of Medicine
Baptist Memorial Hospital
Regional Medical Center at Memphis
Veterans Affairs Medical Center (Memphis)
Program Director:
Alvin M. Mazer, MD
The University of Tennessee College of Medicine
3360 Union Ave
Memphis, TN 38133
901-448-5517
Length: 2 Year(s) Total Positions: 6
Program ID: 145-47-21-125

Texas
Houston
Baylor College of Medicine Program*
Baylor College of Medicine
Houston
Harris County Hospital District-Ben Taub General Hospital
Methodist Hospital
Veterans Affairs Medical Center (Houston)
Program Director:
Lawrence Rice, MD
Baylor College of Medicine
Texas Medical Center
6555 Fannin Mall Station 902
Houston, TX 77030
713-798-3330
Length: 2 Year(s)
Program ID: 145-48-21-070

San Antonio
University of Texas Health Science Center at San Antonio Program
University of Texas Health Science Center at San Antonio
Audie L Murphy Memorial Veterans Hospital (San Antonio)
San Antonio Hospital-South Texas Medical Center
Program Director:
Geoffrey R. Weiss, MD
University of Texas Health Science Center
Div of Medical Oncology
7700 Floyd Curl Dr
San Antonio, TX 78284-7884
210-671-6186
Length: 2 Year(s)
Program ID: 145-48-21-059

Temple
Texas A&M College of Medicine-Scott and White Program
Scott and White Memorial Hospital
Program Director:
John J. Rinkehart, MD
Graduate Medical Education
Scott and White Hospital
2401 Spring St
Temple, TX 76508
800-346-4463
Length: 2 Year(s) Total Positions: 4
Program ID: 145-49-21-181

Utah
Salt Lake City
University of Utah Program
University of Utah Medical Center
Veterans Affairs Medical Center (Salt Lake City)
Program Director:
James P. Kuehne, MD
Div of Hematology-Oncology
University of Utah Medical Center
50 North Medical Dr
Salt Lake City, UT 84132
801-581-0734
Length: 2 Year(s) Total Positions: 5
Program ID: 145-49-21-146

Virginia
Charlottesville
University of Virginia Program
University of Virginia Medical Center
Program Director:
Charles Hoss, MD
Div of Hematology and Oncology
University of Virginia Hospitals
Dept of Medicine Box 447
Charlottesville, VA 22908
804-924-2572
Length: 2 Year(s) Total Positions: 2
Program ID: 145-49-21-017

* Updated information not provided.
Washington
Seattle
University of Washington Program
University of Washington School of Medicine
University of Washington Medical Center
Program Director:
John M Harlan, MD
University Medical Center
1609 NE Pacific St Rm 10
Seattle, WA 98105
206 543-3360
Length: 2 Year(s)  Total Positions: 12
Program ID: 145-56-21-077

Wisconsin
Madison
University of Wisconsin Program
University of Wisconsin Hospital and Clinics
William S Middleton Veterans Hospital
Program Director:
Ron C Williams, MD PhD
University of Wisconsin Hospital and Clinics
600 Highland Ave Rm H4/534
Madison, WI 53792-5166
608 255-5267
Length: 2 Year(s)  Total Positions: 6
Program ID: 145-56-21-109

Milwaukee
Medical College of Wisconsin Program
Medical College of Wisconsin Affiliated Hospitals Inc
Clement Z Zablocki Veterans Affairs Medical Center
John L Dovey Hospital
Program Director:
Tom Anderson, MD
Medical College of Wisconsin
8700 W Wisconsin Ave
Box 133
Milwaukee, WI 53226
414 225-4559
Length: 2 Year(s)  Total Positions: 6
Program ID: 145-56-01-042

Hematology
(Pathology-Anatomic and Clinical)
Arkansas
Little Rock
University of Arkansas for Medical Sciences Program*
University of Arkansas College of Medicine
John L McClellan Memorial Veterans Hospital
University of Arkansas Hospital of Arkansas
Program Director:
James T Flick, MD
University of Arkansas Medical Center
Dept of Pathology
4301 W Markham
Little Rock, AR 72205
501 686-7015
Length: 1 Year(s)  Total Positions: 4
Program ID: 311-04-21-038

California
Duarte
City of Hope National Medical Center
Program
City of Hope National Medical Center
Program Director:
Russell K Byrne, MD
City of Hope National Medical Center
1500 E Duarte Rd
Duarte, CA 91010
626 355-6111
Length: 1 Year(s)  Total Positions: 4
Program ID: 311-05-21-040

La Jolla
Scripps Clinic and Research Foundation Program*
Scripps Clinic and Research Foundation
Program Director:
Douglas J Ellison, MD
10555 N Torrey Pines Rd
La Jolla, CA 92037
119 564-8804
Length: 1 Year(s)  Program ID: 311-05-31-054

Los Angeles
Cedars-Sinai Medical Center Program
Cedars-Sinai Medical Center
Program Director:
Stephen Lee, MD
6700 Beverly Blvd
Dept of Pathology & Lab Medicine
Div of Hematology & Immunology
Los Angeles, CA 90048
310 925-5471
Length: 1 Year(s)  Total Positions: 2
Program ID: 311-05-21-016

University of Southern California Program
Los Angeles County-USC Medical Center
Program Director:
Robert V Priebe, MD
Bhart N Nathwani, MD
University of Southern California School of Medicine
Dept of Pathology
2025 S контрол
Los Angeles, CA 90033
213 226-7020
Length: 1 Year(s)  Total Positions: 2
Program ID: 311-05-21-017

Sacramento
University of California (Davis) Program
University of California (Davis) Medical Center
University of California (Davis) School of Medicine
Program Director:
Edward C Larkin, MD
University of California Davis Medical Center
3255 Stockton Blvd
Sacramento, CA 95817-2283
916 284-9331
Length: 1 Year(s)  Total Positions: 1
Program ID: 311-05-21-069

San Francisco
University of California (San Francisco) Program*
University of California (San Francisco) School of Medicine
University of California (San Francisco) Medical Center
Program Director:
Laurence Cenash, MD
Laboratory Medicine-212
32 Fruit St
Boston, MA 02114
617 726-2015
Length: 1 Year(s)  Program ID: 311-05-21-063

Connecticut
Hartford
Hartford Hospital Program
Hartford Hospital
Program Director:
William T Pastuszak, MD
Hartford Hospital
80 Seymour St
Hartford, CT 06103-5037
203 545-3098
Length: 1 Year(s)  Total Positions: 2
Program ID: 311-08-11-021

Florida
Gainesville
University of Florida Program*
University of Florida College of Medicine
Shands Hospital at the University of Florida
Program Director:
Raul C Bryan, MD
Dept of Pathology
Shands Teaching Hospital
PO Box 100775
Gainesville, FL 32610-0775
904 392-3477
Length: 1 Year(s)  Program ID: 311-11-21-061

* Updated information not provided.
Georgia

Atlanta

Emory University Program
Emory University School of Medicine
Emory University Hospital
Program Director:
Diane C. Parhi, MD
Education Office Dept of Pathology
H-189 Emory University Hospital
1367 Clifton Rd NE
Atlanta, GA 30322-8110
404 772-4283
Length: 1 Year(s) Total Positions: 1
Program ID: 311-12-21-027

Illinois

Chicago

University of Chicago Program
University of Chicago Hospitals
Program Director:
James W. Vardiman, MD
University of Chicago Hospitals
Dept of Pathology
5841 S Maryland MC0008
Chicago, IL 60637
312 753-3106
Length: 1 Year(s) Total Positions: 1
Program ID: 311-14-21-037

University of Illinois College of Medicine at Chicago Program*
University of Illinois College of Medicine at Chicago
Michael Reese Hospital and Medical Center
Program Director:
Raul A. Braddock, MD
Div of Clinical Pathology MC 760
UIC College of Medicine Box 6908
Chicago, IL 60680
312 996-3119
Length: 1 Year(s) Program ID: 311-16-21-041

Maywood

Loyola University Program
Foster G McGaw Hospital-Loyola University of Chicago
Edward Hines Jr Veterans Affairs Hospital
Program Director:
Zedell Mazar, MD PhD
Loyola University Medical School
Dept of Pathology (Hematopathology)
3100 S First Ave
Maywood, IL 60153
708 216-3290
Length: 1 Year(s) Total Positions: 4
Program ID: 311-16-21-018

Indiana

Indianapolis

Indiana University Medical Center Program
Indiana University Medical Center
Riley Hospital for Children
Program Director:
Richard S. Neneman, MD
Indiana University School of Medicine
Div of Hematopathology
500 N University Blvd
Indianapolis, IN 46202-5283
317 274-7260
Length: 1 Year(s) Total Positions: 2
Program ID: 311-17-21-045

Iowa

Iowa City

University of Iowa Hospitals and Clinics Program
University of Iowa Hospitals and Clinics
Program Director:
Fred S. Robert, MD
University of Iowa Hospitals and Clinics
Dept of Pathology 627C RC
200 Hawkins Dr
Iowa City, IA 52242-1009
319 356-3591
Length: 1 Year(s) Total Positions: 2
Program ID: 311-18-21-023

Kentucky

Louisville

University of Louisville Program
University of Louisville School of Medicine
James Graham Brown Medical Center
University of Louisville Hospital
Program Director:
Alvin W. Martin, MD
James Graham Brown Cancer Center
620 S Jackson St
Louisville, KY 40202
502 852-6029
Length: 1 Year(s) Total Positions: 1
Program ID: 311-20-21-043

Maryland

Bethesda

National Naval Medical Center (Bethesda) Program*
National Naval Medical Center (Bethesda)
Program Director:
Capt James C. Cordingley, MD
National Naval Medical Center
Box 213
Bethesda, MD 20889-5600
301 295-5499
Length: 1 Year(s) Total Positions: 3
Program ID: 311-23-21-008

Massachusetts

Boston

Beth Israel Hospital Program
Beth Israel Hospital
Program Director:
Marshall E. Kadin, MD
Beth Israel Hospital
Dept of Pathology
330 Brookline Ave
Boston, MA 02215
617 735-3948
Length: 1 Year(s) Total Positions: 2
Program ID: 311-14-21-096

Brigham and Women's Hospital Program*
Brigham and Women's Hospital
Program Director:
Gerardine S. Stitt, MD
Brigham and Women's Hospital
Div of Hematopathology
75 Francis St
Boston, MA 02115
617 732-7620
Length: 1 Year(s) Program ID: 311-24-21-048

Michigan

Ann Arbor

University of Michigan Program
University of Michigan Hospitals
Program Director:
Bertram Schneider, MD
University of Michigan Hospitals
Medical Science I Bldg
1201 Catherine Rd
Ann Arbor, MI 48109-0002
313 856-1573
Length: 1 Year(s) Total Positions: 1
Program ID: 311-25-21-026

Royal Oak

William Beaumont Hospital Program
William Beaumont Hospital
Program Director:
Jean C. Mattson, MD
Chief Hematopathology
William Beaumont Hospital
3601 W 13 Mile Rd
Royal Oak, MI 48073-6769
810 561-6022
Length: 1 Year(s) Total Positions: 1
Program ID: 311-25-21-043

Minnesota

Minneapolis

University of Minnesota Program
University of Minnesota Medical School
University of Minnesota Hospital and Clinic
Program Director:
Richard D. Brunning, MD
University of Minnesota
420 Delaware St SE
Box 666 UHMC
Minneapolis, MN 55455-0386
612 626-5704
Length: 1 Year(s) Total Positions: 2
Program ID: 311-26-21-003

* Updated information not provided.

Graduate Medical Education Directory 445
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<td>University Hospital-SUNY Health Science Center</td>
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<td>Program Director: Jonathan L. Miller, MD PhD</td>
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<td>Clinical Pathology</td>
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<td>750 E Adams St</td>
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<td>Syracuse, NY 13210</td>
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<td>Program Director: Harold R. Schumacher, MD</td>
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<td>University of Cincinnati Medical Center</td>
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<td></td>
<td>PO Box 87029</td>
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<td>Cincinnati, OH 45210</td>
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<td>513-655-3158</td>
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<td>Program Director: Jeffry N. Lawrence, MD</td>
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<td>Cleveland, OH 44109</td>
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<td>Program Director: John T. Brandt, MD</td>
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<td>Dept of Pathology/Ohio State University</td>
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<td>164 Hamilton Hall</td>
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* Updated information not provided.
Pennsylvania

Pittsburgh

MCPH/Allegheny General Hospital Program

Allegheny General Hospital
Program Director: Karl R. Fox, MD
Allegheny General Hospital
Div of Clinical Pathology
330 E North Ave
Pittsburgh, PA 15212-6986
412 358-3541
Length: 1 Year(s) Total Positions: 1
Program ID: 311-41-21-036

University Health Center of Pittsburgh Program

University Health Center of Pittsburgh
Children's Hospital of Pittsburgh
Presbyterian University Hospital/UPMC
Program Director: Steven H. Swendsen, MD
University of Pittsburgh Medical Center
Montefiore Hematopathology
200 Lothrop St
Pittsburgh, PA 15213-2382
412 646-6663
Length: 1 Year(s) Total Positions: 2
Program ID: 311-41-21-014

San Antonio

San Antonio University of Texas Health Science Center-San Antonio Program
University of Texas Medical School at San Antonio
Audie L. Murphy Memorial Veterans Hospital (San Antonio)
University Hospital-South Texas Medical Center
Program Director: Peter Banks, MD
University of Texas Health Science Center
Dept of Pathology-Hematology
7703 Fm 1646 Rd
San Antonio, TX 78294-7750
210 657-4034
Length: 1 Year(s) Total Positions: 2
Program ID: 311-48-21-020

Temple

Texas A&M College of Medicine-Scott and White Program
Scott and White Memorial Hospital
Olin E. Teague Veterans Center
Program Director: Edward S. Rappaport, MD
Scott and White Hospital
2401 S 31st St
Temple, TX 76508
817 774-3145
Length: 1 Year(s) Total Positions: 1
Program ID: 311-49-21-044

Hematology and Oncology (Internal Medicine)

Alabama

Birmingham

University of Alabama Medical Center Program
University of Alabama Hospital
Program Director: Donald M. Miller, MD
Univ of Alabama at Birmingham
University Station W14 620
Birmingham, AL 35204
205 934-1977
Length: 3 Year(s) Total Positions: 12
Program ID: 155-01-21-001

Mobile

University of South Alabama Program
University of South Alabama Medical Center
Program Director: Marcelo E. Corti, MD
2451 Fillingim St
Mobile, AL 36608
205 633-6246
Length: 3 Year(s) Total Positions: 3
Program ID: 155-01-21-002

Texas

Houston

Baylor College of Medicine Program
Baylor College of Medicine
Harris County Hospital District Ben Taub General Hospital
Methodist Hospital
Texas Children's Hospital
Program Director: Abdus Salama, MD
Methodist Hospital Dept of Pathology
6555 Fannin MSB205
Houston, TX 77030
713 790-2430
Length: 1 Year(s) Total Positions: 1
Program ID: 311-48-21-012

University of Texas M D Anderson Cancer Center Program
University of Texas M D Anderson Cancer Center
Program Director: Mahesh Aihara, MD
Univ of Texas M D Anderson Cancer Center
1515 Holcombe Blvd
Houston, TX 77030
713 794-1400
Length: 1 Year(s) Total Positions: 3
Program ID: 311-48-21-019

Utah

Salt Lake City

Salt Lake City University of Utah Program
University of Utah Medical Center
Program Director: Carl R. Kjeldberg, MD
University of Utah School of Medicine
Dept of Pathology
Salt Lake City, UT 84132
801 581-5664
Length: 1 Year(s) Total Positions: 2
Program ID: 311-49-21-024

Arizona

Tucson

University of Arizona Program
University of Arizona College of Medicine
University Medical Center
Veterans Affairs Medical Center (Tucson)
Program Director: Charles M. Taylor, MD
Arizona Cancer Center
1515 N Campbell Ave
Tucson, AZ 85724
520 626-2351
Length: 3 Year(s) Total Positions: 9
Program ID: 155-09-21-003

California

Los Angeles

Cedars-Sinai Medical Center Program
Cedars-Sinai Medical Center
Program Director: Frances Gales, MD
810 Beverly Blvd
Pomona 91711
Los Angeles, CA 90048-1869
310 855-2387
Length: 3 Year(s) Total Positions: 5
Program ID: 155-09-21-004

*Updated information not provided.
Los Angeles (Sepulveda)
UCLA San Fernando Valley Program
Veterans Affairs Medical Center (Sepulveda)
Cedars-Sinai Medical Center
LAC-Olive View Medical Center

Program Director:
Nancy R. Feldman, MD
10111 Plummer St
Sepulveda, CA 91343
818-864-3205

Length: 3 Year(s)  Total Positions: 6
Program ID: 155-06-13-008

Sacramento
University of California (Davis) Program
University of California (Davis) Medical Center
Kaiser Foundation Hospital (Sacramento)

Program Director:
Frederick Meyers, MD
4301 X St
Sacramento, CA 95817
916-453-3771

Length: 3 Year(s)  Total Positions: 7
Program ID: 155-06-31-005

San Diego
Naval Medical Center (San Diego) Program
Naval Medical Center (San Diego)

Program Director:
Mark D Browning, MD
Hematology/Oncology Division (Code CCL)
Naval Medical Center
3400 Bob Wilson Dr
San Diego, CA 92134-5000
619-562-7653

Length: 3 Year(s)  Total Positions: 6
Program ID: 155-05-11-006

University of California (San Diego) Program*
University of California (San Diego) Medical Center
Veterans Affairs Medical Center (San Diego)

Program Director:
Kenneth Eberat, MD
228 Dickinson St
San Diego, CA 92103
619-453-3225

Length: 3 Year(s)
Program ID: 155-05-12-007

Connecticut
Farmington
University of Connecticut Program
University of Connecticut School of Medicine
St. Francis Hospital and Medical Center
UConn Health Education Center/John Dempsey Hospital
Veterans Affairs Medical Center (Newington)

Program Director:
Jonathan S. Sporn, MD
Dept of Medicine
Univ of Connecticut Health Ctr
Farmington, CT 06030
203-755-2055

Length: 3 Year(s)  Total Positions: 5
Program ID: 155-06-31-009

District of Columbia
Washington
Walter Reed Army Medical Center Program*
Walter Reed Army Medical Center

Program Director:
Louis F DiStefano MD
Washington, DC 20017
202-683-1701

Length: 3 Year(s)
Program ID: 155-10-14-010

Washington Hospital Center Program
Washington Hospital Center
Veterans Affairs Medical Center (Washington, DC)

Program Director:
Dennis A. Prebati, MD
110 Irving St NW
Washington, DC 20010
202-877-4208

Length: 3 Year(s)  Total Positions: 2
Program ID: 155-10-31-011

Florida
Miami
University of Miami-Jackson Memorial Medical Center Program
University of Miami-Jackson Memorial Medical Center
Veterans Affairs Medical Center (Miami)

Program Director:
Peter C. Cassileth, MD
P O Box 619960 (R-36)
Miami, FL 33101
305-446-4023

Length: 3 Year(s)  Total Positions: 11
Program ID: 155-11-31-012

Tampa
University of South Florida Program
University of South Florida College of Medicine
H Lee Moffitt Cancer Center
James A. Haley Veterans Hospital
Tampa General Healthcare
Veterans Affairs Medical Center (Bay Pines)

Program Director:
Kenneth Zucker, MD
12901 N 30th St, Box 19
Tampa, FL 33612
813-272-7582

Length: 3 Year(s)  Total Positions: 8
Program ID: 155-11-31-013

Georgia
Atlanta
Emory University Program*
Emory University School of Medicine
Emory University Hospital
Grady Memorial Hospital

Program Director:
Melvin R Moore, MD
69 Butler Street SE
Atlanta, GA 30303
404-586-4885

Length: 2 Year(s)
Program ID: 155-13-11-014

Augusta
Medical College of Georgia Program
Medical College of Georgia Hospital and Clinics
Veterans Affairs Medical Center (Augusta)

Program Director:
C. Lawrence Lathe, MD
Dept of Medicine
Augusta, GA 30925
706-721-2505

Length: 3 Year(s)  Total Positions: 2
Program ID: 155-12-31-015

Illinois
Chicago
McGaw Medical Center of Northwestern University Program
Northwestern University Medical School
Northwestern Memorial Hospital
Veterans Affairs Lakeside Medical Center (Chicago)

Program Director:
William J. Grudich, MD
220 E Erie
Suite 700
Chicago, IL 60611
312-926-9412

Length: 3 Year(s)  Total Positions: 12
Program ID: 155-16-21-016

University of Chicago Program
University of Chicago Hospitals

Program Director:
Harvey M Golomb, MD
Univ of Chicago Hospitals
5841 S Maryland Ave
MC2115
Chicago, IL 60637-1470
312-932-6156

Length: 3 Year(s)  Total Positions: 15
Program ID: 155-16-21-079

University of Illinois College of Medicine at Chicago Program*
University of Illinois College of Medicine at Chicago
Veterans Affairs Northwest Medical Center (Chicago)

Program Director:
Thomas L. Moul, MD
540 S Wood St
Chicago, IL 60612
312-502-5565

Length: 3 Year(s)
Program ID: 155-16-31-017

University of Illinois College of Medicine at Chicago/Michael Reese Hospital Program*
University of Illinois College of Medicine at Chicago
Michael Reese Hospital and Medical Center

Program Director:
Margaret Taliercio, MD
Lake Shore Dr at 31st St
Chicago, IL 60616
312-781-2263

Length: 3 Year(s)
Program ID: 155-16-11-018

* Updated information not provided.
North Chicago
Finch University of Health Sciences/Chicago Medical School Program
Finch University of Health Sciences/Chicago Medical School
Mount Sinai Hospital Medical Center of Chicago Veterans Affairs Medical Center (North Chicago)
Program Director:
Robert A. Levin, MD
503 North Lake Shore Drive
Chicago, IL 60611
773-774-3030
Length: 3 Year(s) Total Positions: 2
Program ID: 150-16-12-019

Indiana
Indianapolis
Indiana University Medical Center Program
Indiana University Medical Center
Program Director:
Lawrence H. Einhorn, MD
University Hospital Room 1750
535 N University Blvd
Indianapolis, IN 46223-2265
317-274-0920
Length: 3 Year(s) Total Positions: 14 (FY: 0)
Program ID: 150-17-21-020

Iowa
Iowa City
University of Iowa Hospitals and Clinics Program
University of Iowa Hospitals and Clinics
Program Director:
C. Patrick Burns, MD
Department of Medicine
Hematology/Oncology
Univ of Iowa Hospitals and Clinics
Iowa City, IA 52242
319-356-3209
Length: 3 Year(s) Total Positions: 12
Program ID: 150-18-21-021

Kentucky
Louisville
University of Louisville Program
University of Louisville School of Medicine
James Graham Brown Medical Center
University of Louisville Hospital
Veterans Affairs Medical Center (Louisville)
Program Director:
Martin S. Blumer, MD
529 S. Jackson St
Louisville, KY 40202
502-858-5434
Length: 2 Year(s) Total Positions: 4
Program ID: 150-20-21-022

Louisiana
New Orleans
Tulane University Program
Tulane University School of Medicine
Medical Center of Louisiana at New Orleans-Tulane Division
Tulane University Hospital and Clinics
Veterans Affairs Medical Center-Tulane Service (New Orleans)
Program Director:
Curtis L. Boll, MD
1430 Tulane Ave
New Orleans, LA 70112-2899
504-588-4842
Length: 2 Year(s) Total Positions: 3
Program ID: 150-21-21-023

Shreveport
Louisiana State University (Shreveport) Program
Louisiana State University Medical Center-Shreveport
Program Director:
Glenn M. Mills, MD
1601 Kings Hwy
Bassett Office Building, 2nd Floor
Shreveport, LA 71130-3002
318-674-5970
Length: 3 Year(s) Total Positions: 9
Program ID: 150-21-31-024

Maryland
Baltimore
University of Maryland Program*
University of Maryland Medical System
Program Director:
David A. VanElshick, MD
22 S Greene St
Baltimore, MD 21201
Length: 3 Year(s) Program ID: 150-23-21-025

Massachusetts
Boston
Beth Israel Hospital Program
Beth Israel Hospital
Program Director:
Llewellyn E. Schnipper
Dept of Medicine
Beth Israel Hospital
330 Brookline Ave
Boston, MA 02215
617-735-2066
Length: 3 Year(s) Program ID: 150-24-21-026

Boston University Program*
Boston University School of Medicine
Boston City Hospital
Boston University Medical Center-University Hospital
Veterans Affairs Medical Center (Boston)
Program Director:
Douglas V. Miller, MD
Department of Medicine
76 E Newton St
Boston, MA 02118
Length: 3 Year(s) Program ID: 150-24-31-027

New England Deaconess Hospital Program
New England Deaconess Hospital
Program Director:
Jerome E. Hoagman, MD
Deaconess Hospital
110 Francis St
Ste 4A
Boston, MA 02215-0900
617-736-8865
Length: 3 Year(s) Total Positions: 3
Program ID: 150-24-41-028

New England Medical Center Hospitals Program
New England Medical Center Hospitals
Program Director:
Bruce Furie, MD
700 Washington Street
Box 500
Boston, MA 02111-0000
617-562-0219
Length: 3 Year(s) Total Positions: 20
Program ID: 150-24-12-029

Springfield
Baystate Medical Center Program
Baystate Medical Center
Program Director:
Gary Makari-Judson, MD
200 Chestnut St
Springfield, MA 01109-0000
413-274-5253
Length: 2 Year(s) Total Positions: 3
Program ID: 150-24-18-030

Worcester
University of Massachusetts Medical Center Program*
University of Massachusetts Medical Center
Program Director:
Mary Ellen Rybald, MD
55 Lake Ave N
Worcester, MA 01609-0000
617-353-4385
Length: 3 Year(s) Total Positions: 4
Program ID: 150-24-21-073

Michigan
Detroit
Henry Ford Hospital Program
Henry Ford Hospital
Program Director:
Robert Chapman, MD
2795 West Grand Blvd
Detroit, MI 48202-0000
313-355-2053
Length: 3 Year(s) Total Positions: 6
Program ID: 150-25-21-081

*Updated information not provided.
Accredited Programs in Hematology and Oncology (Internal Medicine)

Minnesota

Minneapolis

University of Minnesota Program
University of Minnesota Medical School
University of Minnesota Hospital and Clinic
Program Director:
Gordon D Ginder, MD
Gerard Johnson, MD
Univ of Minnesota Hospital and Clinics
Box 266 UMMHC
Harvard at E River Blvd
Minneapolis, MN 55455
612 624-5134
Length: 3 Year(s) Total Positions: 4
Program ID: 165-26-21-032

Rochester

Mayo Graduate School of Medicine Program
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Rochester)
Rochester Methodist Hospital
St Mary's Hospital of Rochester
Program Director:
Thomas M Habermann, MD
300 First St SW
Rochester, MN 55905
507 284-4094
Length: 3 Year(s) Total Positions: 21
Program ID: 165-26-21-033

Missouri

Kansas City

University of Missouri at Kansas City Program
University of Missouri Kansas City School of Medicine
Trinity Lutheran Hospital
Truman Medical Center-West
Program Director:
Gerald M Woods, MD
2401 Gillham Rd
Kansas City, MO 64108
816 224-3205
Length: 3 Year(s) Total Positions: 1
Program ID: 165-28-21-034

St Louis

Barnes Hospital Group Program
Barnes Hospital
Program Director:
Stuart Kornfeld, MD
Div of Hematology/Oncology
Barnes Hospital
4988 Barnes Hospital Plaza
St Louis, MO 63110
314 365-8053
Length: 3 Year(s) Program ID: 165-28-31-035

St Louis University Group of Hospitals Program
St Louis University School of Medicine
St Louis University Hospital
Program Director:
Paul J Petruska, MD
3635 Vista at Grand Blvd
PO Box 15256
St Louis, MO 63110-0250
314 577-8854
Length: 3 Year(s) Total Positions: 6
Program ID: 165-26-11-036

Nebraska

Omaha

University of Nebraska Program
University of Nebraska Medical Center
Veterans Affair Medical Center (Omaha)
Program Director:
John P Foley, MD
Department of Medicine
600 S 42nd St
PO Box 883330
Omaha, NE 68198-3300
402 559-5013
Length: 3 Year(s) Total Positions: 3
Program ID: 165-26-21-037

New Hampshire

Lebanon

Dartmouth-Hitchcock Medical Center Program
Mary Hitchcock Memorial Hospital
Veterans Affair Medical Center (White River Junction)
Program Director:
Frank H Valone, MD
Maynard St
Hanover, NH 03756
603 646-5627
Length: 3 Year(s) Total Positions: 4
Program ID: 165-02-21-038

New Jersey

Camden

UMDNJ-Robert Wood Johnson Medical School Program
Cooper Hospital University Medical Center
Program Director:
Elizabeth Johnson, MD
Cooper Hospital University Medical Center
Three Cooper Plaza
Ste 220
Camden, NJ 08103
609 963-3572
Length: 3 Year(s) Total Positions: 1
Program ID: 165-29-21-039

Piscataway

UMDNJ-Robert Wood Johnson Medical School Program
UMDNJ-Robert Wood Johnson Medical School
Medical Center at Princeton
Robert Wood Johnson University Hospital
St. Peter's Medical Center
Program Director:
Parvin Saidi, MD
Dept of Medicine
One Robert Wood Johnson Pl
New Brunswick, NJ 08903
908 235-7079
Length: 3 Year(s) Total Positions: 4
Program ID: 165-33-21-040

New York

Brooklyn

Brookdale Hospital Medical Center Program
Brookdale Hospital Medical Center
Program Director:
Neil J Nasbaum, MD
Linden Blvd at Brookdale Plaza
Brooklyn, NY 11205
718 490-5007
Length: 3 Year(s) Total Positions: 5
Program ID: 165-26-21-041

Maimonides Medical Center Program
Maimonides Medical Center
Program Director:
Ismail U Nawawi, MD
4802 10th Ave
Brooklyn, NY 11219
718 283-6900
Length: 3 Year(s) Total Positions: 5
Program ID: 165-33-31-042

SUNY Health Science Center at Brooklyn Program
SUNY HSC at Brooklyn College of Medicine
Kings County Hospital Center
University Hospital-SUNY Health Science Center at Brooklyn
Veteran Affairs Medical Center (Brooklyn)
Program Director:
Sheldon Rottenberg, MD
SUNY Health Science Center at Brooklyn
450 Clarkson Ave Box 920
Brooklyn, NY 11208
718 270-1500
Length: 3 Year(s) Total Positions: 10
Program ID: 165-35-11-043

Mineola

Winthrop-University Hospital Program
Winthrop-University Hospital
Program Director:
Larry Nathanson, MD
Winthrop-University Hospital
258 First St
Mineola, NY 11501
516 695-2310
Length: 3 Year(s) Total Positions: 4
Program ID: 165-35-13-044

* Updated information not provided.
New Hyde Park
Albert Einstein College of Medicine at Long Island Jewish Medical Center Program
Long Island Jewish Medical Center
Program Director: Kant R Patil, MD
207-05 78th Ave
Hempstead, NY 11552
718 470-7135
Length: 3 Year(s) Total Positions: 3
Program ID: 185-35-23-044

New York
Albert Einstein College of Medicine at Beth Israel Medical Center Program*
Beth Israel Medical Center
Program Director: Ralph Zalesky, MD
10 Nathan Pettenae PI
New York, NY 1003
212 420-4185
Length: 3 Year(s)
Program ID: 185-35-23-047
Lenox Hill Hospital Program
Lenox Hill Hospital
Program Director: Colette M Spaccavento, MD
Keith R Brunnkhorst, MD
Lenox Hill Hospital
Sect of Hematology/Oncology
100 E 77th St
New York, NY 10021-1888
212 438-2155
Length: 3 Year(s) Total Positions: 2
Program ID: 185-35-23-049
Mount Sinai School of Medicine (Jamaica) Program
Mount Sinai School of Medicine
Queens Hospital Center
Program Director: Hans W Grunwald, MD
Queen Hosp Ctr
83-66 164th St
Jamaica, NY 11433
718 883-4118
Length: 3 Year(s) Total Positions: 2
Program ID: 185-35-12-044
Mount Sinai School of Medicine Program
Mount Sinai School of Medicine
Binghamton Hospital Center-Mount Sinai Services
Mount Sinai Medical Center
Veterans Affairs Medical Center (Brons)
Program Director: Peter C Harpole, MD
Mount Sinai Med Ctr
One Gustave L Levy Pl
Box 1079
New York, NY 10029-6574
212 652-2000
Length: 3 Year(s) Total Positions: 3
Program ID: 185-35-21-065
New York Hospital/Cornell Medical Center Program*
New York Hospital
Program Director: Roy L Silverstein, MD
525 East 58th
New York, NY 10021
212 652-5500
Length: 3 Year(s)
Program ID: 185-35-31-061

Presbyterian Hospital in the City of New York Program
Presbyterian Hospital in the City of New York Harlem Hospital Center
Program Director: Karen Antman, MD
622 W 168th St
New York, NY 10032
212 556-3730
Length: 3 Year(s)
Program ID: 185-35-11-063

Stony Brook
SUNY at Stony Brook Program
University Hospital SUNY at Stony Brook Veterans Affairs Medical Center (Northport)
Program Director: John Flory, MD
716 478-5577
Stony Brook, NY 11794
212 556-6002
Length: 3 Year(s) Total Positions: 6
Program ID: 185-35-13-054

Valhalla
New York Medical College (Cabrini) Program*
New York Medical College
Cabrini Medical Center
Program Director: Ariel Dusenfeld, MD
257 E 10th St
New York, NY 10003
212 556-6922
Length: 3 Year(s)
Program ID: 185-35-32-048

New York Medical College (St Vincent) Program
New York Medical College
St Vincent’s Hospital and Medical Center of New York
Program Director: William Grace, MD
160 W 11th St
New York, NY 10011
212 654-2427
Length: 3 Year(s) Total Positions: 3
Program ID: 185-35-12-058

North Carolina
Chapel Hill
University of North Carolina Hospitals Program
University of North Carolina Hospitals
Program Director: Edison T Liu, MD
3018 Old Clinic Bldg 325H
Chapel Hill, NC 27599
919 846-0911
Length: 3 Year(s) Total Positions: 6
Program ID: 185-35-21-065

Durham
Duke University Program
Duke University Medical Center
Program Director: Russell E Kaufman, MD
Duke University Med Ctr
Box 3200
Durham, NC 27710
919 684-2287
Length: 3 Year(s) Total Positions: 10
Program ID: 185-35-31-066

Winston-Salem
Bowman Gray School of Medicine Program
North Carolina Baptist Hospital
Program Director: Daniel J Cruz, MD
300 Hawthorne Rd
Winston-Salem, NC 27103
919 798-4464
Length: 3 Year(s) Total Positions: 9
Program ID: 185-35-21-076

Ohio
Cleveland
Cleveland Clinic Foundation/St Vincent Charity Hospital Program
Cleveland Clinic Foundation
Program Director: Maureen M Markman, MD
Cleveland Clinic Foundation
9800 Euclid Ave 7712
Cleveland, OH 44195
216 444-5500
Length: 3 Year(s) Total Positions: 11
Program ID: 185-35-21-057

Columbus
Ohio State University Program
Ohio State University Medical Center
Arthur G James Cancer Hospital and Research Institute
Program Director: Stanley Barczenok, MD
Arthur J. Sapone, MD
Div of Hematology Oncology
Ohio State University Hospital
410 W Tenth Ave, N1025 Doan Hall
Columbus, OH 43210-1228
614 294-3926
Length: 3 Year(s)
Program ID: 185-35-31-058

Dayton
Wright State University Program
Wright State University School of Medicine
Good Samaritan Hospital and Health Center
Veterans Affairs Medical Center (Dayton)
Program Director: Michael A Baumann, MD
Pamela C Chang, MD
400 W Third Street
Dayton, OH 45428
937 268-6511
Length: 3 Year(s) Total Positions: 3
Program ID: 185-35-11-059

* Updated information not provided.
Accredited Programs in Hematology and Oncology (Internal Medicine)

Oklahoma

Oklahoma City

University of Oklahoma Health Sciences Center Program
University of Oklahoma College of Medicine-Oklahoma City
University Hospital and Clinics
Veterans Affairs Medical Center (Oklahoma City)
Program Director:
James N. George, MD
PO Box 25907
405-271-4222
University Hospital
Oklahoma City, OK 73196
Length: 2 Year(s) Total Positions: 8
Program ID: 155-39-21-066

South Carolina

Charleston

Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
MUSC Medical Center
Veterans Affairs Medical Center (Charleston)
Program Director:
Robert K. Stuart, MD
Medical Univ of South Carolina
Hematology/Oncology Div
171 Ashley Ave
Charleston, SC 29425
803-792-4771
Length: 3 Year(s) Total Positions: 5
Program ID: 155-45-21-063

Pennsylvania

Hershey

Milton S. Hershey Medical Center of Pennsylvania State University Program
Penn State University Hospital-Milton S Hershey Med Ctr
Program Director:
Harold A. Harvey, MD
Dept of Medicine
PO Box 524
Milton S Hershey Med Ctr
Hershey, PA 17033
717-531-6077
Length: 2 Year(s) Total Positions: 3
Program ID: 155-41-21-061

Philadelphia

Hahnemann University Program
Hahnemann University Hospital
Program Director:
Sigmond K. Kahn, MD
Hahnemann University Hosp
Broad & Vine St
Philadelphia, PA 19102
215-753-8026
Length: 3 Year(s) Total Positions: 7
Program ID: 155-41-31-062

Tennessee

Johnson City

East Tennessee State University Program
James H Quillen College of Medicine
Johnson City Medical Center Hospital
Veterans Affairs Medical Center (Mountain Home)
Program Director:
May L. Stearns, MD
Dept of Medicine
PO Box 70622
Johnson City, TN 37601-0622
615-929-0382
Length: 3 Year(s) Total Positions: 4
Program ID: 155-47-21-064

Villanova

Vanderbilt University Program
Vanderbilt University Medical Center
St. Thomas Hospital
Veterans Affairs Medical Center (Nashville)
Program Director:
Stanford J. Stewart, MD
1905 The Vanderbilt Clinic
Nashville, TN 37232-5536
615-322-4510
Length: 3 Year(s) Total Positions: 4
Program ID: 155-47-31-065

Texas

Dallas

University of Texas Southwestern Medical School Program
University of Texas Southwestern Medical School
Dallas County Hospital DistrictParkland Memorial Hospital
Veterans Affairs Medical Center (Dallas)
Program Director:
Cynthia J. Sutherland, MD
5325 Harry Hines Blvd
Mail Code 8582
Dallas, TX 75336-8852
214-648-2547
Length: 3 Year(s) Total Positions: 1
Program ID: 155-48-21-006

Fort Sam Houston

Brooke Army Medical Center Program
Brooke Army Medical Center
Program Director:
LTC Timothy O'Bourke, MD
Brooke Army Medical Center
HS/HE-MDH
1569 Stanley Rd
San Antonio, TX 78234-0500
210-916-4542
Length: 3 Year(s) Total Positions: 6
Program ID: 155-49-21-067

Lackland AFB

Wilford Hall USAF Medical Center Program
Wilford Hall USAF Medical Center (SG)
Program Director:
Glenn S. Harman, MD
Hematology/Medical Oncology Service
Dept of Medicine/ISMH
San Antonio, TX 78236-5500
512-557-0702
Length: 3 Year(s) Total Positions: 9
Program ID: 155-48-21-068

Vermont

Burlington

Medical Center Hospital of Vermont Program
Medical Center Hospital of Vermont
Program Director:
Richard F. Breton, MD
Univ of Vermont Coll of Med
Hematology/Oncology Unit
32 N Prospect St
Burlington, VT 05401
802-862-4597
Length: 3 Year(s) Total Positions: 3
Program ID: 155-50-21-069

Virginia

Richmond

Medical College of Virginia/Virginia Commonwealth University Program
Medical College of Virginia/Virginia Commonwealth University
Hunters Holmes McGuire VA Medical Center (Richmond)
Medical College of Virginia Hospitals
Program Director:
Saul Turenoch, MD
Box 230 M C V Station
Richmond, VA 23288
804-788-9723
Length: 3 Year(s) Total Positions: 8
Program ID: 155-51-21-070

* Updated information not provided.
Washington
Tacoma
Madigan Army Medical Center Program
Madigan Army Medical Center
Program Director:
Col Howard Davidson, MD
Box 8354
Madigan Army Med Ctr
Attn: HSHF-MMO
Tacoma, WA 98431
256-988-3504
Length: 3 Year(s)  Total Positions: 4
Program ID: 151-64-21-071

Immunopathology
(Pathology-Anatomic and Clinical)

California
Los Angeles
Cedars-Sinai Medical Center Program
Cedars-Sinai Medical Center
Program Director:
Stephen Lee, MD
8700 Beverly Blvd
Dept of Pathology & Lab Medicine
Div of Hematology & Immunology
Los Angeles, CA 90048
213-855-5471
Length: 1 Year(s)  Total Positions: 1  (GYI: 0)
Program ID: 313-05-12-006

Florida
Miami
University of Miami-Jackson Memorial
Medical Center Program
University of Miami-Jackson Memorial Medical Center
Program Director:
Phillip Ruiz, MD PhD
University of Miami School of Medicine
Dept of Pathology (D-35)
PO Box 016669
Miami, FL 33101
305-585-5744
Length: 1 Year(s)  Total Positions: 15  (GYI: 0)
Program ID: 313-11-21-017

Iowa
Iowa City
University of Iowa Hospitals and Clinics Program
University of Iowa Hospitals and Clinics
Program Director:
James A Gocken, MD
University of Iowa Hospitals and Clinics
Dept of Pathology
Iowa City, IA 52242-1069
319-356-3666
Length: 2 Year(s)  Total Positions: 2  (GYI: 0)
Program ID: 313-18-21-005

Maryland
Baltimore
Johns Hopkins University Program
Johns Hopkins University School of Medicine
Johns Hopkins Hospital
Program Director:
William E Bechmanon, MD
The Johns Hopkins University
School of Medicine
Baltimore, MD 21205
410-614-5100
Length: 2 Year(s)  Total Positions: 2  (GYI: 0)
Program ID: 313-23-11-008

Massachusetts
Boston
Massachusetts General Hospital Program*
Massachusetts General Hospital
Program Director:
Atul K Bhan, MD
100 balcon St
Boston, MA 02114
617-726-2556
Length: 1 Year(s)
Program ID: 313-34-21-019

Missouri
St Louis
Washington University Program
Barnes Hospital
Program Director:
John D Pfeifer, MD PhD
Washington University School of Medicine
Dept of Pathology Box 8118
St Louis, MO 63110
314-363-0788
Length: 1 Year(s)
Program ID: 313-28-21-013

New Jersey
Piscataway
UMDNJ-Robert Wood Johnson Medical School Program
UMDNJ-Robert Wood Johnson Medical School
Robert Wood Johnson University Hospital
St Peter's Medical Center
Program Director:
Xarel Barta Jr, MD PhD
Dept of Pathology
St Peter's Medical Center
284 Easton Ave
New Brunswick, NJ 08903-0861
908-745-8554
Length: 1 Year(s)  Total Positions: 1  (GYI: 0)
Program ID: 313-33-21-018

* Updated information not provided.
New York

Bronx

Bronx–Lebanon Hospital Center Program
Bronx–Lebanon Hospital Center
Program Director: Yoon J Choe, MD
Bronx–Lebanon Hospital Center
1650 Grand Concourse
Bronx, NY 10467
718 818-5147
Length: 2 Year(s) Total Positions: 2 (GYI: 0)
Program ID: 313-35-12-003

New York

New York University Medical Center Program
New York University Medical Center
Program Director: Helen D Feiner, MD
New York University Medical Center
550 First Ave
Room 461 Tisch Hospital
New York, NY 10016
212 263-8826
Length: 2 Year(s) Total Positions: 4 (GYI: 2)
Program ID: 313-35-21-010

North Carolina

Chapel Hill

University of North Carolina Hospitals Program
University of North Carolina Hospitals
Program Director: James Kolda, MD
Duke Hospital Laboratories
Univ of North Carolina Hospitals
101 Manning Dr
Chapel Hill, NC 27514
919 966-2317
Length: 1 Year(s) Total Positions: 1 (GYI: 0)
Program ID: 313-35-21-015

Ohio

Cleveland

Case Western Reserve University Program
University Hospitals of Cleveland
Program Director: Steven N Emancipator, MD
Institute of Pathology
2085 Adelbert Rd
Cleveland, OH 44106
216 344-5770
Length: 2 Year(s) Total Positions: 2 (GYI: 0)
Program ID: 313-35-21-002

Texas

Dallas

University of Texas Southwestern Medical School Program
University of Texas Southwestern Medical School
University of Texas Southwestern Medical School
Dallas County Hospital District–Parkland Memorial Hospital
Program Director: Mohammad Q Ansari, MD
Dallas, TX 75336-0077
214 648-4122
Length: 2 Year(s) Total Positions: 2 (GYI: 0)
Program ID: 313-48-21-014

Utah

Salt Lake City

University of Utah Program
University of Utah Medical Center
Program Director: Daniel A Torres, MD
University of Utah School of Medicine
40 N Medical Dr
Salt Lake City, UT 84132
801 581-5873
Length: 1 Year(s) Total Positions: 2 (GYI: 0)
Program ID: 313-49-21-016

Virginia

Richmond

Medical College of Virginia/Virginia Commonwealth University Program*
Medical College of Virginia/Virginia Commonwealth University
Program Director: Charles W McBurney, MD
MC/VA/Virginia Commonwealth Univ
PO Box 990962
Richmond, VA 23298-0962
804 786-1179
Length: 2 Year(s) Total Positions: 2 (GYI: 0)
Program ID: 313-31-11-001

Infectious Disease
(Internal Medicine)

Alabama

Birmingham

University of Alabama Medical Center Program
University of Alabama Medical Center
Program Director: William S Desmukh, MD
Division of Infectious Disease
Tinsley Harrison Tower 229
UAB Station 1000 University Blvd
Birmingham, AL 35245-0006
205 934-5191
Length: 2 Year(s) Total Positions: 6
Program ID: 146-01-21-121

Mobile

University of South Alabama Program
University of South Alabama Medical Center
Program Director: S Reeves Duke, MD
University of South Alabama
Department of Internal Medicine
472 Cancer Center Clinical Bldg
Mobile, AL 36688-0002
205 460-7220
Length: 2 Year(s) Total Positions: 2
Program ID: 313-01-11-080

Arizona

Tucson

University of Arizona Program
University of Arizona College of Medicine
University Medical Center
Veterans Affairs Medical Center (Tucson)
Program Director: Rodney B Adam, MD
University of Arizona Infectious Disease Section
1601 N Campbell Ave
Tucson, AZ 85724
520 528-6887
Length: 2 Year(s) Total Positions: 2
Program ID: 146-03-21-106

Arkansas

Little Rock

University of Arkansas for Medical Sciences Program
University of Arkansas for Medical Sciences
John L McClellan Memorial Veterans Hospital
University Hospital of Arkansas
Program Director: Robert W Bradsbeer Jr, MD
University of Arkansas for Medical Sciences
North Campus
Little Rock, AR 72205
501 588-5000
Length: 2 Year(s) Total Positions: 1
Program ID: 146-01-21-107

* Updated information not provided.
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<th>Location</th>
<th>Program Name</th>
<th>Program Director(s)</th>
<th>Length (Years)</th>
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<tr>
<td>Cedars-Sinai Medical Center Program</td>
<td>Cedars-Sinai Medical Center Program Director: Eric S. Baer, MD Cedars-Sinai Medical Center Div of Infectious Diseases 8700 Beverly Blvd, 220 South Orange, CA 90048-0750</td>
<td>2 Year(s)</td>
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<td>Charles R. Drew University Program*</td>
<td>Charles R. Drew University of Medicine and Science LAC-King/Drew Medical Center Program Director: Robert A. K. Reed, MD, MSc, FRCPC (USA), FACP, FRCPC (CA)</td>
<td>2 Year(s)</td>
<td>2</td>
<td>146-05-1123</td>
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<td>UCLA School of Medicine</td>
<td>UCLA School of Medicine Program Director: J. G. Wyngaarden, MD, FACP, FAAD, FIDSA</td>
<td>2 Year(s)</td>
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<td>University of Southern California Program</td>
<td>University of Southern California Program Director: John M. Salerno, MD, PhD, DPhil, FIDSA, FIDSA, FAHA, FAHA, FASCP, FASCP, FIDSA, FIDSA, FAHA, FAHA, FASCP</td>
<td>2 Year(s)</td>
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<td>University of California (Davis) Program</td>
<td>University of California (Davis) Medical Center Program Director: William K. Donato, MD</td>
<td>2 Year(s)</td>
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<td>Naval Medical Center (San Diego) Program Director: Robert A. F. Brown, MD, MSc, FRCPC (USA), FACP, FRCPC (CA)</td>
<td>2 Year(s)</td>
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<td>University of California (San Diego) Program</td>
<td>University of California (San Diego) Program Director: Robert A. F. Brown, MD, MSc, FRCPC (USA), FACP, FRCPC (CA)</td>
<td>2 Year(s)</td>
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<td>Los Angeles County Harbor-UCLA Medical Center Program</td>
<td>Los Angeles County Harbor-UCLA Medical Center Program Director: John E. Edwards, Jr., MD</td>
<td>2 Year(s)</td>
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<td>Denver</td>
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<td>University of Colorado Program*</td>
<td>University of Colorado Program Director: Nancy M. Matsumura, MD</td>
<td>2 Year(s)</td>
<td>2</td>
<td>146-05-146</td>
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* Updated information not provided.
Connecticut

Farmington
University of Connecticut Program 1
University of Connecticut School of Medicine
Mount Sinai Hospital
Univ of Connecticut Health Center/John Dempsey Hospital
Program Director:
John D Shanley, MD
University of Connecticut School of Medicine
Div of Infectious Diseases
365 Farmington Ave
Farmington, CT 06030-3212
203 679-4700
Length: 2 Year(s)  Total Positions: 3
Program ID: 146-08-31401

University of Connecticut Program 2
University of Connecticut School of Medicine
Hardford Hospital
(Out of Connecticut Health Center/John Dempsey Hospital
Program Director:
Richard Quinliskal, MD
Hardford Hospital
Div of Infectious Diseases
80 Seymour St
Hardford, CT 06431
203 624-8758
Length: 2 Year(s)  Total Positions: 2
Program ID: 146-08-31-183

New Haven
Yale-New Haven Medical Center Program
Yale-New Haven Hospital
Veterans Affairs Medical Center (West Haven)
Program Director:
Keith Jovent, MD
Yale University School of Medicine/Dept of Internal Medicine
Infectious Disease Section
PO Box 208022 333 Cedar St LCI0366
New Haven, CT 06520-8022
203 785-4146
Total Positions: 14
Program ID: 146-08-31-934

District of Columbia

Washington
George Washington University Program
George Washington University School of Medicine
George Washington University Hospital
Program Director:
Gary Simon, MD
George Washington University Hospital
Div of Infectious Diseases
2150 Pennsylvania Ave NW
Washington, DC 20037
202 341-4179
Length: 2 Year(s)  Total Positions: 2
Program ID: 146-10-31-109

Georgetown University Program*
Georgetown University Hospital
Program Director:
Phillip P Pierce, MD
Georgetown University Hospital
Dept of Medicine
3800 Reservoir Rd NW
Washington, DC 20007
202 784-8546
Length: 2 Year(s)  Program ID: 146-10-21-090
Howard University Program*
Howard University Hospital
Program Director:
Virod B Modgil, MD
Howard University Hospital
2041 Georgia Ave NW
Washington, DC 20009
202 865-6181
Length: 2 Year(s)  Total Positions: 2
Program ID: 146-10-21-061

Walter Reed Army Medical Center Program
Walter Reed Army Medical Center
Program Director:
Charles N Osier, MD
Walter Reed Army Medical Center
5225 16th St NW
Washington, DC 20007-5001
202 777-4066
Length: 2 Year(s)  Total Positions: 2
Program ID: 146-10-11-137

Washington Hospital Center Program
Washington Hospital Center
Veterans Affairs Medical Center (Washington DC)
Program Director:
Chadon S Levy, MD
Fred M. Goldberg MD
Washington Hospital Center
Section of Infectious Diseases
110 Irving St NW 2A-56
Washington, DC 20010-2075
202 877-7164
Length: 2 Year(s)  Total Positions: 4
Program ID: 146-10-11-179

Florida

Gainesville
University of Florida Program
University of Florida College of Medicine
Shands Hospital at the University of Florida
Veterans Affairs Medical Center (Gainesville)
Program Director:
Frederick S Southwick, MD
University of Florida
J Hillis Miller Health Center
Box 10277 1600 SW Archer Rd
Gainesville, FL 32610-0277
904 329-0369
Length: 2 Year(s)  Total Positions: 2
Program ID: 146-11-21-093

Jacksonville
University of Florida Health Science Center/Jacksonville Program
University Medical Center (UFHSC/J)
Baptist Medical Center (UFHSC/J)
Program Director:
Alexander G Vanderheide, MD
Univ of Florida, Hlth Scie Jacksonville
Dept of Internal Medicine (ID)
655 W Eight St
Jacksonville, FL 32206-6587
904 348-8070
Length: 2 Year(s)  Total Positions: 2
Program ID: 146-11-21-166

Miami
University of Miami-Jackson Memorial Medical Center Program
University of Miami-Jackson Memorial Medical Center
Mount Sinai Medical Center of Greater Miami
Veterans Affairs Medical Center (Miami)
Program Director:
Thomas A Sodeman, MD
University of Miami School of Medicine
PO Box 010465 (R-63)
Miami, FL 33101
305 445-7618
Length: 2 Year(s)  Total Positions: 6
Program ID: 146-11-31-165

Tampa
University of South Florida Program
University of South Florida College of Medicine
H Lee Moffitt Cancer Center
James A Haley Veterans Hospital
Tampa General Healthcare
Program Director:
John T Simnett IV, MD
Div of Infectious Diseases
USF Coll of Med MDC Box 19
12901 Bruce B Downs Blvd
Tampa, FL 33612-4799
813 251-7670
Length: 2 Year(s)  Total Positions: 7
Program ID: 146-11-31-004

Georgia

Atlanta
Emory University Program*
Emory University School of Medicine
Emory University Hospital
Grady Memorial Hospital
Program Director:
David Stephenson, MD
Emory University School of Medicine
610 Butler Street
Atlanta, GA 30303
404 616-3000
Length: 2 Year(s)  Total Positions: 7
Program ID: 146-12-31-129

* Updated information not provided.
<table>
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<th>State</th>
<th>University and Program Information</th>
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| Augusta | Medical College of Georgia Program  
Medical College of Georgia Hospital and Clinics  
Veterans Affairs Medical Center (Augusta)  
**Program Director:**  
J Peter Blasing, MD  
Medial College of Georgia  
Dept of Medicine  
Infectious Disease Section  
Augusta, GA 30912-5130  
706-721-2238  
Length: 2 Year(s)  
Total Positions: 10  
Program ID: 146-12-21-103 |
| Maywood | Loyola University Program  
Paster G McGaw Hospital-Loyola University of Chicago  
Edward Hines Jr Veterans Affairs Hospital  
St Francis Hospital of Evanston  
**Program Director:**  
J Paul O'Keefe, MD  
Nigar Kirmeni, MD  
Loyola Univ Med Ctr Dept of Med  
2160 S First Ave  
BMG 54 8th 101  
Maywood, IL 60153  
708-216-2322  
Length: 2 Year(s)  
Total Positions: 2  
Program ID: 146-16-21-005 |
| Iowa City | University of Iowa Hospitals and Clinics Program  
**Program Director:**  
Bradley E Berigan, MD  
University of Iowa Hospitals and Clinics  
Dept of Internal Medicine  
Iowa City, IA 52242-1006  
319-335-2674  
Length: 2 Year(s)  
Total Positions: 3  
Program ID: 146-18-21-096 |
| Illinois | Chicago  
McGaw Medical Center of Northwestern University Program  
Northwestern University Medical School  
Northwestern Memorial Hospital  
Veterans Affairs Lakeside Medical Center (Chicago)  
**Program Director:**  
George D Phair, MD  
Northwestern University Medical School  
600 N Lake Shore Dr Ste 1206  
Chicago, IL 60611  
312-996-6137  
Length: 2 Year(s)  
Total Positions: 10  
Program ID: 146-16-11-30 |
| North Chicago | Finch University of Health Sciences/Chicago Medical School Program  
Finch University of Health Sciences/Chicago Medical School  
Mount Sinai Hospital Medical Center of Chicago  
Veterans Affairs Medical Center (North Chicago)  
**Program Director:**  
Louis J Ruff, MD  
Univ of HEALTH Sci/Chicago Med Schl  
Dept of Medicine  
3325 Green Bay Rd  
North Chicago, IL 60064-3086  
800-270-2501  
Length: 2 Year(s)  
Total Positions: 2  
Program ID: 146-16-21-045 |
| Springfield | Southern Illinois University Program  
Southern Illinois University School of Medicine  
Memorial Medical Center  
St John's Hospital  
**Program Director:**  
George P Babin, MD  
Univ of Infectious Disease  
Southern Illinois Univ Sch of Med  
PO Box 19350  
Springfield, IL 62794-9250  
217-782-9488  
Length: 2 Year(s)  
Total Positions: 2  
Program ID: 146-16-21-180 |
| Indiana | Indianapolis  
Indiana University Medical Center Program  
Indiana University Medical Center  
**Program Director:**  
Richard Kohler, MD  
Indiana University Medical Center Dept of Medicine  
430 West Osceola Pl.  
1001 W Tenth St  
Indianapolis, IN 46292-5124  
317-607-0263  
Length: 2 Year(s)  
Total Positions: 4  
Program ID: 146-17-21-146 |
| Kansas | Kansas City  
University of Kansas Medical Center Program  
University of Kansas Medical Center  
**Program Director:**  
Robert Goldstein, MD  
University of Kansas Medical Center  
Infectious Disease  
3601 Rainbow Blvd  
Kansas City, KS 66108-3854  
913-588-6045  
Length: 2 Year(s)  
Total Positions: 4  
Program ID: 146-19-21-130 |
| Kentucky | Lexington  
University of Kentucky Medical Center Program  
University Hospital-Abbott B Chandler Medical Center  
Veterans Affairs Medical Center (Lexington)  
**Program Director:**  
Joseph Donaldson, MD  
University Hospital-Abbott B Chandler Medical Center  
Housestaff Office HQ-101  
800 Rose St  
Lexington, KY 40506-0054  
606-253-5727  
Length: 2 Year(s)  
Total Positions: 2  
Program ID: 146-26-21-188 |
| Louisville | University of Louisville Program  
University of Louisville School of Medicine  
University of Louisville Hospital  
Veterans Affairs Medical Center (Louisville)  
**Program Director:**  
Adriano A Ramirez, MD  
University of Louisville  
Dept of Medicine  
Div of Infectious Diseases  
Louisville, KY 40292  
502-852-3135  
Length: 2 Year(s)  
Total Positions: 4  
Program ID: 146-20-31-092 |

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<td>Alton Ochsner Medical Foundation Program</td>
<td>Alton Ochsner Medical Foundation</td>
<td>1514 Jefferson Hwy, New Orleans, LA 70112</td>
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<td><strong>Maryland</strong></td>
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<td>Johns Hopkins University Program*</td>
<td>Johns Hopkins University School of Medicine</td>
<td>850 N Baltimore Ave, Baltimore, MD 21205</td>
<td>410-955-5000</td>
<td>3 Year(s)</td>
<td>9</td>
</tr>
<tr>
<td><strong>University of Maryland</strong></td>
<td>Baltimore</td>
<td>Program Director</td>
<td>John W. Warren, Jr.</td>
<td>University of Maryland School of Medicine</td>
<td>1430 University Blvd, Baltimore, MD 21201</td>
<td>410-706-7599</td>
<td>2 Year(s)</td>
</tr>
<tr>
<td><strong>Bethesda</strong></td>
<td></td>
<td>National Institutes of Health Clinical Center Program*</td>
<td>NIH Clinical Center</td>
<td>10430 Rockville Pike, Bethesda, MD 20892</td>
<td>301-496-4561</td>
<td>2 Year(s)</td>
<td>12</td>
</tr>
<tr>
<td><strong>National Naval Medical Center (Bethesda) Program</strong></td>
<td>Bethesda</td>
<td>Program Director</td>
<td>Capt. John D. Harker, MD</td>
<td>National Naval Medical Center</td>
<td>301-295-5800</td>
<td>2 Year(s)</td>
<td>2</td>
</tr>
<tr>
<td><strong>Massachusetts</strong></td>
<td>Boston</td>
<td>Boston University Program*</td>
<td>Boston University School of Medicine</td>
<td>850 N. Washington St, Boston, MA 02115</td>
<td>617-353-4380</td>
<td>2 Year(s)</td>
<td>7</td>
</tr>
<tr>
<td><strong>Brigham and Women's Hospital</strong></td>
<td>Boston</td>
<td>Program Director</td>
<td>Elliott Reiff, MD, PhD</td>
<td>Brigham and Women's Hospital</td>
<td>25 Francis St, Boston, MA 02115</td>
<td>617-732-7048</td>
<td>2 Year(s)</td>
</tr>
<tr>
<td><strong>Massachusetts General Hospital</strong></td>
<td>Boston</td>
<td>Program Director</td>
<td>Stephen G. Calderwood, MD</td>
<td>Massachusetts General Hospital</td>
<td>55 Francis St, Boston, MA 02114</td>
<td>617-726-3811</td>
<td>2 Year(s)</td>
</tr>
<tr>
<td><strong>New England Deaconess Hospital</strong></td>
<td>Boston</td>
<td>Program Director</td>
<td>Adolph W. Karchmer, MD</td>
<td>Deaconess Hospital</td>
<td>770なかなか Rd, Boston, MA 02215</td>
<td>617-632-0760</td>
<td>2 Year(s)</td>
</tr>
<tr>
<td><strong>New England Medical Center Hospitals</strong></td>
<td>Boston</td>
<td>Program Director</td>
<td>Gerald K. Reun, MD</td>
<td>New England Medical Center</td>
<td>750 Washington St, Boston, MA 02111</td>
<td>617-966-2004</td>
<td>2 Year(s)</td>
</tr>
<tr>
<td><strong>Springfield</strong></td>
<td>Baystate Medical Center Program</td>
<td>Program Director</td>
<td>Richard J. Brown, MD</td>
<td>Baystate Medical Center</td>
<td>770 Charles St, Springfield, MA 01109</td>
<td>413-784-5376</td>
<td>2 Year(s)</td>
</tr>
</tbody>
</table>

* Updated information not provided.
| State       | Program Name                                                                 | University                                                                 | Program Director                                      | Address                     | Phone          | Length: Year(s) | Total Positions |
|-------------|------------------------------------------------------------------------------|------------------------------------------------------------------------------|--------------------------------------------------------|-----------------------------|----------------|----------------|----------------|----------------|
| Michigan    | Ann Arbor                                                                    | University of Michigan Hospitals                                            | Robert Pekaty, MD                                      | Ann Arbor, MI 48109-3878    | 313-936-5205   | 2              | 6              |
| Detroit     | Henry Ford Hospital Program                                                  | Henry Ford Hospital                                                         | Louis D Sarwolata, MD                                 | Detroit, MI 48202            | 313-876-3873   | 2              | 5              |
| Minnesota   | Minneapolis                                                                  | University of Minnesota Medical School                                      | M Colin Jordan, MD                                     | Minneapolis, MN 55455        | 612-624-8686   | 2              | 7              |
| Rochester   | Mayo Graduate School of Medicine Program                                     | Mayo Graduate School of Medicine-Mayo Foundation                            | Michael R Keating, MD                                 | Rochester, NY 14604          | 716-278-4385   | 2              | 5              |
| Mississippi | Jackson University of Mississippi Medical Center Program                     | University of Mississippi School of Medicine                                | Stanley W Chang, MD                                    | Jackson, MS 35205            | 601-594-5560   | 2              | 4              |
| Missouri    | Columbia University of Missouri-Columbia Program                              | University of Missouri-Columbia School of Medicine                           | E Dale Everest, MD                                     | Columbia, MO 65212           | 314-882-3107   | 2              | 3              |

* Updated information not provided.
New Hampshire

Lebanon

Dartmouth-Hitchcock Medical Center Program
Mary Hitchcock Memorial Hospital
Veterans Affairs Medical Center (White River Junction)
Program Director:
Jeffrey Parzynski, MD
Dartmouth-Hitchcock Medical Center
One Medical Center Dr
Lebanon, NH 03766
603 464-6800
Length: 2 Year(s)  Total Positions: 4
Program ID: 146-33-21-187

New Jersey

Camden

UMDNJ-Robert Wood Johnson Medical School (Camden) Program
Cooper Hospital-University Medical Center
Program Director:
Carl W Norden, MD
Cooper Hospital-University Medical Center
Education & Research Bldg Rm 270
401 Haddon Ave
Camden, NJ 08103
856 284-7787
Length: 2 Year(s)  Total Positions: 2
Program ID: 146-33-21-173

Newark

UMDNJ-New Jersey Medical School Program
UMDNJ-New Jersey Medical School
Dept of Veterans Affairs Medical Center (East Orange)
UMDNJ-University Hospital
Program Director:
Stephen A Udem, MD PhD
UMDNJ-University Hospital
100 Bergen St
Newark, NJ 07103-2757
973 888-7558
Length: 2 Year(s)  Total Positions: 5
Program ID: 146-33-21-172

Piscataway

UMDNJ-Robert Wood Johnson Medical School Program
UMDNJ-Robert Wood Johnson Medical School
Robert Wood Johnson University Hospital
St Peter's Medical Center
Program Director:
Martin P Weinstein, MD
UMDNJ-Robert Wood Johnson Medical School
Dept of Medicine
One Robert Wood Johnson Pl
New Brunswick, NJ 08903
908 235-7113
Length: 2 Year(s)  Total Positions: 4
Program ID: 146-33-21-628

South Orange

Seton Hall University School of Graduate Medical Education Program
Seton Hall University School of Graduate Medical Education
St Joseph's Hospital and Medical Center
St Michael's Medical Center (Cathedral Health Services Inc)
Program Director:
Edward S Johnson, MD
Saint Michael's Medical Center
200 Martin Luther King Blvd
Newark, NJ 07102
201 877-9690
Length: 2 Year(s)  Total Positions: 6
Program ID: 146-33-11-821

New Mexico

Albuquerque

University of New Mexico Program
University of New Mexico School of Medicine
Veterans Affairs Medical Center (Albuquerque)
Program Director:
Darwin L Palmer, MD
Div of Infectious Diseases
VAMC (III)
2100 Ridgeway Dr SE
Albuquerque, NM 87131
505 266-1171
Length: 2 Year(s)  Total Positions: 4
Program ID: 146-34-21-194

New York

Albany

Albany Medical Center Program*
Albany Medical Center Hospital
Program Director:
Michael H Miller, MD
Albany Medical College
Infectious Diseases Div A-49
47 New Scotland Ave
Albany, NY 12208
518 445-5737
Length: 2 Year(s)  Total Positions: 4
Program ID: 146-35-31-277

Bronx

Albert Einstein College of Medicine Program
Albert Einstein College of Medicine
Montefiore Medical Center-Henry and Lucy Moses Division
Program Director:
Neal Steigbigel, MD
Montefiore Medical Center
Div of Infectious Diseases
111 E 210th St
Bronx, NY 10467
718 903-5838
Length: 2 Year(s)  Total Positions: 20
Program ID: 146-35-21-101

Brooklyn

Long Island College Hospital Program*
Long Island College Hospital
Program Director:
Leonard Berkowitz, MD
Long Island College Hospital Dept of Infectious Diseases
340 Henry St 609A
Brooklyn, NY 11201
718 870-1435
Length: 2 Year(s)  Total Positions: 2
Program ID: 146-35-11-428

Maimonides Medical Center Program
Maimonides Medical Center
Program Director:
Larry I Lutwic, MD
Maimonides Medical Center
4802 Tenth Ave
Brooklyn, NY 11210
718 283-7076
Length: 2 Year(s)  Total Positions: 3
Program ID: 146-35-11-171

SUNY Health Science Center at Brooklyn Program
SUNY HSC at Brooklyn College of Medicine
Kings County Hospital Center
University Hospital-SUNY Health Science Center at Brooklyn
Veterans Affairs Medical Center (Brooklyn)
Program Director:
William M McCormack, MD
SUNY Health Science Center at Brooklyn
490 Clarkson Ave Box 56
Brooklyn, NY 11203-2068
718 222-1452
Length: 1 Year(s)  Total Positions: 2
Program ID: 146-35-21-611

Buffalo

SUNY at Buffalo Graduate Medical-Dental Education Consortium Program
SUNY at Buffalo Grad Medical-Dental Education Consortium
 Erie County Medical Center
Veterans Affairs Medical Center (Buffalo)
Program Director:
Timothy P Murphy, MD
Infectious Diseases (111F)
VA Medical Center
3466 Bailey Ave
Buffalo, NY 14215
716 882-3833
Length: 2 Year(s)  Total Positions: 6
Program ID: 146-35-31-609

East Meadow

SUNY at Stony Brook (East Meadow) Program
Nassau County Medical Center
Program Director:
Susan Forlenza, MD
Nassau County Medical Center
2201 Hempstead Turnpike
East Meadow, NY 11554-5400
516 577-6306
Length: 2 Year(s)  Total Positions: 2
Program ID: 146-35-21-893

* Updated information not provided.
Flushing
New York Hospital Medical Center of Queens Program
New York Hospital Medical Center of Queens
Program Director: James J Bahal, MD
New York Hospital Medical Center of Queens
56-45 Main St
Flushing, NY 11355
718 670-1325
Length: 2 Year(s) Total Positions: 3
Program ID: 140-35-21-178

Jamaica
Catholic Medical Center of Brooklyn and Queens Program
Catholic Medical Center of Brooklyn and Queens
Catholic Medical Center of Brooklyn and Queens Inc
Catholic Medical Center of Brooklyn and Queens Inc
Program Director: Aaron E Platt, MD
Catholic Medical Center
88-25 163rd St
Jamaica, NY 11432
718 565-7291
Length: 2 Year(s) Total Positions: 5
Program ID: 140-35-22-041

Manhasset
North Shore University Hospital Program
North Shore University Hospital
Program Director: David H Steepe, MD
North Shore University Hospital
Dept of Medicine
Div of Infectious Diseases
Manhasset, NY 11030
516 562-4290
Length: 2 Year(s) Total Positions: 2
Program ID: 140-35-21-160

Mineola
Winthrop-University Hospital Program
Winthrop-University Hospital
Program Director: Burke H Conna, MD
Winthrop-University Hospital
222 Station Plaza N
Ste 632
Mineola, NY 11501
516 693-6005
Length: 2 Year(s) Total Positions: 4
Program ID: 140-35-11-065

New Hyde Park
Albert Einstein College of Medicine at Long Island Jewish Medical Center Program
Albert Einstein College of Medicine at Long Island Jewish Medical Center
Program Director: Carol Singer, MD
Long Island Jewish Medical Center
375-57th Ave
3rd FL Oncology Bldg Rm 333
New Hyde Park, NY 11040
718 470-7399
Length: 2 Year(s) Total Positions: 3
Program ID: 140-35-21-135

New York
Albert Einstein College of Medicine at Beth Israel Medical Center Program
Beth Israel Medical Center
Program Director: Donna Milich, MD
Beth Israel Medical Center
First Ave at 16th St
Dept of Infectious Diseases
New York, NY 10065
212 420-4605
Length: 2 Year(s) Total Positions: 2
Program ID: 140-35-11-010

Harlem Hospital Center Program
Harlem Hospital Center
Program Director: Wafaa El-Sadr, MD
Infectious Disease Service RM 3101A
Harlem Hospital Center
516 Lemos Ave
New York, NY 10037
212 938-2836
Length: 2 Year(s) Total Positions: 5
Program ID: 140-35-21-162

Mount Sinai School of Medicine Program
Mount Sinai School of Medicine
Elmhurst Hospital Center-Mount Sinai School of Medicine
Program Director: Shalom S Hirshman, MD
Mount Sinai Medical Center
One Gustave L Levy Pl
Box 1096
New York, NY 10029-6574
212 241-5671
Length: 2 Year(s) Total Positions: 5
Program ID: 140-35-21-158

New York Hospital/Cornell Medical Center Program 1
New York Hospital
Program Director: Mark Y Stoeckle, MD
New York Hospital
535 E 66th St
Room A-421
New York, NY 10021
212 746-6629
Length: 2 Year(s) Total Positions: 5
Program ID: 140-35-21-161

New York Hospital/Cornell Medical Center Program 2
Memorial Sloan-Kettering Cancer Center Program
Program Director: Donald Armstrong, MD
Memorial Sloan-Kettering Cancer Center
1275 York Ave
New York, NY 10021-0990
212 639-7000
Length: 2 Year(s) Total Positions: 6
Program ID: 140-35-21-167

New York University Medical Center Program
New York University Medical Center
Belleview Hospital Center
Veterans Affairs Medical Center (Manhattan)
Program Director: H Sherwood Lawrence, MD
Dept of Internal Medicine
NYU Medical Center
500 First Ave
New York, NY 10016
212 263-6400
Length: 2 Year(s) Total Positions: 6
Program ID: 140-35-21-114

Presbyterian Hospital in the City of New York Program
Presbyterian Hospital in the City of New York
Program Director: Glenis J Garvey, MD
Presbyterian Hospital in the City of New York
632 W 168th St
New York, NY 10032-3702
212 363-3566
Length: 2 Year(s) Total Positions: 2
Program ID: 140-35-11-054

St Luke's-Roosevelt Hospital Center (St Luke's) Program
St Luke’s-Roosevelt Hospital Center
St Luke’s-Roosevelt Hospital Center-St Luke’s Division
Program Director: Michael H Grice, MD
St Luke’s-Roosevelt Hospital Center
1000 Tenth Ave
New York, NY 10019-1196
212 255-6528
Total Positions: 2
Program ID: 140-35-21-103

Rochester
University of Rochester Program
Strong Memorial Hospital of the University of Rochester
Program Director: Richard C Reichman, MD
Dept of Med-Infectious Diseases Unit
Univ of Rochester Pgm A-Box 689
601 Elmwood Ave
Rochester, NY 14642
716 275-0011
Length: 2 Year(s) Total Positions: 6
Program ID: 140-35-11-170

Stony Brook
SUNY at Stony Brook Program
University Hospital-SUNY at Stony Brook
Veterans Affairs Medical Center (Northport)
Program Director: Benjamin J Luft, MD
Health Science Center
BSC-T15 680
SUNY Stony Brook
Stony Brook, NY 11794-8153
516 444-1150
Length: 2 Year(s) Total Positions: 6
Program ID: 140-35-21-012

Syracuse
SUNY Health Science Center at Syracuse Program
University Hospital-SUNY Health Science Center at Syracuse
Crouse-Irving Memorial Hospital
Veterans Affairs Medical Center (Syracuse)
Program Director: Donald C Blair, MD
Dept of Medicine
SUNY Health Science Center
750 E Adams St
Syracuse, NY 13210
315 464-6533
Length: 2 Year(s) Total Positions: 2
Program ID: 140-35-21-140

* Updated information not provided.
Valhalla
New York Medical College (Cabrini) Program
New York Medical College Cabrini Medical Center
Program Director:
Michael P. Mullens, MD
Cabrini Medical Center
297 E 186th St
New York, NY 10033
212 995-8671
Length: 2 Year(s) Total Positions: 4
Program ID: 146-35-01-097

New York Medical College at St Vincent’s Hospital and Medical Center of New York Program
New York Medical College St Vincent's Hospital and Medical Center of New York
Program Director:
Robert L. Yarnish, MD
St Vincent’s Hospital and Medical Center of New York
153 W 11th St
New York, NY 10011
212 604-8521
Length: 2 Year(s) Total Positions: 5
Program ID: 146-35-11-174

New York Medical College at Westchester County and Medical Center Program
New York Medical College Lincoln Medical and Mental Health Center
Metro-North Medical Center
Westchester County Medical Center
Program Director:
Gary F. Wormser, MD
New York Medical College Westchester County Medical Center
Div of Infectious Diseases
Valhalla, NY 10595
914 285-8806
Length: 2 Year(s) Total Positions: 6
Program ID: 146-35-11-013

North Carolina
Chapel Hill
University of North Carolina Hospitals Program
University of North Carolina Hospitals
Program Director:
Myron S. Cohen, MD
University of North Carolina School of Medicine
Div of Infectious Diseases
547 Burnett-Womack Bldg CB#7002
Chapel Hill, NC 27599-7000
919 966-2536
Length: 2 Year(s) Total Positions: 10
Program ID: 146-36-21-136

Durham
Duke University Program
Duke University Medical Center
Program Director:
John D. Hamilton, MD
Duke University Medical Center
Box 3867
Durham, NC 27710-7599
919 668-2060
Length: 2 Year(s) Total Positions: 9
Program ID: 146-36-21-137

Winston-Salem
Bowman Gray School of Medicine Program
North Carolina Baptist Hospital
Program Director:
Charles E. McCull, MD
Bowman School of Medicine
Medical School Bld
Winston-Salem, NC 27157
910 716-4584
Length: 2 Year(s) Total Positions: 5
Program ID: 146-36-21-014

Ohio
Cincinnati
University of Cincinnati Hospital Group Program
University of Cincinnati Hospital
Veterans Affairs Medical Center (Cincinnati)
Program Director:
George S. Deese, MD
University of Cincinnati
PO Box 70076
Cincinnati, OH 45207-0009
513 559-4704
Length: 2 Year(s) Total Positions: 5
Program ID: 146-36-21-066

Cleveland
Case Western Reserve University Program
University Hospitals of Cleveland
Veterans Affairs Medical Center (Cleveland)
Program Director:
Jerrold E. Elton, MD
Division of Infectious Diseases
Case Western Reserve University
10900 Euclid Ave
Cleveland, OH 44106-4084
216 368-4045
Length: 2 Year(s) Total Positions: 12
Program ID: 146-36-21-174

Cleveland Clinic Foundation/St Vincent Charity Hospital Program
Cleveland Clinic Foundation
Program Director:
Carlos M. Ibaez, MD
Cleveland Clinic Foundation
Dept of Infectious Disease
9600 Euclid Ave
Cleveland, OH 44106-6242
216 444-2762
Length: 2 Year(s) Total Positions: 9
Program ID: 146-36-12-158

Columbus
Ohio State University Program
Ohio State University Medical Center Program Director:
Susan L. Koletar, MD
Ohio State University Hospital Dept of Medicine
410 W Tenth Ave
Columbus, OH 43210-1228
614 293-5722
Length: 2 Year(s) Total Positions: 4
Program ID: 146-36-11-094

Dayton
Wright State University Program*
Wright State University School of Medicine
Good Samaritan Hospital and Health Center
Miami Valley Hospital
Veterans Affairs Medical Center (Dayton)
Program Director:
Jack M. Bernardin, MD
Veterans Affairs Medical Center
4100 W Third St
Dayton, OH 45428
513 292-2001
Length: 2 Year(s) Total Positions: 5
Program ID: 146-36-21-189

Toledo
Medical College of Ohio at Toledo Program*
Medical College of Ohio Hospital
Program Director:
Haig Donabedian, MD
Medical College of Ohio at Toledo
CS #10008
Dept of Medicine
Toledo, OH 43696
419 281-4025
Length: 2 Year(s) Total Positions: 2
Program ID: 146-36-21-015

Oklahoma
Oklahoma City
University of Oklahoma Health Sciences Center Program
University of Oklahoma College of Medicine-Oklahoma City
University Hospital and Clinics
Veterans Affairs Medical Center (Oklahoma City)
Program Director:
Howard A. Greenfield, MD
University of Oklahoma College of Medicine
PO Box 29801
VAMC-11C
Oklahoma City, OK 73190
405 270-6001
Length: 2 Year(s) Total Positions: 2
Program ID: 146-39-21-067

Oregon
Portland
Oregon Health Sciences University Program*
Oregon Health Sciences University Hospital
Veterans Affairs Medical Center (Portland)
Program Director:
Thomas T. Ward, MD
VA Medical Center
Infectious Disease Section (111F)
PO Box 1054
Portland, OR 97207
503 273-1185
Length: 2 Year(s) Total Positions: 2
Program ID: 146-40-31-157

* Updated information not provided.
Pennsylvania

Hershey

Milton S Hershey Medical Center of Pennsylvania State University Program*
Penn State University Hospital Milton S Hershey Med Ctr
Program Director:
John N Goldman, MD
University Hospital Milton S Hershey Medical Center
PO Box 850
Hershey, PA 17033
717 831-8881
Length: 2 Year(s)
Program ID: 146-41-11-016

Philadelphia

MCPH/Hahnemann University Hospital Program
Hahnemann University Hospital
Program Director:
Abdouhader Molavi, MD
Hahnemann University Hospital
Broad & Vine Sts
Philadelphia, PA 19102-1192
215 788-8555
Length: 2 Year(s) Total Positions: 3
Program ID: 146-41-21-046

MCNPH/Medical College of Pennsylvania Hospital Program
Medical College of Pennsylvania Hospital
Program Director:
Matthew E Levinson, MD
Medical College of Pennsylvania Dept of Medicine
3300 Henry Ave
Philadelphia, PA 19129
215 842-6977
Length: 2 Year(s) Total Positions: 4
Program ID: 146-41-21-116

Temple University Program
Temple University Hospital
Program Director:
Bernard Lieber, MD
Temple University Hospital Dept of Medicine
3401 N Broad St
Philadelphia, PA 19140
215 707-3887
Length: 2 Year(s) Total Positions: 5
Program ID: 146-41-21-029

Thomas Jefferson University Program
Thomas Jefferson University Hospital
Program Director:
Michael Buckley, MD
Jefferson Medical College
1020 Locust St Rm 229 D
Philadelphia, PA 19107
215 686-8875
Length: 2 Year(s) Total Positions: 4
Program ID: 146-41-21-056

University of Pennsylvania Program
Hospital of the University of Pennsylvania
Pennsylvania Hospital
Veterans Affairs Medical Center (Philadelphia)
Program Director:
Harvey M Friedman, MD
536 Johnson Pavilion
University of Pennsylvania
Philadelphia, PA 19104-6073
215 662-2473
Length: 2 Year(s) Total Positions: 3
Program ID: 146-41-21-022

Pittsburgh

University Health Center of Pittsburgh Program
University Health Center of Pittsburgh
Monroeville University Hospital (UPMC)
Presbyterian-University Hospital/UPMC
Veterans Affairs Medical Center (Pittsburgh)
Program Director:
Edward J Wing, MD
University of Pittsburgh Medical Center
Dept of Med-MUH W331
200 Lothrop St
Pittsburgh, PA 15213-2582
412 648-6401
Length: 2 Year(s) Total Positions: 5
Program ID: 146-41-21-057

Puerto Rico

San Juan

University of Puerto Rico Program
University of Puerto Rico School of Medicine
University Hospital
Veterans Affairs Medical Center (San Juan)
Program Director:
Carlos H Ramírez-Rodríguez, MD
University Hospital
Dept of Infectious Diseases
San Juan, PR 00905
309 707-6945
Length: 2 Year(s)
Program ID: 146-42-21-118

Veterans Affairs Medical and Regional Office Center Program
Veterans Affairs Medical Center (San Juan)
Program Director:
Carlos H Ramírez-Rodríguez, MD
VA Medical and Regional Office Center (San Juan)
One Veterans Plaza (111)
San Juan, PR 00907-5800
809 765-6123
Length: 2 Year(s) Total Positions: 5
Program ID: 146-42-31-117

Rhode Island

Providence

Brown University (Roger Williams) Program
Roger Williams Medical Center
Memorial Hospital of Rhode Island
Miriam Hospital
Rhode Island Hospital
Veterans Affairs Medical Center (Providence)
Program Director:
Stephen H Zinner, MD
Brown University Box G-RW
825 Chalkstone Ave
Providence, RI 02908
401 456-2974
Length: 2 Year(s) Total Positions: 5
Program ID: 146-43-31-008

South Carolina

Charleston

Medical University of South Carolina Program*
Medical University of South Carolina College of Medicine
MUSC Medical Center
Veterans Affairs Medical Center (Charleston)
Program Director:
J Robert Custer, MD
Medical University of South Carolina
171 Ashley Ave
Charleston, SC 29425
803 792-4041
Length: 2 Year(s)
Program ID: 146-45-21-104

Tennessee

Johnson City

East Tennessee State University Program
James H Quillen College of Medicine
Johnson City Medical Center Hospital
Veterans Affairs Medical Center (Mountain Home)
Program Director:
Felix A Sarabia, MD
East Tennessee State University
PO Box 70422
Johnson City, TN 37614-0422
615 991-6299
Length: 2 Year(s) Total Positions: 3
Program ID: 146-47-21-047

Memphis

University of Tennessee Program*
University of Tennessee College of Medicine
Regional Medical Center at Memphis
Veterans Affairs Medical Center (Memphis)
Program Director:
James B Dale, MD
Michael S Boreux, MD
University of Tennessee Memphis
Dept of Medicine
406 Court Ave
Memphis, TN 38163
901 577-2707
Length: 2 Year(s) Total Positions: 5
Program ID: 146-47-21-138

Nashville

Vanderbilt University Program
Vanderbilt University Medical Center
St Thomas Hospital
Veterans Affairs Medical Center (Nashville)
Program Director:
Robert S Latham, MD
Div of Infectious Diseases
PO Box 380
St Thomas Hospital
Nashville, TN 37202
615 222-6011
Length: 2 Year(s) Total Positions: 11
Program ID: 146-47-31-017

* Updated information not provided.
Accredited Programs in Infectious Disease (Internal Medicine)

Texas

Dallas
Baylor University Medical Center Program
Baylor University Medical Center
Program Director: William L. Sather, MD
Baylor University Medical Center
3500 Gaston Ave
Dallas, TX 75246
214 820-2361
Length: 2 Year(s)
Program ID: 146-48-01-308

University of Texas Southwestern Medical School Program
University of Texas Southwestern Medical School
Dallas County Hospital District-Parkland Memorial Hospital
Veterans Affairs Medical Center (Dallas)
Program Director: James P. F. Leahy, MD
Univ of Texas Southwestern Medical Center at Dallas
5323 Harry Hines Blvd
Dallas, TX 75235-8813
214 648-2489
Length: 2 Year(s)
Program ID: 146-48-21-008

Fort Sam Houston
Brooke Army Medical Center Program
Brooke Army Medical Center
Program Director: Col C Kenneth McAllister, MD
Infectious Disease Service BAMC
Fort Sam Houston
San Antonio, TX 78234-0228
210 916-5755
Length: 2 Year(s)
Program ID: 146-48-12-133

Galveston
University of Texas Medical Branch Hospitals Program
University of Texas Medical Branch Hospitals
Program Director: Jon T. Mader, MD
Div of Infectious Diseases 1062
Former Shriners' Burns Bldg 2-68
University of Texas Medical Branch
Galveston, TX 77555-1962
409 772-2534
Length: 2 Year(s)
Program ID: 146-48-21-048

Houston
Baylor College of Medicine Program
Baylor College of Medicine
Durham County Hospital District-Ben Taub General Hospital
Methodist Hospital
Veterans Affairs Medical Center (Houston)
Program Director: Daniel M. Mosher, MD
Infectious Diseases Section
910 455-7070
VA Hospital
Houston, TX 77030
713 794-7384
Length: 2 Year(s)
Program ID: 146-48-21-047

University of Texas at Houston Program
University of Texas Medical School at Houston
Hornemann Hospital
Lyndon B Johnson General Hospital
University of Texas M D Anderson Cancer Center
Program Director: Herbert L. DePouw, MD
University of Texas Medical School
PO Box 2788
Houston, TX 77225
713 792-4629
Length: 2 Year(s)
Program ID: 146-48-21-018

Lackland AFB
Wilford Hall USAF Medical Center Program
Wilford Hall USAF Medical Center (SG)
Program Director: Gregory F. Melcher, MD
WHCMU/PSMI
Dept of Infectious Diseases
2260 Bergquist Dr Ste 1
Lackland AFB, TX 78236-5300
210 670-7444
Length: 2 Year(s)
Program ID: 146-48-15-049

San Antonio
University of Texas Health Science Center at San Antonio Program
University of Texas Medical School at San Antonio
Audie L Murphy Memorial Veterans Hospital (San Antonio)
University Hospital-South Texas Medical Center
Program Director: Jean A. Smith, MD
University of Texas Health Science Center
Div of Infectious Diseases
7703 Floyd Curl Dr
San Antonio, TX 78284-7781
210 567-6813
Length: 2 Year(s)
Program ID: 146-48-21-007

Utah
Salt Lake City
University of Utah Program
University of Utah Medical Center
Veterans Affairs Medical Center (Salt Lake City)
Program Director: John B Hibbs Jr, MD
Div of Infectious Diseases
University of Utah School of Medicine
50 N Medical Dr Rm 40322
Salt Lake City, UT 84132
801 581-8812
Length: 2 Year(s)
Program ID: 146-48-21-018

Virginia
Charlottesville
University of Virginia Program
University of Virginia Medical Center
Program Director: Gerald I. Mandell, MD
Univ of Virginia Health Sciences Center Dept of Medicine
Box 365
Div of Infectious Diseases
Charlottesville, VA 22908
804 856-5542
Length: 2 Year(s)
Program ID: 146-48-01-019

Richmond
Medical College of Virginia/Virginia Commonwealth University Program*
Medical College of Virginia/Virginia Commonwealth University
Hunter Holmes McGuire VA Medical Center (Richmond)
Medical College of Virginia Hospitals
Program Director: Gordon A. Archer, MD
MCV/Virginia Commonwealth Univ
PO Box 960490
Richmond, VA 23298-0490
804 784-9714
Length: 2 Year(s)
Program ID: 146-48-21-020

Roanoke
University of Virginia (Roanoke-Salem) Program
Carilion Health System
Veterans Affairs Medical Center (Salem)
Community Hospital of Roanoke Valley
Roanoke Memorial Hospitals
University of Virginia Medical Center
Program Director: Charles J Schleupner, MD
Veterans Affairs Medical Center
Section of Infectious Diseases
1970 Cabell Rd
Salem, VA 24153
703 982-2433
Length: 2 Year(s)
Program ID: 146-48-01-080

Washington
Seattle
University of Washington Program
University of Washington School of Medicine
University of Washington Medical Center
Program Director: Walter E Stamm, MD
Dept of Medicine RM 13
Div of Allergy & Infectious Disease
1969 Pacific
Seattle, WA 98195
206 598-5480
Length: 2 Year(s)
Program ID: 146-48-21-071

* Updated information not provided.
West Virginia

Huntington
Marshall University School of Medicine Program
Marshall University School of Medicine Cabell Huntington Hospital Charleston Area Medical Center St Mary's Hospital Veterans Affairs Medical Center (Huntington)
Program Director: William McCabe, MD Marshall University School of Medicine Dept of Medicine 1 Laboratory School of Medicine Huntington, WV 25755-0410 304-691-7211 Length: 3 Year(s) Total Positions: 4 Program ID: 148-54-21-5-01

Morgantown
West Virginia University Program
West Virginia University Hospitals
Program Director: Melanie A Fisher, MD West Virginia University Hospital Div of Medicine/Infectious Diseases PO Box 9111 Morgantown, WV 26506-0911 304-595-3505 Length: 3 Year(s) Total Positions: 2 Program ID: 148-54-21-188

Wisconsin

Madison
University of Wisconsin Program
University of Wisconsin Hospital and Clinics William J Middleton Veterans Hospital
Program Director: Dennis O Maki, MD University of Wisconsin Hospital and Clinics 600 Highland Ave Rd HU-674 Madison, WI 53792-0001 608-263-1454 Length: 3 Year(s) Total Positions: 3 Program ID: 148-54-21-120

Milwaukee
Medical College of Wisconsin Program
Medical College of Wisconsin Affiliated Hospitals Inc Clement J Zablocki Veterans Affairs Medical Center Froedtert Memorial Lutheran Hospital John I Doyne Hospital
Program Director: David R Wagner, MD Medical College of Wisconsin Dept of Infectious Diseases 8700 W Wisconsin Ave Box 117 Milwaukee, WI 53226 414-257-6011 Length: 3 Year(s) Total Positions: 4 Program ID: 148-54-31-039

Internal Medicine

Alabama

Birmingham
Birmingham Baptist Medical Centers Program
Birmingham Baptist Medical Centers Inc Birmingham Baptist Medical Center-Montclair Birmingham Baptist Medical Center-Princeton
Program Director: Robert A Krebsberg, MD Baptist Med Ctr-Montclair 840 Montclair Rd Birmingham, AL 35213 205-692-1591 Length: 3 Year(s) Total Positions: 28 (GYT: 12) Program ID: 140-01-21-620

Carraway Methodist Medical Center Program
Carraway Methodist Medical Center
Program Director: Dennis G Delgado, MD Carraway Methodist Medical Center 1650 Carraway Blvd Birmingham, AL 35224 205-226-6397 Length: 3 Year(s) Total Positions: 20 (GYT: 10) Program ID: 140-01-31-021

University of Alabama Medical Center (Montgomery) Program
University of Alabama Hospital Baptist Medical Center Montgomery Regional Medical Center
Program Director: J J Kirschenfeld, MD Univ of Alabama Montgomery Dept of Internal Med 4240 Narrow Ln Rd Montgomery, AL 36111 205-288-5353 Length: 3 Year(s) Total Positions: 21 (GYT: 7) Program ID: 140-01-21-144

University of Alabama Medical Center Program
University of Alabama Hospital Cooper Green Veterans Affairs Medical Center (Birmingham)
Program Director: William E Disnake, MD Univ of Alabama at Birmingham Dept of Internal Med Medicine House Staff Office DERR 15 Birmingham, AL 35294-0012 205-994-2400 Length: 3 Year(s) Total Positions: 12A (GYT: 45) Subspecialties: CCM,CD,END,GE,ID,IM,NEP,PID,RHU Program ID: 140-01-21-922

Mobile
University of South Alabama Program
University of South Alabama Medical Center
Program Director: Richard D DelSanto, MD Univ of South Alabama Med Ctr 2451 Filligim St Mobile, AL 36617 205-471-7001 Length: 3 Year(s) Total Positions: 40 (GYT: 14) Subspecialties: CD,EE,ID,PUD Program ID: 140-01-11-024

Arizona

Phoenix
Good Samaritan Regional Medical Center Program
Good Samaritan Regional Medical Center Carl T Hayden Veterans Affairs Medical Center (Phoenix)
Program Director: Alan L Leibowitz, MD Good Samaritan Regional Medical Center Dept of Medicine 1111 E McDowell Rd Phoenix, AZ 85006 602-339-2336 Length: 3 Year(s) Total Positions: 55 (GYT: 28) Subspecialties: CD,END,IM,NEP,PID,RHU Program ID: 140-08-21-023

Maricopa Medical Center Program
Maricopa Medical Center
Program Director: David E Waring, MD Maricopa Med Ctr Dept of Internal Medicine 2961 E Roosevelt Phoenix, AZ 85008 602-387-5895 Length: 3 Year(s) Total Positions: 34 (GYT: 22) Program ID: 140-08-11-028

St Joseph's Hospital and Medical Center Program
St Joseph's Hospital and Medical Center Carl T Hayden Veterans Affairs Medical Center (Phoenix)
Program Director: John B Reffett, MD Dept of Internal Medicine St Joseph's Hospital and Med Ctr PO Box 2071 Phoenix, AZ 85001-2071 602-406-3375 Length: 3 Year(s) Total Positions: 36 (GYT: 17) Program ID: 140-08-11-027

Tucson
Tucson Hospitals Medical Education Program
Tucson Hospitals Medical Education Program Inc Kino Community Hospital
Program Director: Morton Plotz, MD Dept of Internal Medicine Box 42165 5301 E Grant Rd Tucson, AZ 85733 602-244-5435 Length: 3 Year(s) Total Positions: 11 (GYT: 9) Program ID: 140-08-21-028

University of Arizona Program
University of Arizona College of Medicine University Medical Center Veterans Affairs Medical Center (Tucson)
Program Director: Richard M Mandel, MD Marcia Ko, MD Univ of Arizona Health Sciences Center Medicine Education Office 1501 N Campbell Ave Rm 6336 Tucson, AZ 85721 602-626-7008 Length: 3 Year(s) Total Positions: 47 (GYT: 18) Subspecialties: CD,END,GE,ID,NEP,PID,PCC,RHU Program ID: 140-08-21-029

* Updated information not provided.
Arkansas

Little Rock

University of Arkansas for Medical Sciences Program
University of Arkansas College of Medicine
John L McCloy Memorial Veterans Hospital
University Hospital of Arkansas

Program Director:
Robert W Bradsher Jr, MD
U of Arkansas for Med Sci
Med House Staff Slot 034
4301 W Markham
Little Rock, AR 72205-7199
501 682-5162

Length: 3 Year(s) Total Positions: 63 (GYI: 21)
Subspecialties: CD,END,GER,D,HEM,JD,IDS,FUPON,PCC,RHU
Program ID: 1404-04-4390

California

Bakersfield

Kern Medical Center Program
Kern Medical Center

Program Director:
Edward L Arusa, MD
Royce H Johnson, MD
Kern Medical Center
1830 Flower St
Bakersfield, CA 93306
661 325-2300

Length: 3 Year(s) Total Positions: 22 (GYI: 9)
Program ID: 1404-05-31-031

Fresno

University of California (San Francisco)/Fresno Program
UCSF/Fresno Medical Education Program
Valley Medical Center of Fresno
Veterans Affairs Medical Center (Fresno)

Program Director:
A William Holmes, MD
Dept of Internal Medicine
Valley Medical Center
445 S Cedar Ave
Fresno, CA 93702
209 452-4390

Length: 3 Year(s) Total Positions: 44 (GYI: 22)
Subspecialties: CD
Program ID: 1404-05-31-033

La Jolla

Scripps Clinic and Research Foundation Program
Scripps Clinic and Research Foundation

Program Director:
Stanley D Freedman, MD
Dept of Graduate Medical Education 400C
Scripps Clinic & Research Pnd
10666 N Torrey Pines Rd
La Jolla, CA 92037-1090
619 554-9974

Length: 3 Year(s) Total Positions: 19 (GYI: 6)
Subspecialties: CD,END,ER,HEM,JD,RHU
Program ID: 1404-05-31-040

Loma Linda

Loma Linda University Program
Loma Linda University Medical Center
Jerry L Pectaus Memorial Veterans Hospital

Program Director:
Roy V Jutzy, MD
Loma Linda University Medical Center
Dept of Internal Medicine
PO Box 2000
Loma Linda, CA 92354
909 824-0658

Length: 3 Year(s) Total Positions: 83 (GYI: 40)
Subspecialties: CD,END,GER,D,HEM,JD,IDS,FUPON,PCC,RHU
Program ID: 1404-05-21-038

Long Beach

St Mary Medical Center Program
St Mary Medical Center
Los Angeles County-Long Beach-UCLA Medical Center

Program Director:
Peter V Barrett, MD
St Mary Medical Center
Dept of Medical Education
1500 Linden Ave
Long Beach, CA 90813
310 491-9356

Length: 3 Year(s) Total Positions: 30 (GYI: 14)
Program ID: 1404-05-31-038

Los Angeles

 Cedars-Sinai Medical Center Program
Cedars-Sinai Medical Center

Program Director:
Mark S Noach, MD
Cedars-Sinai Med Ctr
Dept of Internal Med
8700 Beverly Blvd
Los Angeles, CA 90048
213 865-5161

Length: 3 Year(s) Total Positions: 83 (GYI: 33)
Subspecialties: CD,END,ER,HEM,JD,IDS,FUPON,PCC,RHU
Program ID: 1404-05-11-040

Charles R Drew University Program*
Charles R Drew University of Medicine and Science
LAC-King/Drew Medical Center

Program Director:
Keith C Norris, MD
Martha Luther King Jr-Drew Medical Center
12021 S Wilmington Ave
Los Angeles, CA 90065
310 666-8574

Length: 3 Year(s) Total Positions: 40 (GYI: 15)
Subspecialties: CD,END,PUL
Program ID: 1404-05-11-045

UCLA Medical Center Program
UCLA School of Medicine

Program Director:
Joni T Tillisch, MD
Univ of California (Los Angeles)
Dept of Med
Los Angeles, CA 90024-1726
213 825-2725

Length: 3 Year(s) Total Positions: 75 (GYI: 32)
Subspecialties: CD,END,ER,HEM,JD,IDS,FUPON,PCC,RHU
Program ID: 1404-05-11-046

University of Southern California Program*
Los Angeles County-USC Medical Center

Program Director:
Robert A Lassen, MD
Los Angeles County-USC Med Ctr
2025 Zonal Ave
1RD RM 225
Los Angeles, CA 90033
213 226-7556

Length: 3 Year(s) Total Positions: 50 (GYI: 23)
Subspecialties: CD,END,ER,HEM,JD,IDS,FUPON,PCC,RHU
Program ID: 1404-05-31-044

Veterans Affairs Medical Center (West Los Angeles) Program
Veterans Affairs Medical Center (West Los Angeles)

Program Director:
Robert C Hollandier, MD
West Los Angeles VA Med Ctr
11201 Wilshire Blvd 111A
Los Angeles, CA 90073
310 834-4423

Length: 3 Year(s) Total Positions: 55 (GYI: 29)
Subspecialties: CD,END,ER,HEM,JD,IDS,FUPON,PCC,RHU
Program ID: 1404-05-31-048

White Memorial Medical Center Program
White Memorial Medical Center

Program Director:
Michael W Sue, MD
White Memorial Medical Center
1720 Cesar E Chavez Ave
Los Angeles, CA 90033-2421
213 266-5000

Length: 3 Year(s) Total Positions: 19 (GYI: 9)
Program ID: 1404-05-11-049

Los Angeles (Sepulveda)

UCLA San Fernando Valley Program
Veterans Affairs Medical Center (Sepulveda)
LAC-Olive View Medical Center

Program Director:
Jill M Klessid, MD
VA Medical Center
16111 Plummer St 111T
Sepulveda, CA 91345
818 985-6997

Length: 3 Year(s) Total Positions: 71 (GYI: 34)
Subspecialties: CD,END,ER,HEM,JD,IDS,FUPON,PCC,RHU
Program ID: 1404-05-31-047

Oakland

Highland General Hospital Program
Highland General Hospital

Program Director:
Theodore G Rose Jr, MD
Alameda County Medical Center-Highland Campus
1411 E 31st St
Oakland, CA 94602
510 437-4258

Length: 3 Year(s) Total Positions: 58 (GYI: 18)
Program ID: 1404-05-31-051

Kaiser Permanente Medical Group (Northern California) Program
Kaiser Permanente Medical Group (Northern California)
Kaiser Permanente Medical Center (Oakland)

Program Director:
Stanley F Sia, MD
Kaiser Permanente Medical Center
Medical Education Office
300 W MacArthur Blvd
Oakland, CA 94611
510 596-6105

Length: 3 Year(s) Total Positions: 34 (GYI: 15)
Program ID: 1404-05-13-052

* Updated information not provided.
Sacramento
University of California (Davis) Program
University of California (Davis) Medical Center
Kaiser Foundation Hospital (Sacramento)
Program Director:
Faith T Fitzgerald, MD
Joseph Silva, MD
University of California (Davis) Medical Center
Dept of Internal Medicine
4301 X St.
Sacramento, CA 95817
916 754 7090
Length: 3 Year(s) Total Positions: 35 (GYI: 15)
Subspecialties: CD,EN,GE,ID,IM,NEP,PCC,RHU
Program ID: 140-05-21-032

San Diego
Mercy Hospital and Medical Center Program
Mercy Hospital and Medical Center
Program Director:
Stanley A Amundson, MD
Mercy Hospital and Medical Center
4077 Fithm Ave
San Diego, CA 92103-2180
619 280-7215
Length: 3 Year(s) Total Positions: 32 (GYI: 11)
Subspecialties: CD
Program ID: 140-05-11-057

Nava University of California (San Diego) Program
Nava Medical Center (San Diego)
Program Director:
Capi Auch E Maguire, MD
Nava Medical Center
Dep of Medicine Code OCC
38480 Bob Wilson Dr
San Diego, CA 92034-5000
619 552-7554
Length: 3 Year(s) Total Positions: 18 (GYI: 12)
Subspecialties: CD,EN,GE,ID,IM,NEP,PCC,RHU
Program ID: 140-05-12-012

San Francisco
California Pacific Medical Center Program
California Pacific Medical Center
California Pacific Medical Center (Pacific Campus)
Program Director:
Alisa Pont, MD
California Pacific Med Ctr
PO Box 7609
Stanford, 94303
San Francisco, CA 94120
415 923-3376
Length: 3 Year(s) Total Positions: 54 (GYI: 20)
Subspecialties: CD,EN,GE,IM,NEP,PCC,RHU
Program ID: 140-05-12-062

St Mary's Hospital and Medical Center Program
St Mary's Hospital and Medical Center
Program Director:
Anthony M Conotino, MD
St Mary's Medical Center
Med Educ Dept
650 Stanyan St
San Francisco, CA 94117-1079
415 750-5781
Length: 3 Year(s) Total Positions: 36 (GYI: 20)
Subspecialties: CD
Program ID: 140-05-22-067

University of California (San Francisco) Program
University of California (San Francisco) School of Medicine
San Francisco General Hospital Medical Center
University of California (San Francisco) Medical Center
Veterans Affairs Medical Center (San Francisco)
Program Director:
Floyd C Rector Jr, MD
Dept of Medicine-U of California San Francisco
Moffitt Hospital Rm 994
505 Parnassus Ave Box 9120
San Francisco, CA 94143-0120
415 476-2338
Length: 3 Year(s) Total Positions: 140 (GYI: 56)
Subspecialties: CD,EN,GE,ID,IM,NEP,PCC,RHU
Program ID: 140-05-21-064

University of California (San Francisco)/Mount Zion Program
University of California (San Francisco) School of Medicine
Mount Zion Medical Center of the University of California
Program Director:
Kenneth A Weeber, MD
UCSF/Mount Zion
1600 Divisadero St
San Francisco, CA 94115
415 886-7574
Length: 3 Year(s) Total Positions: 30 (GYI: 15)
Subspecialties: CD,EN,GE,ID
Program ID: 140-05-31-061

San Jose
Santa Clara Valley Medical Program
Santa Clara Valley Medical Center
Program Director:
William A Jensen, MD
Dept of Medicine Att: Cheryl Nelli
751 S Bascom Mall Stop 6897 RM44077
San Jose, CA 95128
408 866-2000
Length: 3 Year(s) Total Positions: 46 (GYI: 18)
Subspecialties: HIU
Program ID: 140-05-31-065

Santa Barbara
Santa Barbara Cottage Hospital Program
Santa Barbara Cottage Hospital
Santa Barbara County Health Care Services
Program Director:
Andrew S Gerson, MD
Santa Barbara Cottage Hospital
PO Box 689
Santa Barbara, CA 93102
905 684-2735
Length: 3 Year(s) Total Positions: 22 (GYI: 10)
Program ID: 140-05-22-066

* Updated information not provided.
Accredited Programs in Internal Medicine

Stanford
Stanford University Program
Stanford University Hospital
Veterans Affairs Medical Center (Palo Alto)
Program Director:
Kelley S Streif, MD PhD
Stanford University Medical Center
Dept of Medicine S-002
Stanford, CA 94305
415-725-8304
Length: 3 Years (Total Positions: 80 (GYI: 35)
Subspecialties:
CCM, CD, END, GE, HEM, ID, IMG, NEP, ON, PCC, RHU
Program ID: 140-05-11-068

Stockton
San Joaquin General Hospital Program
San Joaquin General Hospital
Program Director:
Sherida Kapre, MD
San Joaquin General Hospital
Box 1020
Stockton, CA 95204
209-638-6111
Length: 3 Year(s) Total Positions: 16 (GYI: 5)
Program ID: 140-05-13-069

Torrance
Los Angeles County-Harbor-UCLA Medical Center Program
Los Angeles County-Harbor-UCLA Medical Center
Program Director:
Darryl Y Sue, MD
Los Angeles County Harbor-UCLA Medical Center
1900 W Carson St #400
Torrance, CA 90505-3910
310-222-2409
Length: 3 Year(s) Total Positions: 50 (GYI: 20)
Subspecialties:
CCM, CD, END, HEM, ID, NRP, ON, PUD, RHU
Program ID: 140-05-11-070

Travis AFB
David Grant USAF Medical Center Program*
David Grant Medical Center
Program Director:
Terrence J O'Neil, MD
David Grant USAF Medical Center (AMC)
101 Bodin Circle
Travis AFB, CA 94555-1890
707-423-3843
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 140-05-21-485

Colorado
Aurora
Fitzsimons Army Medical Center Program
Fitzsimons Army Medical Center
Program Director:
James P Hasley, MD
Robert H Gaen, MD
Department of Medicine
Fitzsimons Army Medical Center
Aurora, CO 80046-5001
303-361-8331
Length: 3 Year(s) Total Positions: 23 (GYI: 7)
Subspecialties: CD
Program ID: 140-07-12-005

Denver
Presbyterian-St Luke's Medical Center Program
Presbyterian-St Luke's Medical Center
Program Director:
Joseph L Mathews, MD
Presbyterian-St Luke’s Medical Center
1719 E 18th Ave
Denver, CO 80218
303-938-6600
Length: 3 Year(s) Total Positions: 36 (GYI: 14)
Program ID: 140-07-31-071

St Joseph Hospital Program
St Joseph Hospital
Program Director:
Robert B Gibbons, MD
St Joseph Hospital
1835 Franklin St
Denver, CO 80218-1101
303-857-7886
Length: 3 Year(s) Total Positions: 34 (GYI: 18)
Program ID: 140-07-31-072

University of Colorado Program
University of Colorado Health Sciences Center
Denver Health and Hospitals
Rose Medical Center
Veterans Affairs Medical Center (Denver)
Program Director:
William Kiehl, MD
University of Colorado Medical Center
4200 E Ninth Ave
Box B-171
Denver, CO 80262
303-724-7788
Length: 3 Year(s) Total Positions: 104 (GYI: 38)
Subspecialties:
CCM, CD, END, GE, HEM, ID, IMG, NEP, ON, PUD, RHU
Program ID: 140-07-21-073

Connecticut
Bridgeport
St Vincent's Medical Center Program
St Vincent's Medical Center
Program Director:
Everett B Cooper, MD
St Vincent's Medical Center
Dept of Medicine
2800 Main St
Bridgeport, CT 06606
203-576-5576
Length: 3 Year(s) Total Positions: 31 (GYI: 12)
Program ID: 140-08-11-075

Yale University (Bridgeport) Program
Bridgeport Hospital
Program Director:
David A Baker, MD
Bridgeport Hospital
267 Grant St
Bridgeport, CT 06604-2870
203-364-3792
Length: 3 Year(s) Total Positions: 34 (GYI: 10)
Subspecialties: CD, GE, PUD
Program ID: 140-08-11-074

Danbury
Danbury Hospital Program
Danbury Hospital
Program Director:
Paul B Iannini, MD
Danbury Hospital
24 Hospital Ave
Danbury, CT 06810
203-797-7865
Length: 3 Year(s) Total Positions: 16 (GYI: 16)
Program ID: 140-08-11-076

Derby
Griffin Hospital Program
Griffin Hospital
Program Director:
Vincent A Delucia Jr, MD
Griffin Hosp
130 Division St
Derby, CT 06418
203-732-7355
Length: 3 Year(s) Total Positions: 17 (GYI: 9)
Subspecialties: GE
Program ID: 140-08-31-077

Farmington
University of Connecticut (New Britain) Program
University of Connecticut School of Medicine
Mount Sinai Hospital
New Britain General Hospital
Univ of Connecticut Health Center/John Dempsey Hospital
Program Director:
James L Bernese, MD
University of Connecticut Health Center
Dept of Medicine
Farmington, CT 06030
203-679-4017
Length: 3 Year(s) Total Positions: 60 (GYI: 30)
Program ID: 140-08-21-489

University of Connecticut Program
University of Connecticut School of Medicine
Hartford Hospital
St Francis Hospital and Medical Center
Univ of Connecticut Health Center/John Dempsey Hospital
Veterans Affairs Medical Center (Newington)
Program Director:
Richard A Garibaldi, MD
University of Connecticut Health Center
Dept of Internal Medicine
Rm J 0004 MC 0050
Farmington, CT 06030
203-679-3553
Length: 3 Year(s) Total Positions: 125 (GYI: 43)
Subspecialties: CD, END, GE, ID, IMG, NEP, PCC, RHU
Program ID: 140-08-31-078

Greenwich
Greenwich Hospital Association Program
Greenwich Hospital
Program Director:
David Morris, MD
Greenwich Hosp Assn
Dept of Internal Medicine
5 Perryside Rd Rm 488 N
Greenwich, CT 06830
203-883-3813
Length: 3 Year(s) Total Positions: 21 (GYI: 13)
Program ID: 140-08-21-079

* Updated information not provided.

468 Graduate Medical Education Directory
New Haven
Hospital of St Raphael Program
Hospital of St Raphael
Program Director:
Ernest D Moritz, MD
Hospital of Saint Raphael Dept of Internal Medicine
1450 Chapel St
New Haven, CT 06511
203 788-9302
Length: 3 Year(s) Total Positions: 45 (GYI: 21)
Subspecialties: CD,GE,NEP
Program ID: 140-08-31-064

Yale-New Haven Medical Center
(Waterbury) Program
Yale-New Haven Hospital
St Mary's Hospital
Waterbury Hospital Health Center
Program Director:
Stephen J Fluor, MD PhD
Yale Primary Care Program
Dept of Internal Medicine
333 Cedar St Rm 87 LMP
New Haven, CT 06530-8823
203 785-7249
Length: 3 Year(s) Total Positions: 71 (GYI: 33)
Program ID: 140-08-21-060

Yale-New Haven Medical Center Program*
Yale-New Haven Hospital
Veterans Affairs Medical Center (West Haven)
Program Director:
Rosemarie L Fisher, MD
Yale-New Haven Hospital
20 York St
New Haven, CT 06504
203 785-7113
Length: 3 Year(s) Total Positions: 93 (GYI: 42)
Subspecialties: CCM,CD,END,GE,HEM,ID,IMG,NEPON,PUD,RHU
Program ID: 140-08-21-065

Norwalk
Yale University/Norwalk Hospital Program
Norwalk Hospital
Program Director:
Joseph D Cloey, MD
Dept of Medicine
Norwalk Hospital
Maple St
Norwalk, CT 06856
203 852-2375
Length: 2 Year(s) Total Positions: 38 (GYI: 18)
Subspecialties: CD,GE,PUD
Program ID: 140-08-31-090

Delaware
Wilmington
The Medical Center of Delaware Program
The Medical Center of Delaware
Program Director:
Virginia C Coller, MD
Dept of Medicine
PD Box 9091
Rm 6399
Newark, DE 19718
302 735-6344
Length: 3 Year(s) Total Positions: 35 (GYI: 14)
Program ID: 140-09-11-090

District of Columbia
Washington
District of Columbia General Hospital Program*
District of Columbia General Hospital
Georgetown University Hospital
Program Director:
Kamalji Sethi, MD
District of Columbia General Hospital
Georgetown Dept of Medicine
19th St & Massachusetts Ave SE
Washington, DC 20033
202 575-7172
Length: 3 Year(s) Total Positions: 30 (GYI: 13)
Program ID: 140-10-21-060

George Washington University Program
George Washington University School of Medicine
George Washington University Hospital
Veterans Affairs Medical Center (Washington DC)
Program Director:
Beth Horowitz, MD
George Washington Univ Med Ctr
Dept of Medicine
2150 Pennsylvania Ave NW #5-422
Washington, DC 20037
202 994-3147
Length: 3 Year(s) Total Positions: 78 (GYI: 20)
Subspecialties: CCM,CD,END,GE,HEM,ID,IMG,NEPON,PUD,RHU
Program ID: 140-10-21-063

Georgetown University Program
Georgetown University Hospital
Program Director:
John M Eisenberg, MD
Georgetown Univ Med Ctr
Dept of Medicine/PHC-5
3800 Reservoir Rd NW
Washington, DC 20007
202 687-5057
Length: 3 Year(s) Total Positions: 92 (GYI: 35)
Subspecialties: CD,END,GE,HEM,ID,NEPON,PCC,RHU
Program ID: 140-10-21-091

Howard University Program
Howard University Hospital
District of Columbia General Hospital
Greater Southeast Community Hospital
Program Director:
Adrian O Hosten, MD
Howard Univ Hosp
2041 Georgia Ave NW
Washington, DC 20050
202 865-6620
Length: 3 Year(s) Total Positions: 88 (GYI: 35)
Subspecialties: CCM,CD,END,GE,HEM,ID,NEPON,PUD,RHU
Program ID: 140-10-21-061

Providence Hospital Program
Providence Hospital
Program Director:
Jannette C Gilboen, MD
Providence Hosp
1156 Varnum St NE
Washington, DC 20017
202 269-7747
Length: 3 Year(s) Total Positions: 21 (GYI: 6)
Program ID: 140-10-21-095

Veterans Affairs Medical Center (Washington) Program
Veterans Affairs Medical Center (Washington DC)
Program Director:
James D Pilkadeith, MD
Veterans Affairs Med Ctr
Med Serv (111)
50 Irving St NW
Washington, DC 20422
202 745-6121
Length: 3 Year(s) Total Positions: 28 (GYI: 10)
Program ID: 140-10-21-096

Walter Reed Army Medical Center Program
Walter Reed Army Medical Center
Program Director:
Yancy V Phillips, MD
Chief Dept of Medicine
Walter Reed Army Medical Center
6625 16th St NW
Washington, DC 20007-6001
202 787-6205
Length: 3 Year(s) Total Positions: 38 (GYI: 12)
Subspecialties: CCM,CD,END,GE,HEM,ID,IMG,NEPON,PUD,RHU
Program ID: 140-10-11-096

Washington Hospital Center Program
Washington Hospital Center
Program Director:
Leonard Wartofsky, MD
Dept of Medicine
Washington Hosp Ctr
110 Irving St NW
Washington, DC 20010-2997
202 877-6271
Length: 3 Year(s) Total Positions: 67 (GYI: 35)
Subspecialties: CD,GE,ID,NEP,RHU
Program ID: 140-10-11-097

Florida
Gainesville
University of Florida Program
University of Florida College of Medicine
Shands Hospital at the University of Florida
Veterans Affairs Medical Center (Gainesville)
Program Director:
Craig C Kitchen, MD
Univ of Florida College of Medicine
Box 100577 JIMH
Gainesville, FL 32610
904 846-0422
Length: 3 Year(s) Total Positions: 63 (GYI: 28)
Subspecialties: CD,END,GE,HEM,ID,IMG,NEPON,PCC,RHU
Program ID: 140-11-21-098

Jacksonville
University of Florida Health Science Center/Jacksonville Program
University Medical Center (UFHSCJ)
Program Director:
Linda M Robertson, MD
Univ of Florida Hlth Sci Ctr/Jacksonville
605 W Eighth St
Jacksonville, FL 32209
904 584-3075
Length: 3 Year(s) Total Positions: 40 (GYI: 20)
Subspecialties: CD,END,GE,ID,ON
Program ID: 140-11-21-099

* Updated information not provided.

Graduate Medical Education Directory
Miami
University of Miami-Jackson Memorial Medical Center Program
University of Miami-Jackson Memorial Medical Center
Veterans Affairs Medical Center (Miami)
Program Director:
Mark A. Gorbard, MD
Jackson Memorial Hospital Dept of Internal Medicine
1611 NW 12th Ave
Central Bldg Rm 600
Miami, FL 33136
305 558-9298
Length: 3 Year(s) Total Positions: 125 (GYI: 50)
Subspecialties: CCM,CD,END,GE,ID,IMG,NEP,PPC,RHU
Program ID: 140-11-31-100

Miami Beach
Mount Sinai Medical Center of Greater Miami Program
Mount Sinai Medical Center of Greater Miami
Program Director:
Kenneth B. Rahaim, MD
Mount Sinai Medical Center
4300 Alton Rd
Miami Beach, FL 33140
305 674-2053
Length: 3 Year(s) Total Positions: 34 (GYI: 13)
Subspecialties: CD
Program ID: 140-11-12-101

Orlando
Orlando Regional Healthcare System Program
Orlando Regional Medical Center
Program Director:
Jerald F. Fadem Jr, MD
Dept of Internal Medicine
Orlando Regional Healthcare System
1414 S Orange Ave
Orlando, FL 32806-2083
800 886-7272
Length: 3 Year(s) Total Positions: 19 (GYI: 9)
Program ID: 140-11-31-102

Tampa
University of South Florida Program
University of South Florida College of Medicine
James A. Haley Veterans Hospital
Tampa General Healthcare
Program Director:
Roy H Bohnke, MD
Univ of South Florida Coll of Med
12801 Bruce B Downs Blvd Box 19
Tampa, FL 33612-4769
813 974-2571
Length: 3 Year(s) Total Positions: 67 (GYI: 25)
Subspecialties: CCM,CD,END,GE,ID,IMG,NEP,PUD,RHU
Program ID: 140-11-31-104

Georgia
Atlanta
Emory University Program
Emory University School of Medicine
Crawford Long Hospital of Emory University
Emory University Hospital
Grady Memorial Hospital
Veterans Affairs Medical Center (Atlanta)
Program Director:
Juhu P. Rokko, MD PhD
Emory University School of Medicine
Dept of Medicine
69 Butler St SE
Atlanta, GA 30303-3219
404 692-3527
Length: 3 Year(s) Total Positions: 153 (GYI: 62)
Subspecialties: CD,END,GE,ID,IMG,NEP,PPC,RHU
Program ID: 140-12-21-106

Georgia Baptist Medical Center Program
Georgia Baptist Medical Center
Program Director:
George W. Meyer, MD
Georgia Baptist Health Care System
Box 4030 2303 Parkview Dr NE
Dept of Internal Medicine
Atlanta, GA 30312-1121
404 355-4191
Length: 3 Year(s) Total Positions: 24 (GYI: 8)
Program ID: 140-12-15-106

Morehouse School of Medicine Program
Morehouse School of Medicine
Grady Memorial Hospital
Program Director:
James W. Reed, MD
Dept of Medicine
Morehouse School of Medicine
720 Westview Dr SW
Atlanta, GA 30310-1465
404 756-1250
Length: 3 Year(s) Total Positions: 36 (GYI: 14)
Program ID: 140-12-21-602

Augusta
Medical College of Georgia Program
Medical College of Georgia Hospital and Clinics
University Hospital
Veterans Affairs Medical Center (Augusta)
Program Director:
Daniel W. Bahn, MD
Medical College of Georgia
Dept of Medicine RW-540
Augusta, GA 30912
706 721-2423
Length: 3 Year(s) Total Positions: 25 (GYI: 26)
Subspecialties: BHE
Program ID: 140-12-21-107

Fort Gordon
Dwight David Eisenhower Army Medical Center Program
Dwight David Eisenhower Army Medical Center
Program Director:
Walter J. Moore, MD
Dwight David Eisenhower Army Med Ctr
Dept of Med
Fort Gordon, GA 30905-5650
706 791-5124
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 140-12-23-488

Macon
Mercer University School of Medicine Program
Medical Center of Central Georgia
Program Director:
Stephen B Miller, MD
Medical Center of Central Georgia
724 Hemlock Street
Macon, GA 31208
912 602-1822
Length: 3 Year(s) Total Positions: 19 (GYI: 6)
Program ID: 140-12-21-991

Savannah
Memorial Medical Center Program
Memorial Medical Center
Program Director:
Robert J. DiBonaventura, MD
Jaron T. Waller, MD
Memorial Medical Center Inc
PO Box 2998
Savannah, GA 31403-3089
912 335-8854
Length: 3 Year(s) Total Positions: 19 (GYI: 11)
Program ID: 140-12-12-108

Hawaii
Honolulu
University of Hawaii Program
University of Hawaii John A Burns School of Medicine
Kaiser Foundation Hospital (Moanalua)
Kaiser Medical Center
Queen's Medical Center
St Francis Medical Center
Program Director:
Max G. Botticelli, MD
University of Hawaii Integrated Medical Residency Program
1305 Lualualei St
7th Fl
Honolulu, HI 96815
808 586-2910
Length: 3 Year(s) Total Positions: 42 (GYI: 18)
Subspecialties: HMO
Program ID: 140-14-21-109

Tripler AMC
Tripler Army Medical Center Program
Tripler Army Medical Center
Program Director:
Dale S. Vincent, MD
Dept of Medicine
Tripler Army Medical Center
Honolulu, HI 96859-5000
808 432-5700
Length: 3 Year(s) Total Positions: 30 (GYI: 10)
Program ID: 140-14-11-607

* Updated information not provided.
Illinois

Chicago

Columbus Hospital Program
Columbus Hospital
Program Director: John P Quinn, MD
Columbus Hospital
2653 N Lakeview Ave
Chicago, IL 60614
312-883-6784
Length: 3 Year(s) Total Positions: 24 (GY: 8) Program ID: 146-16-21-601

Cook County Hospital Program*
Cook County Hospital
Program Director: Maurice Lemon, MD
Cook County Hospital
1825 W Harrison St
Chicago, IL 60612
312-633-6700
Length: 3 Year(s) Total Positions: 142 (GY: 68) Subspecialties: CD,END,GE,HEM,ON,PCC Program ID: 146-16-12-113

Edgewater Medical Center Program
Edgewater Medical Center
Program Director: Claude Zanetti, MD
Edgewater Medical Center
5700 N Ashland Ave
Chicago, IL 60660-4026
312-877-8600
Length: 3 Year(s) Total Positions: 38 (GY: 12) Program ID: 146-16-12-435

Illinois Masonic Medical Center Program
Illinois Masonic Medical Center
Program Director: Catherine Kalil, MD
Dept of Internal Medicine
Illinois Masonic Medical Center
836 Wellington Ave
Chicago, IL 60657-5193
312-266-7245
Length: 3 Year(s) Total Positions: 61 (GY: 23) Subspecialties: CD Program ID: 146-16-11-114

McGaw Medical Center of Northwestern University (Evanston) Program
Northwestern University Medical School
Evanston Hospital
Program Director: E Stephen Kurtides, MD
Evanston Hospital
2650 Ridge Ave
Evanston, IL 60201-7811
708-570-2510
Length: 3 Year(s) Total Positions: 62 (GY: 27) Program ID: 146-16-31-125

McGaw Medical Center of Northwestern University Program
Northwestern University Medical School
Columbus Hospital
Northwestern Memorial Hospital
Veterans Affairs Lakeside Medical Center (Chicago)
Program Director: Warren H Wallace, MD
Northwestern Univ Med Schl
Dept of Med
250 E Superior St 296
Chicago, IL 60611
312-906-2352
Length: 3 Year(s) Total Positions: 128 (GY: 56) Subspecialties: CD,END,GE,HEM,IM,NEF,ON,PCC,RHU Program ID: 146-16-31-119

* Updated information not provided.

Mercy Hospital and Medical Center Program*
Mercy Hospital and Medical Center
Program Director: Howard B Swersey, MD
Mercy Hospital and Medical Center
1175 N Clark St
Medical Education-Room 3-701
Chicago, IL 60610
312-567-1053
Length: 3 Year(s) Total Positions: 45 (GY: 15) Program ID: 146-16-11-110

Ravenswood Hospital Medical Center Program
Ravenswood Hospital Medical Center
Program Director: Richard A Bloom, MD
Internal Medicine Residency Program
600 N Winchester
Chicago, IL 60654
312-878-4090
Length: 3 Year(s) Total Positions: 29 (GY: 12) Program ID: 146-16-11-120

Rush Medical College/Westlake Community Hospital Program
Rush-Presbyterian St Luke's Medical Center
Westlake Community Hospital
Program Director: John E Martin, MD
Westlake Community Hospital Int Medicine Residency Program
1225 W Lake St
Melrose Park, IL 60160
708-681-3089
Length: 3 Year(s) Total Positions: 48 (GY: 15) Program ID: 146-16-11-114

Rush-Presbyterian-St Luke's Medical Center Program*
Rush-Presbyterian-St Luke's Medical Center
Program Director: Alan A Harris, MD
Rush-Presbyterian-St Luke's Medical Center
1625 W Congress Pl
Chicago, IL 60612-3801
312-924-3062
Length: 3 Year(s) Total Positions: 122 (GY: 56) Subspecialties: CD,END,GE,HEM,IM,NEF,ON,PCC,RHU Program ID: 146-16-11-121

St Joseph Hospital and Health Care Center Program
St Joseph Health Care Centers and Hospital
Program Director: Sanfillo Garella, MD
St Joseph Hospital
2800 N Lake Shore Dr
Chicago, IL 60657
312-660-3303
Length: 3 Year(s) Total Positions: 48 (GY: 26) Program ID: 146-16-11-122

University of Chicago (Weiss Memorial) Program
Louis A Weiss Memorial Hospital
Program Director: Daniel Berland, MD
Louis A Weiss Memorial Hospital Medical Education
4646 N Marine Dr
Chicago, IL 60640-5996
312-878-8700
Length: 3 Year(s) Total Positions: 28 (GY: 12) Program ID: 146-16-11-115

University of Chicago Program
University of Chicago Hospitals
Program Director: Holly J Humphrey, MD
University of Chicago Medical Center
5841 S Maryland Ave
MC7982
Chicago, IL 60637-1470
312-722-1455
Length: 3 Year(s) Total Positions: 75 (GY: 28) Subspecialties: CD,END,HEM,IM,NEF,ON,PCC,RHU Program ID: 146-16-11-123

University of Illinois College of Medicine at Chicago Program
University of Illinois College of Medicine at Chicago
University of Illinois Hospital and Clinics
Veterans Affairs Westside Medical Center (Chicago)
Program Director: James F Whalen, MD
University of Illinois Hospital
840 S Wood St MC 787
Chicago, IL 60616-7823
312-566-7704
Length: 3 Year(s) Total Positions: 94 (GY: 32) Subspecialties: CD,END,HEM,IM,NEF,PCC,RHU Program ID: 146-16-21-124

University of Illinois College of Medicine at Chicago/Christ Hospital Program
University of Illinois College of Medicine at Chicago
EHS Christ Hospital and Medical Center
Program Director: Stanley A Blumenthal, MD
Christ Hospital
4440 W 85th St
Ste 214 S
Oak Lawn, IL 60453-4213
708-345-5673
Length: 3 Year(s) Total Positions: 24 (GY: 24) Subspecialties: CD Program ID: 146-16-21-129

University of Illinois College of Medicine at Chicago/Michael Reese Hospital Program
University of Illinois College of Medicine at Chicago
Michael Reese Hospital and Medical Center
Program Director: William H Chamberlin, MD
Michael Reese Hospital and Med Ctr
Dept of Medicine
2029 S Ellis
Chicago, IL 60616-3390
312-701-5170
Length: 3 Year(s) Total Positions: 66 (GY: 23) Subspecialties: CD,END,HEM,IM,NEF,PCC,RHU Program ID: 146-16-11-117

Evanston

St Francis Hospital of Evanston Program*
St Francis Hospital of Evanston
Program Director: Fred A Zac, MD
St Francis Hospital of Evanston
365 Ridge Ave
Evanston, IL 60202-3999
708-492-2237
Length: 3 Year(s) Total Positions: 66 (GY: 23) Subspecialties: CD,HID,ON Program ID: 146-16-11-128
Accredited Programs in Internal Medicine

Maywood
Loyola University Program
Foster G McGaw Hospital-Loyola University of Chicago
Edward J Hines Jr Veterans Affairs Hospital
MacNeal Memorial Hospital
Program Director:
Elizabeth Perry, MD
Dept of Medicine Rm 7611A
2160 S First Ave
Maywood, IL 60153
708-218-5050
Length: 3 Year(s) Total Positions: 85 (GYI: 30)
Subspecialties: CD,END,GE,HEM,ID,IM,NEP,ON,PCI,PIH
Program ID: 140-15-21-129

North Chicago
Finch University of Health Sciences/Chicago Medical School Program
Finch University of Health Sciences/Chicago Medical School
Mount Sinai Hospital Medical Center of Chicago
Veterans Affairs Medical Center (North Chicago)
Program Director:
Eric P Gail, MD
Univ of Nth Sc THE Chicago Med Schl
Dept of Medicine
333 Green Bay Rd
North Chicago, IL 60064-5005
708-576-5200
Length: 3 Year(s) Total Positions: 74 (GYI: 35)
Subspecialties: CCM,CD,END,GE,HJ,ID,IM,NEP,PIH
Program ID: 140-16-21-111

Peoria
University of Illinois College of Medicine at Peoria Program
University of Illinois College of Medicine at Peoria
St Francis Medical Center
Program Director:
Dennis Czukowski, MD
St Francis Medical Center
530 NE Glen Oak
Peoria, IL 61607
309-655-2700
Length: 3 Year(s) Total Positions: 37 (GYI: 17)
Program ID: 140-16-31-131

Springfield
Southern Illinois University Program
Southern Illinois University School of Medicine
Memorial Medical Center
St John’s Hospital
Program Director:
David E Steiger, MD
Southern Illinois University School of Medicine
PO Box 10550
Springfield, IL 62704-9300
217-780-0160
Length: 3 Year(s) Total Positions: 46 (GYI: 18)
Subspecialties: END,GE,HJ,ID,IM,NEP,PIH
Program ID: 140-16-21-232

Urbana
University of Illinois College of Medicine at Urbana Program
University of Illinois College of Medicine at Urbana
Carle Foundation Hospital
Covenant Medical Center
Veterans Affairs Medical Center (Danville)
Program Director:
Robert N Kirby, MD
Timothy Deppe, MD
University of Illinois
Dept of Internal Medicine
611 W Park St
Urbana, IL 61801
217-383-3110
Length: 3 Year(s) Total Positions: 43 (GYI: 16)
Program ID: 140-16-21-456

Oak Park
West Suburban Hospital Medical Center Program
West Suburban Hospital Medical Center
Program Director:
Mar L Harris, MD
West Suburban Hospital Medical Center
1M Residency Suite L-600
Oak Park, IL 60302
708-383-5000
Length: 3 Year(s) Total Positions: 22 (GYI: 6)
Program ID: 140-16-21-467

Park Ridge
University of Chicago (Park Ridge) Program
Lutheran General Hospital
Program Director:
William J Arnold, MD
Lutheran General Hospital
1775 Dempster St
Park Ridge, IL 60068-1174
708-696-5000
Length: 3 Year(s) Total Positions: 80 (GYI: 29)
Subspecialties: CD,GE
Program ID: 140-16-21-130

Indiana
Indianapolis
Indiana University Medical Center Program
Indiana University Medical Center
Richard L Roudebush Veterans Affairs Medical Center
William N Wabard Memorial Hospital
Program Director:
Richard B Kohler, MD
Indiana University Medical Center
545 Barnhill Dr
Emerson Hall 317
Indianapolis, IN 46222-5124
317-274-7783
Length: 3 Year(s) Total Positions: 107 (GYI: 37)
Subspecialties: CD,END,GE,HJ,ID,IM,NEP,PCI,PIH
Program ID: 140-17-21-183

Methodist Hospital of Indiana Program
Methodist Hospital of Indiana
Program Director:
Richard W Campbell, MD
Methodist Hospital of Indiana
1-65 At 21st St
P O Box 1867
Indianapolis, IN 46206-1367
317-954-8656
Length: 3 Year(s) Total Positions: 21 (GYI: 7)
Subspecialties: CD,NEP,PIH
Program ID: 140-17-11-134

St Vincent Hospital and Health Care Center Program
St Vincent Hospital and Health Care Center
Program Director:
Robert D Robinson, MD
St Vincent Hospital and Health Services
2601 W 86th St PO Box 40509
Indianapolis, IN 46260
317-338-2722
Length: 3 Year(s) Total Positions: 46 (GYI: 23)
Program ID: 140-17-11-135

Muncie
Ball Memorial Hospital Program
Ball Memorial Hospital
Program Director:
William B Fisher, MD
Daryl Morrical, MD
Ball Memorial Hospital
2401 University Ave
Muncie, IN 47303
317-774-4550
Length: 3 Year(s) Total Positions: 16 (GYI: 5)
Program ID: 140-17-11-136

Iowa
Des Moines
University of Iowa (Des Moines) Program
Iowa Methodist Medical Center
Veterans Affairs Medical Center (Des Moines)
Program Director:
Nathan Josephson, MD
Iowa Methodist Medical Center
1200 Pleasant St
Des Moines, IA 50309
515-241-5066
Length: 3 Year(s) Total Positions: 28 (GYI: 10)
Program ID: 140-18-31-137

Iowa City
University of Iowa Hospitals and Clinics Program
University of Iowa Hospitals and Clinics
Veterans Affairs Medical Center (Iowa City)
Program Director:
Francisco M Abbas, MD
University of Iowa Hospitals and Clinic
Dept of Internal Medicine
Iowa City, IA 52242-1099
319-356-2745
Length: 3 Year(s) Total Positions: 108 (GYI: 41)
Subspecialties: CD,END,GE,HJ,ID,NEP,PCI,PIH
Program ID: 140-18-31-138

* Updated information not provided.
Kansas
Kansas City
University of Kansas Medical Center
Program
University of Kansas School of Medicine
Bethany Medical Center
Stemont-Val Regional Medical Center
University of Kansas Medical Center
Veterans Affairs Medical Center (Kansas City)
Program Director:
Norton J Greenberger, MD
University of Kansas Medical Center
Dept of Medicine
3001 Rainbow Blvd
Kansas City, KS 66160-7360
913 588-9691
Length: 3 Year(s) Total Positions: 98 (GY: 32)
Subspecialties:
CD,END,GE,HM,ID,IM,NEP,ON,PCC,PUH
Program ID: 140-19-21-130

Wichita
University of Kansas (Wichita) Program
University of Kansas School of Medicine (Wichita)
St Francis Regional Medical Center
Veterans Affairs Medical Center (Wichita)
Wesley Medical Center
Program Director:
Garrett O Minn, MD
Dept of Internal Medicine
1010 N Kansas
Wichita, KS 67214
316 263-2660
Length: 3 Year(s) Total Positions: 37 (GY: 17)
Program ID: 140-19-21-140

Kentucky
Lexington
University of Kentucky Medical Center
Program
University Hospital-Albert B Chandler Medical Center
Veterans Affairs Medical Center (Lexington)
Program Director:
Robert W Lightfoot, MD
Univ of Kentucky College of Medicine
Dept of Education
J111 Kentucky Clinic Bldg
Lexington, KY 40584-2924
606 323-1203
Length: 3 Year(s) Total Positions: 64 (GY: 24)
Subspecialties:
CD,END,GE,HM,ID,IM,NEP,ON,PCC,PUH
Program ID: 140-20-32-141

Louisville
University of Louisville Program
University of Louisville School of Medicine
University of Louisville Hospital
Veterans Affairs Medical Center (Louisville)
Program Director:
Richard N Rediger, MD
Dept of Medicine
Univ of Louisville
Louisville, KY 40292
502 852-7632
Length: 3 Year(s) Total Positions: 74 (GY: 34)
Subspecialties:
CD,END,GE,HM,ID,IM,NEP,PUD,PUH
Program ID: 140-20-9-1-142

Louisiana
Baton Rouge
Louisiana State University (Baton Rouge) Program
Earl K Long Medical Center
Program Director:
George H Karasen, MD
Earl K Long Med Ctr
Dept of Medicine
5925 Airline Hwy
Baton Rouge, LA 70805-2486
504 358-1066
Length: 3 Year(s) Total Positions: 26 (GY: 12)
Program ID: 140-21-31-507

Lafayette
Louisiana State University (Lafayette) Program
University Medical Center (Lafayette)
Program Director:
Loela Lakhamia Prasad, MD
University Medical Center
2300 W Congress St
PO Box 4016-C
Lafayette, LA 70506-4016
318 263-6768
Length: 3 Year(s) Total Positions: 21 (GY: 11)
Program ID: 140-21-11-144

New Orleans
Alton Ochsner Medical Foundation Program
Alton Ochsner Medical Foundation
Leonard J Chabert Medical Center
Program Director:
Donald T Erwin, MD
Alton Ochsner Medical Foundation
Dept of Graduate Med Education
1516 Jefferson Hwy
New Orleans, LA 70121
504 842-4066
Length: 3 Year(s) Total Positions: 48 (GY: 24)
Subspecialties:
CD,END,GE,HM,ID,IM,NEP,PUD,PUH
Program ID: 140-21-32-146

Louisiana State University Program
Louisiana State University School of Medicine
Medical Center of Louisiana at New Orleans LSU Division
Medical Center of Louisiana University Hospital Campus
Program Director:
Charles W Hilton, MD
LSU Med Ctr Dept of Med
1542 Tulane Ave
New Orleans, LA 70112-2822
504 588-6600
Length: 3 Year(s) Total Positions: 36 (GY: 16)
Subspecialties:
CD,END,GE,HM,ID,IM,NEP,ON,PCC,PUH
Program ID: 140-21-31-143

Tulane University Program
Tulane University School of Medicine
Medical Center of Louisiana at New Orleans-Tulane Division
Tulane University Hospital and Clinics
Veterans Affairs Medical Center-Tulane Service (New Orleans)
Program Director:
William C Seifert, MD
Tulane University Medical School
Department of Medicine SL-50
1430 Tulane Ave
New Orleans, LA 70112-2990
504 862-7811
Length: 3 Year(s) Total Positions: 76 (GY: 41)
Subspecialties:
CD,END,GE,HM,ID,IM,NEP,PUD
Program ID: 140-21-21-147

Shreveport
Louisiana State University (Shreveport) Program
Louisiana State University Medical Center-Shreveport
Overtot Brooks Veterans Affairs Medical Center
Program Director:
Glenn Mills, MD
Louisiana State University Medical Center Hospital
Medical Education - Internal Med
1501 Kings Hwy PO Box 33092
Shreveport, LA 71130-3092
318 476-5070
Length: 3 Year(s) Total Positions: 68 (GY: 23)
Subspecialties:
CD,END,GE,HM,ID,IM,NEP,PCC,PUH
Program ID: 140-21-21-148

Maine
Portland
Maine Medical Center Program
Maine Medical Center
Program Director:
John Tucker, MD
Maine Medical Center
22 Bramhall St
Portland, ME 04102
207 871-3561
Length: 3 Year(s) Total Positions: 40 (GY: 18)
Subspecialties:
CD,END,GE,HM,ID,NEP
Program ID: 140-22-13-149

Maryland
Baltimore
Franklin Square Hospital Center Program
Franklin Square Hospital Center
Program Director:
Daniel C Hardesty, MD
Franklin Square Hospital Center
Dept of Medicine
9000 Franklin Sq Dr
Baltimore, MD 21227-3996
900 693-8150
Length: 3 Year(s) Total Positions: 34 (GY: 14)
Program ID: 140-23-12-151

* Updated information not provided.
Good Samaritan Hospital of Maryland Program
Good Samaritan Hospital of Maryland
Johns Hopkins Hospital
Program Director:
John F. Rogers, MD
Good Samaritan Hospital
Morgan 504
5601 Loch Raven Blvd
Baltimore, MD 21239-2995
410 262-4850
Length: 3 Year(s) Total Positions: 31 (FY: 10)
Program ID: 140-23-21-689

Greater Baltimore Medical Center Program*
Greater Baltimore Medical Center
Program Director:
Thomas F. Landale III, MD
Greater Baltimore Med Ctr
Dept of Medicine
6701 N Charles St
Baltimore, MD 21215
301 491-2043
Length: 3 Year(s) Total Positions: 29 (FY: 15)
Program ID: 140-23-31-152

Harbor Hospital Center Program
Harbor Hospital Center
Program Director:
Richard D. Williams, MD
Harbor Hospital Center
3064 S Hanover St
Baltimore, MD 21225-1299
301 347-3655
Length: 3 Year(s) Total Positions: 36 (FY: 13)
Subspecialties: UCM
Program ID: 140-23-31-185

Johns Hopkins University Bayview Medical Center Program
Johns Hopkins University School of Medicine
Johns Hopkins Bayview Medical Center
Program Director:
Philip D. Zieve, MD
Johns Hopkins Bayview Medical Center
4040 Eastern Ave
Baltimore, MD 21224
410 606-6616
Length: 3 Year(s) Total Positions: 38 (FY: 15)
Subspecialties: GEN, NEP
Program ID: 140-23-11-150

Johns Hopkins University Program
Johns Hopkins University School of Medicine
Johns Hopkins Hospital
Program Director:
Bart Chernow, MD
Johns Hopkins Hospital
Dept of Medicine
1850 E Monument St
Baltimore, MD 21205
410 565-7190
Length: 3 Year(s) Total Positions: 101 (FY: 35)
Subspecialties: CCM/CD/END/GE/HEM/ID/JM/NEP/ON/PC/PCC/RHU
Program ID: 140-23-11-153

Maryland General Hospital Program
Maryland General Hospital
Program Director:
William C. Anthony, MD
Maryland General Hospital
827 Linden Ave
Ste 9F Armony Bldg
Baltimore, MD 21201
410 225-7878
Length: 3 Year(s) Total Positions: 31 (FY: 15)
Program ID: 140-23-11-154

Sinai Hospital of Baltimore Program
Sinai Hospital of Baltimore
Program Director:
Barth Biren, MD
Sinai Hospital of Baltimore
Suite 66
2415 W Belvedere Ave
Baltimore, MD 21215-6217
410 578-6256
Length: 3 Year(s) Total Positions: 52 (FY: 25)
Program ID: 140-23-12-157

St Agnes Hospital of the City of Baltimore Program*
St Agnes Hospital of the City of Baltimore
Program Director:
Emile H Mohler Jr, MD
St Agnes Hospital of the City of Baltimore
1500 Canon Ave
Baltimore, MD 21229-2999
410 369-3100
Length: 3 Year(s) Total Positions: 34 (FY: 12)
Program ID: 140-23-12-166

Union Memorial Hospital Program
Union Memorial Hospital
Program Director:
Robert P. Brown Jr, MD
Union Memorial Hospital
201 E University Pkwy
Baltimore, MD 21218-2920
410 554-2054
Length: 3 Year(s) Total Positions: 30 (FY: 12)
Program ID: 140-23-12-199

University of Maryland Program
University of Maryland System
Mercy Medical Center
Veterans Affairs Medical Center (Baltimore)
Program Director:
Susan D. Windish, MD
University of Maryland Hospital
22 S Greene St
Baltimore, MD 21201-1595
410 288-2608
Length: 3 Year(s) Total Positions: 97 (FY: 39)
Subspecialties: CCM/CD/END/GE/HEM/ID/JM/NEP/ON/PCC/RHU
Program ID: 140-23-21-160

Bethesda Program
National Naval Medical Center (Bethesda) Program*
Program Director:
John P. Rusiecki, MD
National Naval Medical Center
Dept of Int Med
8901 Wisconsin Ave
Bethesda, MD 20892-5000
301 265-0939
Length: 3 Year(s) Total Positions: 37 (FY: 11)
Subspecialties: CCM/CD/END/GE/HEM/ID/JM/NEP/ON/PCC/RHU
Program ID: 140-23-11-019

Cheverly Program
Prince George's Hospital Center
Program Director:
Samuel Needleman, MD
Prince George's General Hospital
Dept of Medicine
3001 Hospital Dr
Cheverly, MD 20785
301 516-3728
Length: 3 Year(s) Total Positions: 38 (FY: 14)
Program ID: 140-23-21-161

Boston Program
Beth Israel Hospital Program
Program Director:
Anthony R. Rokop, MD
Beth Israel Hospital
0 Brookline Ave
Boston, MA 02215
617 730-2266
Length: 3 Year(s) Total Positions: 108 (FY: 43)
Subspecialties: CD/END/GE/HEM/ID/JM/NEP
Program ID: 140-24-21-152

Boston University Program
Boston University School of Medicine
Boston City Hospital
Boston University Medical Center-University Hospital
Veterans Affairs Medical Center (Boston)
Program Director:
Norman G. Lenkinsky, MD
Boston Univ School of Medicine
50 E Concord St
Boston, MA 02118-2303
617 554-1200
Length: 3 Year(s) Total Positions: 137 (FY: 51)
Subspecialties: CCM, RO, IM
Program ID: 140-24-31-164

Brigham and Women's Hospital Program*
Brigham and Women's Hospital
Brockton-West Roxbury Veterans Affairs Medical Center
Program Director:
Mark G. A. Wolf, MD
Brigham and Women's Hospital
75 Francis St
Boston, MA 02115
617 732-6390
Length: 3 Year(s) Total Positions: 109 (FY: 45)
Subspecialties: CCM/CD/END/GE/HEM/ID/JM/NEP/ON/PCC/RHU
Program ID: 140-24-21-172

Carney Hospital Program
Carney Hospital
Program Director:
Richard A. Gleckman, MD
Carney Hospital
2100 Dorchester Ave
Boston, MA 02124-5466
617 286-4600
Length: 3 Year(s) Total Positions: 53 (FY: 25)
Program ID: 140-24-31-166

Massachusetts

* Updated information not provided.
Massachusetts General Hospital Program*
Massachusetts General Hospital
Program Director: Debra F. Weinstein, MD
Massachusetts General Hospital Medical Services
149 Fruit St.
Boston, MA 02114
617 726-2362
Length: 3 Year(s) Total Positions: 96 (GYT: 44)
Subspecialties: CV, IM, ENDO, GE, HEM, ID, NERIO, PUD, RHU
Program ID: 140-24-11-169

New England Deaconess Hospital Program
New England Deaconess Hospital
Program Director: Robert C. Reitlinger Jr., MD
Deaconess Hospital
Department of Medicine LM006A
One Deaconess Rd
Boston, MA 02215
617 632-5SNS
Length: 3 Year(s) Total Positions: 74 (GYT: 39)
Subspecialties: CV, ENDO, GE, HEM, ID, NEP, PUD
Program ID: 140-24-21-170

New England Medical Center Hospitals Program
New England Medical Center Hospitals Faulkner Hospital
Program Director: Richard I. Kopelman, MD
New England Medical Center
750 Washington St.
Box 82
Boston, MA 02111
617 956-5246
Length: 3 Year(s) Total Positions: 78 (GYT: 36)
Subspecialties: CV, ENDO, GE, HEM, ID, NEP, PUD, RHU
Program ID: 140-24-21-171

St Elizabeth's Medical Center of Boston Program*
St Elizabeth's Medical Center of Boston
Program Director: Kenneth F. MacDonnell, MD
St Elizabeth's Hospital of Boston
736 Cambridge St.
Boston, MA 02135
6S7 768-2S9
Length: 3 Year(s) Total Positions: 54 (GYT: 34)
Subspecialties: CV, ENDO, GE, HEM, ON, POC
Program ID: 140-24-21-173

Burlington
Lahey Clinic Program*
Lahey Clinic
Program Director: Gary T. Napolitano, MD
41 Mall Rd
Dept of Medicine
Burlington, MA 01805
617 737-8687
Length: 3 Year(s) Total Positions: 38 (GYT: 14)
Program ID: 140-24-21-111

Cambridge
Cambridge Hospital Program
Cambridge Hospital
Program Director: Richard J. Pells, MD
Cambridge Hospital
Dept of Medicine
1495 Cambridge St.
Cambridge, MA 02139
617 398-1011
Length: 3 Year(s) Total Positions: 52 (GYT: 20)
Subspecialties: CV, ENDO, RHU
Program ID: 140-24-11-175

Mount Auburn Hospital Program
Mount Auburn Hospital
Program Director: Charles J. Hatem, MD
Mount Auburn Hospital
390 Mount Auburn St.
Cambridge, MA 02238
617 490-5349
Length: 3 Year(s) Total Positions: 43 (GYT: 23)
Program ID: 140-24-11-176

Framingham
MetroWest Medical Center Program
MetroWest Medical Center
Program Director: Thomas L. Treadwell, MD
MetroWest Medical Center
115 Lincoln St
Framingham, MA 01701
508 880-1572
Length: 3 Year(s) Total Positions: 25 (GYT: 13)
Program ID: 140-24-11-177

Newton Lower Falls
Newton-Wellesley Hospital Program
Newton-Wellesley Hospital
Program Director: Henry M. Yager, MD
Newton-Wellesley Hospital
3814 Washington St.
Newton Lower Falls, MA 02162
617 24S-6567
Length: 3 Year(s) Total Positions: 20 (GYT: 13)
Program ID: 140-24-11-178

Pittsfield
Berkshire Medical Center Program
Berkshire Medical Center
Program Director: Jack D. McCue, MD
Berkshire Medical Center
725 North St.
Pittsfield, MA 01201
413 447-2989
Length: 3 Year(s) Total Positions: 58 (GYT: 27)
Subspecialties: CV, ENDO, GE, HEM, ID, NEP, PUD, RHU
Program ID: 140-24-21-174

Springfield
Baystate Medical Center Program
Baystate Medical Center
Program Director: Robert D. Piclons, MD
Baystate Medical Center
Dept of Internal Medicine
70 Chestnut St.
Springfield, MA 01199
413 794-5249
Length: 3 Year(s) Total Positions: 53 (GYT: 20)
Subspecialties: CV, ENDO, RHU
Program ID: 140-24-11-181

Worcester
Medical Center of Central Massachusetts Program
Medical Center of Central Massachusetts
Program Director: Annmarie Giraldo, MD
The Medical Center of Central Massachusetts Memorial
119 Belmont St.
Worcester, MA 01605-2982
636 790-5498
Length: 3 Year(s) Total Positions: 59 (GYT: 20)
Program ID: 140-24-31-182

St Vincent Hospital Program
St Vincent Hospital
Program Director: Gilbert F. Levine, MD
Dept of Medicine
St Vincent Hospital
25 Winthrop St.
Worcester, MA 01604-4503
636 799-4178
Length: 3 Year(s) Total Positions: 50 (GYT: 16)
Subspecialties: CV
Program ID: 140-24-11-183

University of Massachusetts Medical Center Program*
University of Massachusetts Medical Center
Program Director: David M. Clune, MD
Univ of Massachusetts Medical Center
55 Lake Ave N
Worcester, MA 01655
508 856-2173
Length: 3 Year(s) Total Positions: 79 (GYT: 27)
Subspecialties: CV, ENDO, GE, HEM, ID, NEP, PUD, RHU
Program ID: 140-24-21-184

Michigan
Ann Arbor
St Joseph Mercy Hospital Program
St Joseph Mercy Hospital (Catherine McAuley Health System)
Program Director: David B. Schmees, MD
CMH/SSJ Mercy Center
Dept of Internal Medicine
PO Box 905
Ann Arbor, MI 48106
313 761-2227
Length: 3 Year(s) Total Positions: 50 (GYT: 22)
Program ID: 140-25-12-186

* Updated information not provided.
<table>
<thead>
<tr>
<th>Program Name</th>
<th>University or Medical Center</th>
<th>Program Director</th>
<th>Program Address</th>
<th>Program City</th>
<th>Program State</th>
<th>Program Zip</th>
<th>Subspecialties</th>
<th>Program Length</th>
<th>Total Positions</th>
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<tr>
<td>Accredited Programs in Internal Medicine</td>
<td>University of Michigan Program</td>
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<td>University of Michigan Hospitals</td>
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<td></td>
<td>Veterans Affairs Medical Center (Ann Arbor)</td>
<td>Joseph C. Kolans, MD</td>
<td>Univ of Michigan Hospitals</td>
<td>Internal Med 3110 TC Box 0688</td>
<td>J509 E Medical Center Dr</td>
<td>Ann Arbor, MI 48108-0688</td>
<td>313 936-4885</td>
<td>3 Year(s)</td>
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| Dearborn                                         | Wayne State University/Detroit Medical Center Program | Wayne State University of Medicine | Detroit Receiving Hospital and University Health Center | Harper Hospital | Veterans Affairs Medical Center (Allen Park) | Jack B. Haight, MD | Wayne State University/Detroit Medical School | 4201 St. Antoine S-D | Detroit, MI 48201 | 313 746-4669 | 3 Year(s) | 111 (GY: 38) | 140-25-21-194 |

| Detroit                                          | Wayne State University/Grace Hospital Program | Wayne State University School of Medicine | Detroit Receiving Hospital and University Health Center | Grace Hospital | Mohamed Siddique, MD | Wayne State University/Grace Hospital | 6071 W Outer Dr | Detroit, MI 48235 | 313 966-9790 | 3 Year(s) | 36 (GY: 12) | 140-25-21-546 |

| East Lansing                                     | Michigan State University Program       | Michigan State University College of Human Medicine | Michigan Capital Medical Center | Michigan State University Clinical Center | Sparrow Hospital | St Lawrence Hospital and HealthCare Services | Patrick C. Algie, MD | K301 Clinical Center | Michigan State University | East Lansing, MI 4804-1315 | 313 553-5100 | 3 Year(s) | 28 (GY: 10) | 140-25-21-195 |

| Flint                                            | Hurley Medical Center/Michigan State University Program | Hurley Medical Center | Barbara A. Mckintosh, MD | Hurley Medical Center | One Hurley Plaza | Flint, MI 48233-5963 | 313 977-5982 | 3 Year(s) | 30 (GY: 10) | 140-25-31-196 |

| Kalamazoo                                        | McLaren Regional Medical Center/Michigan State University Program | McLaren Regional Medical Center | Susan J. Smith, MD | McLaren Regional Medical Center/Michigan State University Residency Program in Internal Medicine | 401 S Balenger Hwy | Flint, MI 48233-5963 | 810 475-2093 | 3 Year(s) | 32 (GY: 12) | 140-25-21-471 |

| Grand Rapids                                    | Bliedgett Memorial Medical Center/St Mary's Health Services Program | Bliedgett Memorial Medical Center | St Mary's Health Services | Program Director: David D. Bringman, MD | Bliedgett Memorial Medical Center | St Mary's Health Services | 1840 Wealthy St | Grand Rapids, MI 49050 | 616 774-7730 | 3 Year(s) | 26 (GY: 9) | 140-25-21-197 |

| Grosse Pointe                                    | Butterworth Hospital/Michigan State University Program | Butterworth Hospital | Program Director: Iris P. Boebecker, MD | Internal Medicine Residency | 21 Michigan St NE | Ste 400 | Grand Rapids, MI 49050 | 616 774-3775 | 3 Year(s) | 24 (GY: 8) | 140-25-21-198 |

| Pontiac                                          | St Joseph Mercy Hospital Program       | St Joseph Mercy Community Health Care System | Program Director: Frank S. Check, Jr, MD | St Joseph Mercy Hospital | 800 Woodward Ave | Pontiac, MI 48341-2886 | 313 858-3293 | 3 Year(s) | 46 (GY: 15) | 140-25-11-200 |

* Updated information not provided.
Royal Oak
William Beaumont Hospital Program
William Beaumont Hospital
Program Director:
Leslie L Rocher, MD
William Beaumont Hospital
3641 W 13 Mile Rd
Royal Oak, MI 48073-8769
810 551-0404
Length: 3 Year(s) Total Positions: 61 (GY: 18)
Subspecialties: CD,GE,HMO,JD,ON
Program ID: 140-25-1294

Saginaw
Saginaw Cooperative Hospitals Program
Saginaw Cooperative Hospitals Inc
Saginaw General Hospital
St Luke's Hospital
St Mary's Medical Center
Program Director:
Phillip W Lambert, MD
Saginaw Cooperative Hospitals
1005 Houghton St Ste 1000
Saginaw, MI 48602
989 771-6866
Length: 3 Year(s) Total Positions: 18 (GY: 6)
Program ID: 140-25-31-002

Southfield
Providence Hospital Program
Providence Hospital
Program Director:
Jeffrey M Zaks, MD
Providence Hospital
16001 W Nine Mile Rd
Dept of Med
Southfield, MI 48075
810 424-3161
Length: 3 Year(s) Total Positions: 29 (GY: 10)
Subspecialties: CD,GE,ON
Program ID: 140-25-11-203

Minneapolis
Minnesota
Abbott-Northwestern Hospital Program
Abbott-Northwestern Hospital
Program Director:
Terry K Rosborough, MD
Abbott-Northwestern Hospital
Medical Education Office (1135)
500 E 28th St
Minneapolis, MN 55407-3030
612 863-4223
Length: 3 Year(s) Total Positions: 30 (GY: 10)
Program ID: 140-25-31-204

Hennepin County Medical Center Program
Hennepin County Medical Center
Program Director:
Brian H Rask, MD
Hennepin County Medical Center
701 Park Ave
Minneapolis, MN 55415
612 847-8788
Length: 3 Year(s) Total Positions: 59 (GY: 18)
Subspecialties: CCM,NEP,RHU
Program ID: 140-25-31-207

University of Minnesota Program
University of Minnesota Medical School
St Paul-Ramsey Medical Center
University of Minnesota Hospital and Clinic
Veterans Affairs Medical Center (Minneapolis)
Program Director:
Connie Parent, MD
Univ of Minnesota Hosp & Clinics
Box 194 UMMHC/Dept of Medicine
516 Delaware St SE
Minneapolis, MN 55455
612 625-5531
Length: 3 Year(s) Total Positions: 112 (GY: 32)
Subspecialties: C,M,CD,END,GE,HMO,JD,IMG,NEP,PUD,RHU
Program ID: 140-26-21-205

Rochester
Mayo Graduate School of Medicine (Jacksonville) Program
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Jacksonville)
St Luke's Hospital Program
Program Director:
Joseph Kaplan, MD
Graduate Resident Education Center
Mayo Clinic Jacksonville
4500 San Pablo Rd
Jacksonville, FL 32224
904 296-3865
Length: 3 Year(s) Total Positions: 18 (GY: 6)
Program ID: 140-11-21-509

Mayo Graduate School of Medicine (Scottdale) Program
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Scottdale)
Scottdale Memorial Hospital-North
Program Director:
Philip J Lynge, MD
Mayo Clinic Scottsdale
Dept of Internal Med
13400 E Shea Blvd
Scottsdale, AZ 85259
602 991-6000
Length: 3 Year(s)
Program ID: 140-03-21-512

Mayo Graduate School of Medicine Program
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Rochester)
Rochester Methodist Hospital
St Mary's Hospital of Rochester
Program Director:
Henry J Schultz, MD
Sinbera 650 Internal Medicine
Mayo Clinic
Rochester, MN 55905
507 284-1477
Length: 3 Year(s) Total Positions: 187 (GY: 75)
Subspecialties: C,M,CD,END,GE,HMO,JD,IMG,NEP,PCC,RHU
Program ID: 140-26-21-208

Mississippi
Jackson
University of Mississippi Medical Center Program
University of Mississippi School of Medicine
University of Mississippi Hospital
Veterans Affairs Medical Center (Jackson)
Program Director:
Shirley Schlesinger, MD
University Hospital Dept of Medicine
2500 N State St
Jackson, MS 39216-6006
661 694-5590
Length: 3 Year(s) Total Positions: 52 (GY: 24)
Subspecialties: CD,GE,JD,NEP,ON,PUD
Program ID: 140-27-21-209

Keesler AFB
Keesler Medical Center Program
Keesler Medical Center
Program Director:
Stephen A Bredere, MD
81 MDG/SGOM
301 Fisher St Ste 401
Keesler AFB, MS 39544-2351
661 377-6076
Length: 3 Year(s) Total Positions: 32 (GY: 12)
Program ID: 140-27-12-001

Missouri
Columbia
University of Missouri-Columbia Program
University of Missouri-Columbia School of Medicine
Harry S Truman Memorial Veterans Hospital
University and Children's Hospital
Program Director:
William P Pattison, MD
Univ of Missouri Health Sciences Center
M A 409 Medical Science Bldg
Columbia, MO 65212
314 882-6186
Length: 3 Year(s) Total Positions: 58 (GY: 18)
Subspecialties: CD,END,GE,JD,IMG,NEP,ON,PCC,RHU
Program ID: 140-28-21-210

Kansas City
University of Missouri at Kansas City Program
University of Missouri-Kansas City School of Medicine
St Luke's Hospital
Truman Medical Center-West
Program Director:
George Reiser, MD
Univ of Missouri Kansas City School of Medicine
Internal Medicine Residency Program
2411 Holmes St
Kansas City, MO 64108
816 881-6212
Length: 3 Year(s) Total Positions: 48 (GY: 24)
Subspecialties: CD,END,GE,HMO,JD,NEP
Program ID: 140-28-31-214

* Updated information not provided.
### Accredited Programs in Internal Medicine

#### St Louis
**Barnes Hospital Group Program**
Barnes Hospital
Program Director:
- Daniel M Goodenberger, MD
- William E Chuter, MD
Barnes Hosp Dept of Internal Med
660 S Euclid Ave
Box 8121
St Louis, MO 63110
314 220-8465
Length: 3 Year(s)  Total Positions: 89  (GYI: 35)
Subspecialities: CD,END,GE,JD,NEP,RHU
Program ID: 140-28-21-215

**Deaconess Hospital Program**
Deaconess Hospital
Program Director:
- M R Hill, MD
Deaconess Hosp
6150 Oakland Ave
St Louis, MO 63139-3297
314 768-9868
Length: 3 Year(s)  Total Positions: 32  (GYI: 12)
Program ID: 140-28-11-216

**St John's Mercy Medical Center Program**
St John's Mercy Medical Center
Program Director:
- Patrick H Henry, MD
Dept of Internal Medicine
615 S New Ballas Rd
St Louis, MO 63141-8277
314 639-9859
Length: 3 Year(s)  Total Positions: 21  (GYI: 7)
Program ID: 140-28-31-217

**St Louis University Group of Hospitals Program**
St Louis University School of Medicine
St Louis University Hospital
Veterans Affairs Medical Center (St Louis)
Program Director:
- Coy D Plicht, MD
St Louis Univ Sch of Med
1402 S Grand Blvd
St Louis, MO 63104
314 577-2755
Length: 3 Year(s)  Total Positions: 65  (GYI: 25)
Subspecialities: CD,END,GE,JD,IM,NEP,PCC,RHU
Program ID: 140-28-51-218

**St Luke's Hospital Program**
St Luke's Hospital
St Louis Regional Medical Center
Program Director:
- Len R Robison, MD
St Luke's Hospital
222 S Woods Mill Rd Ste 700 N
St Louis, MO 63107
314 651-9050
Length: 3 Year(s)  Total Positions: 53  (GYI: 18)
Subspecialities: CD
Program ID: 140-28-21-219

**St Mary's Health Center Program**
St Mary's Health Center
Program Director:
- Mary Gardner, MD
St Mary's Health Center
6420 Clayton Rd
St Louis, MO 63117
314 758-8887
Length: 3 Year(s)  Total Positions: 18  (GYI: 12)
Program ID: 140-28-11-220

### Washington University Program
**Jewish Hospital of St Louis**
Program Director:
- Stephen S Luehr, MD
Jewish Hosp at Washington Univ Med Ctr
216 S Kingshighway Blvd
St Louis, MO 63110
314 454-7116
Length: 3 Year(s)  Total Positions: 41  (GYI: 30)
Subspecialities: CD,IM,NEP
Program ID: 140-28-21-221

### Nebraska
**Omaha**

**Creighton University Program**
Creighton University Health Foundation
AM 1 St Joseph Hospital at Creighton Univ Medical Ctr
Veterans Affairs Medical Center (Omaha)
Program Director:
- Walter J ODonnell, Jr, MD
Creighton University
601 N 30th St
Suite 5800
Omaha, NE 68131
402 289-4942
Length: 3 Year(s)  Total Positions: 71  (GYI: 24)
Subspecialities: CD,JD,PUD
Program ID: 140-30-21-222

**University of Nebraska Program**
University of Nebraska Medical Center
Veterans Affairs Medical Center (Omaha)
Program Director:
- James B O'Dell, MD
Univ of Nebraska Hosp and Clinic
Dept of Internal Medicine
600 S 42nd St
Omaha, NE 68108-2065
402 559-6488
Length: 3 Year(s)  Total Positions: 42  (GYI: 18)
Subspecialities: CD,END,GE,HO,IM,JD,PUD
Program ID: 140-30-21-224

### Nevada
**Reno**

**University of Nevada (Las Vegas) Program**
University of Nevada School of Medicine
Univ of Nevada Medical Center of Southern Nevada
Program Director:
- Stephen R Newmark, MD
Univ of Nevada Dept of Internal Medicine
2040 W Charleston Blvd
Ste 600
Las Vegas, NV 89102
702 288-2358
Length: 3 Year(s)  Total Positions: 42  (GYI: 18)
Subspecialities: CD,END,GE,JD,NEP,PCC,RHU
Program ID: 140-30-31-219

**University of Nevada (Reno) Program**
University of Nevada School of Medicine
Iowa & St Louis Veterans Affairs Medical Center
Reno Medical Center
Program Director:
- Jon P Schrage, MD
Veterans Admin Med Ctr
1000 Locust St
Reno, NV 89520
702 785-4002
Length: 3 Year(s)  Total Positions: 30  (GYI: 14)
Program ID: 140-30-31-243

### New Hampshire
**Lebanon**

**Dartmouth-Hitchcock Medical Center Program**
Dartmouth-Hitchcock Medical Center
Veterans Affairs Medical Center (White River Junction)
Program Director:
- Richard Coni, MD
Dartmouth-Hitchcock Medical Center
One Medical Center Dr
Lebanon, NH 03766
603 550-7004
Length: 3 Year(s)  Total Positions: 59  (GYI: 24)
Subspecialities: CD,END,GE,HO,JD,PC,X,RHU
Program ID: 140-30-21-225

### New Jersey
**Atlantic City**

**Atlantic City Medical Center Program**
Atlantic City Medical Center
Program Director:
- Paul M Kirschfeld, MD
Atlantic City Medical Center
1925 Pacific Ave
Atlantic City, NJ 08401
609 441-8074
Length: 3 Year(s)  Total Positions: 28  (GYI: 12)
Program ID: 140-30-31-226

**Camden**

**UMDNJ-Robert Wood Johnson Medical School (Camden) Program**
Cooper Hospital-University Medical Center
Program Director:
- Glenn C Newell, MD
Cooper Hospital-University Medical Center
Three Cooper Plaza Ste 230
Camden, NJ 08103
609 245-3853
Length: 3 Year(s)  Total Positions: 49  (GYI: 20)
Subspecialities: CD,END,GE,HO,JD,NEP,PCC,RHU
Program ID: 140-30-31-227

**Englewood**

**Englewood Hospital Program**
Englewood Hospital
Program Director:
- Robyn DiGeronimo, MD
Englewood Hospital & Medical Center
350 Engle St
Englewood, NJ 07631
201 894-3854
Length: 3 Year(s)  Total Positions: 39  (GYI: 13)
Subspecialities: CD,END,GE,HO,JD,NEP,PCC,RHU
Program ID: 140-30-31-228

**Livingston**

**St Barnabas Medical Center Program**
St Barnabas Medical Center
Program Director:
- Richard S Pausch, MD
St Barnabas Medical Center
Dept of Medicine
94 Old Short Hills Rd
Livingston, NJ 07039
973 308-5645
Length: 3 Year(s)  Total Positions: 33  (GYI: 12)
Subspecialities: CD,END,GE,HO,JD,NEP,PCC,RHU
Program ID: 140-30-31-247

*Updated information not provided.*
Accredited Programs in Internal Medicine

Long Branch
Monmouth Medical Center Program
Monmouth Medical Center
Program Director:
Bernard P. Shagam, MD
Anthony Ricca, MD
Monmouth Medical Center Dept of Medicine
300 Second Ave
Long Branch, NJ 07740
908 870-6177
Length: 3 Year(s)  Total Positions: 36  (GYI: 12)
Program ID: 149-33-11-238

Montclair
Mountainside Hospital Program
Mountainside Hospital
Program Director:
Alan E. Matlock, MD
Mountainside Hospital
Bay & Highland Ave
Montclair, NJ 07042
201 428-6195
Length: 3 Year(s)  Total Positions: 21  (GYI: 8)
Program ID: 149-33-11-584

Morristown
Morristown Memorial Hospital Program
Morristown Memorial Hospital
Program Director:
Alan Z Cutler, MD
Morristown Memorial Hospital
100 Madison Ave
PO Box 1956
Morristown, NJ 07962-1956
201 971-5135
Length: 3 Year(s)  Total Positions: 35  (GYI: 16)
Program ID: 149-33-11-236

Neptune
Jersey Shore Medical Center Program
Jersey Shore Medical Center
Program Director:
John A Crocco, MD
Jersey Shore Medical Center Dept of Medicine
1045 Rte 35
Neptune, NJ 07756
908 776-4420
Length: 2 Year(s)  Total Positions: 38  (GYI: 15)
Program ID: 149-33-12-238

Newark
UMDNJ-New Jersey Medical School (Paramus) Program
UMDNJ-New Jersey Medical School
Bergen Pines County Hospital
Program Director:
Mark D Matscher, DO
Bergen Pines County Hospital
5 Ridge Road
Paramus, NJ 07652
201 961-4279
Length: 3 Year(s)  Total Positions: 20  (GYI: 6)
Program ID: 149-33-11-241

UMDNJ-New Jersey Medical School Program
UMDNJ-New Jersey Medical School
Dept of Veterans Affairs Medical Center (East Orange)
Newark Beth Israel Medical Center
UMDNJ-University Hospital
Program Director:
George St Lordi, MD
UMDNJ-New Jersey Medical School
160 Bergen St
Lodi, NJ 07644
201 992-6656
Length: 3 Year(s)  Total Positions: 99  (GYI: 30)
Subspecialities:
CCM,CD,END,GE,XEM,IMG,NEPON,PCG,RHU
Program ID: 149-33-21-237

Plainfield
Muhlenberg Regional Medical Center Program
Muhlenberg Regional Medical Center
Program Director:
Francis L Griffin, MD
Muhlenberg Regional Medical Center
Park Ave & Randolph Rd
Plainfield, NJ 07061
908 668-2865
Length: 3 Year(s)  Total Positions: 31  (GYI: 12)
Program ID: 149-33-11-244

South Orange
Seton Hall University School of Graduate Medical Education (Jersey City) Program
Seton Hall University School of Graduate Medical Education
Jersey City Medical Center
Program Director:
Anthony N Diones, MD
Jersey City Medical Center
60 Baldwin Ave
Jersey City, NJ 07304
201 015-2420
Length: 3 Year(s)  Total Positions: 42  (GYI: 20)
Subspecialties: CD,GE
Program ID: 149-33-21-238

South Orange
Seton Hall University School of Graduate Medical Education Program
Seton Hall University School of Graduate Medical Education
St Elizabeth Hospital
St Joseph's Hospital and Medical Center
St Michael's Medical Center (Cathedral Health Services Inc)
Program Director:
Ernest E Federici, MD
Seton Hall University School of Graduate Medical Educat
South Orange, NJ 07079
201 761-9000
Length: 3 Year(s)  Total Positions: 112  (GYI: 42)
Subspecialities: COM,CD,END,GE,HEM,MD,OR,PFU,RHU
Program ID: 149-33-21-498

Summit
Overlook Hospital Program
Overlook Hospital
Program Director:
Michael Bernstein, MD
Overlook Hospital
99 Beaumont Ave
PO Box 220
Summit, NJ 07902-0220
908 522-2834
Length: 2 Year(s)  Total Positions: 24  (GYI: 8)
Program ID: 149-33-11-245

Trenton
Helena Puhl Medical Center Program
Helena Puhl Medical Center
Program Director:
Martin J Glyn, MD
Helena Puhl Medical Center
790 Brunswick Ave
Trenton, NJ 08638-4143
609 394-6889
Length: 2 Year(s)  Total Positions: 28  (GYI: 9)
Program ID: 149-33-21-249

* Updated information not provided.
Accredited Programs in Internal Medicine

St Francis Medical Center Program
St Francis Medical Center Program
Program Director: Herbert C. Haskins, MD
St Francis Medical Center
601 Hamilton Ave
Trenton, NJ 08629-1865
609 586-5061
Length: 3 Year(s) Total Positions: 30 (GYI: 10)
Program ID: 140-35-21-508

New Mexico

Albuquerque

University of New Mexico Program
University of New Mexico School of Medicine University of New Mexico Hospital Veterans Affairs Medical Center (Albuquerque)
Program Director: Ann Gateley, MD
Univ of New Mexico Sch of Med
DOM Office of Education
2211 Lomas Blvd NE ACC/STM
Albuquerque, NM 87131-5071
505 270-4061
Length: 3 Year(s) Total Positions: 70 (GYI: 25)
Subspecialties: CCM, CD, END, GE, HEM, ID, IMG, NEP, ON, PUD, RHH
Program ID: 140-35-21-247

New York

Albany

Albany Medical Center Program
Albany Medical Center Hospital Veterans Affairs Medical Center (Albany)
Program Director: Paul J. Davis, MD
Albany Medical Center
Medicine Education Office A-17
Albany, NY 12208
518 262-5077
Length: 3 Year(s) Total Positions: 67 (GYI: 25)
Subspecialties: CD, END, GE, HEM, ID, IMG, NEP, ON, PUD, RHH
Program ID: 140-35-21-245

Binghampton

Wilson Memorial Regional Medical Center (United Health Services) Program
Wilson Memorial Regional Medical Center (United Health Sw)
Program Director: Roy D. Gill, MD
Wilson Memorial Hospital
35-57 Harrison St
Johnson City, NY 13790
607 765-5056
Length: 3 Year(s) Total Positions: 25 (GYI: 10)
Program ID: 140-35-21-255

Brooklyn

Albert Einstein College of Medicine Program
Albert Einstein College of Medicine of Yeshiva University
Bronx Municipal Hospital Center Montefiore Medical Center-Henry and Lucy Moses Division
Montefiore Medical Center-Weiler Hospital
Brooklyn Hospital Center
Program Director: Joan I. Caspi, MD
8 Robert Mayer, MD
Dept of Medicine
Albert Einstein Coll of Med
5000 Morris Park Ave
Bronx, NY 10461
718 430-2501
Length: 3 Year(s) Total Positions: 207 (GYI: 66)
Subspecialties: CCM, CD, END, GE, HEM, ID, IMG, NEP, ON, PUD, RHH
Program ID: 140-35-21-287

Albert Einstein College of Medicine Program in Social Medicine
Albert Einstein College of Medicine of Yeshiva University Montefiore Medical Center-Henry and Lucy Moses Division
North Central Bronx Hospital
Program Director: Deborah M. Swierzynski, MD
Montefiore Medical Center
1125 210th St
Bronx, NY 10467
718 920-5001
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 140-35-21-284

Bronx-Lebanon Hospital Center Program
Bronx-Lebanon Hospital Center
Program Director: Jonathan W. M. Gold, MD
Bronx-Lebanon Hosp Ctr
1000 Grand Concourse
Bronx, NY 10467
718 518-5000
Length: 3 Year(s) Total Positions: 109 (GYI: 44)
Subspecialties: CD, GE, HEM, NEP, PUD
Program ID: 140-35-11-383

St Barnabas Hospital Program
St Barnabas Hospital
Program Director: James G. Hellerman, MD
St Barnabas Hospital
3rd Ave & 181st St
Bronx, NY 10467
718 899-6000
Length: 3 Year(s) Total Positions: 98 (GYI: 36)
Program ID: 140-35-21-485

Brooklyn

Brookdale Hospital Medical Center Program
Brookdale Hospital Medical Center
Program Director: Ira W. Weiss, MD
Brookdale Hospital Medical Center
Dept of Medicine
202 Pacific St
Brooklyn, NY 11212
718 240-6002
Length: 3 Year(s) Total Positions: 75 (GYI: 38)
Subspecialties: END, HEM, NEP, PUD
Program ID: 140-35-11-284

Brooklyn Hospital Center Program
Brooklyn Hospital Center
Program Director: Elliott Lazar, MD
Brooklyn Hosp Ctr
121 DeKalb Ave
Brooklyn, NY 11201
718 255-6005
Length: 3 Year(s) Total Positions: 81 (GYI: 41)
Subspecialties: CD, GE, HEM, ON, PUD
Program ID: 140-35-11-245

Coney Island Hospital Program
Coney Island Hospital
Program Director: Sanford A. Friedman, MD
Coney Island Hospital Dept of Internal Medicine
2601 Ocean Pkwy
Brooklyn, NY 11235
718 855-5445
Length: 3 Year(s) Total Positions: 63 (GYI: 25)
Subspecialties: CD, END, HEM, PUD
Program ID: 140-35-11-269

Interfaith Medical Center Program
Interfaith Medical Center
Program Director: Harvey Deuel, MD
Interfaith Medical Center
555 Prospect Pl
Brooklyn, NY 11238
718 835-7255
Length: 3 Year(s) Total Positions: 77 (GYI: 34)
Subspecialties: CD, END, GE, HEM, ON, PUD
Program ID: 140-35-11-267

Kingsbrook Jewish Medical Center Program
Kingsbrook Jewish Medical Center
Program Director: Mohammad Zahir, MD
Kingsbrook Jewish Medical Center
David Mixink Plaza
585 Schenectady Ave
Brooklyn, NY 11209-1991
718 604-5401
Length: 3 Year(s) Total Positions: 48 (GYI: 18)
Program ID: 140-35-11-277

Long Island College Hospital Program* Long Island College Hospital
Program Director: Howard S. Friedman, MD
Long Island College Hospital Dept of Medicine
340 Henry St
Brooklyn, NY 11201
718 272-1981
Length: 3 Year(s) Total Positions: 74 (GYI: 38)
Subspecialties: CD, GE, HEM, ID, NEP, PUD
Program ID: 140-35-11-290

Lutheran Medical Center Program
Lutheran Medical Center
Program Director: Robert Cucco, MD
Lutheran Medical Center Dept of Internal Medicine
150 50th St
Brooklyn, NY 11205-2574
718 850-7500
Length: 3 Year(s) Total Positions: 66 (GYI: 22)
Program ID: 140-35-11-282

* Updated information not provided.

480
Maimonides Medical Center Program
Maimonides Medical Center
Program Director:
Edgar Lichtstein, MD
Maimonides Med Ctr
4802 Ninth Ave
Brooklyn, NY 11219
718 299-7074
Length: 3 Year(s) Total Positions: 86 (GYI: 37)
Subspecialties: CCM,CD,GE,HG,ID,NEP,PUD
Program ID: 140-35-11-283

New York Methodist Hospital Program
New York Methodist Hospital
Program Director:
Thayyagala Sharrath, MD
New York Methodist Hospital
Dept of Medicine
606 Sixth St
Brooklyn, NY 11215
718 780-8245
Length: 3 Year(s) Total Positions: 73 (GYI: 32)
Subspecialties: HEM,ON,PUD
Program ID: 140-35-11-294

SUNY Health Science Center at Brooklyn Program
SUNY HSC at Brooklyn College of Medicine
Kings County Hospital Center
University Hospital SUNY Health Science Center at Brooklyn
Veterans Affairs Medical Center (Brooklyn)
Program Director:
Stephan L Kamholz, MD
SUNY Downstate Medical Center
450 Clarkson Ave Box 50
Brooklyn, NY 11205
212 276-2000
Length: 3 Year(s) Total Positions: 132 (GYI: 52)
Subspecialties: CCM,CD,END,GE,HG,ID,NEP,PUD,RHU
Program ID: 140-35-21-295

Woodhull Medical and Mental Health Center Program*
Woodhull Medical and Mental Health Center
Program Director:
Lothar Weidheimer, MD
Woodhull Medical and Mental Health Center
Dept of Medicine
760 Broadway
Brooklyn, NY 11206
718 963-5886
Length: 3 Year(s) Total Positions: 70 (GYI: 24)
Program ID: 140-35-21-147

Wyckoff Heights Hospital Program*
Wyckoff Heights Medical Center
Program Director:
Edmond S Modica, MD
Wyckoff Heights Medical Center
374 Stockbridge St
Brooklyn, NY 11237
212 963-7566
Length: 3 Year(s) Total Positions: 55 (GYI: 18)
Program ID: 140-35-12-508

Buffalo SUNY at Buffalo Graduate Medical-Dental Education Consortium (Miguel Hospital Program)
SUNY at Buffalo Grad Medical-Dental Education Consortium
Miguel Hospital of Buffalo
Program Director:
Thomas A Raab, MD
Miguel Hospital
Dept of Medicine
565 Abbott Rd
Buffalo, NY 14210
716 828-2570
Length: 3 Year(s) Total Positions: 23 (GYI: 9)
Program ID: 140-35-31-249

SUNY at Buffalo Graduate Medical-Dental Education Consortium (Mullard Fillmore) Program
SUNY at Buffalo Grad Medical-Dental Education Consortium
Mullard Fillmore Hospitals
Program Director:
Joseph L Izzo Jr, MD
Mullard Fillmore Hospitals
Dept of Internal Medicine
3 Gates Circle
Buffalo, NY 14208
716 897-4560
Length: 3 Year(s) Total Positions: 46 (GYI: 20)
Program ID: 140-35-31-250

SUNY at Buffalo Graduate Medical-Dental Education Consortium (Sisters of Charity) Program
SUNY at Buffalo Grad Medical-Dental Education Consortium
Sisters of Charity Medical Center
Program Director:
Nelson P Torre, MD
Sisters of Charity Medical Center
2107 Main St
Buffalo, NY 14211
716 897-3071
Length: 3 Year(s) Total Positions: 10 (GYI: 9)
Program ID: 140-35-31-203

SUNY at Buffalo Graduate Medical-Dental Education Consortium Program
SUNY at Buffalo Grad Medical-Dental Education Consortium
Buffalo General Hospital
Erie County Medical Center
Veterans Affairs Medical Center (Buffalo)
Program Director:
Robert Schleg, MD
Dept of Internal Medicine
Buffalo General Hospital
100 High St
Buffalo, NY 14209
716 842-4632
Length: 3 Year(s) Total Positions: 106 (GYI: 40)
Subspecialties: CD,END,GE,HG,ID,NEP,ON,PCC,RHU
Program ID: 140-35-31-252

Cooperstown SUNY at Stony Brook (East Meadow) Program
SUNY at Stony Brook (East Meadow)
Program Director:
Henry F Well, MD
Medical Education Dept
Cooperstown Hospital
1 Amidal Rd
Cooperstown, NY 13326-1394
500 687-4060
Length: 3 Year(s) Total Positions: 28 (GYI: 12)
Program ID: 140-35-11-253

East Meadow SUNY at Stony Brook (East Meadow) Program
SUNY at Stony Brook (East Meadow)
Program Director:
Victor Barnett, MD
Nassau County Medical Center
2261 Hempstead Turnpike
East Meadow, NY 11554-5409
516 572-6540
Length: 3 Year(s) Total Positions: 72 (GYI: 36)
Subspecialties: CD,END,GE,HG,ID,NEP,ON,PUD
Program ID: 140-35-31-354

Far Rockaway St John’s Episcopal Hospital-South Shore Program
St John’s Episcopal Hospital-South Shore
Program Director:
Richard L March, MD
St John’s Episcopal Hospital-South Shore
Dept of Medicine
257 Beach 15th St
Far Rockaway, NY 11691
718 688-7672
Length: 3 Year(s) Total Positions: 48 (GYI: 17)
Program ID: 140-35-31-486

Flushing Flushing Hospital Medical Center Program
Flushing Hospital Medical Center
Program Director:
Joseph L Mollica, MD
Flushing Hospital Medical Center
Dept of Medicine
45th Ave at Parsons Blvd
Flushing, NY 11355
718 670-3742
Length: 3 Year(s) Total Positions: 52 (GYI: 24)
Program ID: 140-35-11-272

New York Hospital Medical Center of Queens Program*
New York Hospital Medical Center of Queens
Program Director:
Terence M Brady, MD
The New York Hosp Med Ctr of Queens
56-45 Main St
Flushing, NY 11355-2966
718 670-1072
Length: 3 Year(s) Total Positions: 72 (GYI: 33)
Subspecialties: CD,END,NEP,PUD
Program ID: 140-35-11-292

* Updated information not provided.
Accredited Programs in Internal Medicine

Forest Hills
La Guardia Hospital/Syosset Community Hospital Program
LaGuardia Hospital
Program Director: Eric Hoffer, MD
102-01 66th Rd
Forest Hills, NY 11375
718-939-4384
Length: 3 Year(s) Total Positions: 53 (GYI: 20)
Program ID: 140-35-21-468

Jamaica
Catholic Medical Center of Brooklyn and Queens Program
Catholic Medical Center of Brooklyn and Queens Inc
Catholic Medical Center (Mary Immaculate Hospital) Catholic Medical Center (St John’s Queens Hospital)
Program Director: Catherine Martinez, MD
88-25 152nd St
Jamaica, NY 11432
718-658-7150
Length: 3 Year(s) Total Positions: 80 (GYI: 32)
Subspecialties: CD, GE, ID, PUL
Program ID: 140-35-22-287

Jamaica Hospital Program
Jamaica Hospital
Program Director: Thomas Santucci Jr, MD
The Jamaica Hospital Department of Medicine
800 Van Wyck Expressway
Jamaica, NY 11438
718-208-6901
Length: 3 Year(s) Total Positions: 43 (GYI: 15)
Program ID: 140-35-12-275

Manhasset
North Shore University Hospital Program
North Shore University Hospital
Memorial Sloan-Kettering Cancer Center
Program Director: Peter M Reiser, MD FACP
North Shore University Hospital
Dept of Medicine
360 Community Dr
Manhasset, NY 11030
516-686-2044
Length: 3 Year(s) Total Positions: 98 (GYI: 38)
Subspecialties: CCM, CD, GE, HEM, ID, IM, ON, NEP, ON, PCC, RHI
Program ID: 140-35-21-271

Mineola
Winthrop-University Hospital Program
Winthrop-University Hospital
Program Director: John P Alista, MD
Winthrop-University Hospital
209 First St
Mineola, NY 11501
516-686-2381
Length: 3 Year(s) Total Positions: 81 (GYI: 45)
Subspecialties: CD, EN, GE, HO, ID, IM, NEP, PCC, RHI
Program ID: 140-35-11-356

Mount Vernon
Mount Vernon Hospital Program
Mount Vernon Hospital
Program Director: Mark Adler, MD
The Mount Vernon Hospital
12 N Seventh Ave Rm 501
Mount Vernon, NY 10550-3088
914-694-8000
Length: 3 Year(s) Total Positions: 33 (GYI: 14)
Program ID: 140-35-21-482

New Hyde Park
Albert Einstein College of Medicine at Long Island Jewish Medical Center Program
Long Island Jewish Medical Center
Program Director: David R Danziger, MD
Long Island Jewish Medical Center
270-25 75th Ave
New Hyde Park, NY 11040
718-470-7270
Length: 3 Year(s) Total Positions: 79 (GYI: 40)
Subspecialties: CD, EN, GE, HO, ID, IM, MO, NEP, PCC, RHI
Program ID: 140-35-21-281

New Rochelle
New Rochelle Hospital Medical Center Program
New Rochelle Hospital Medical Center
Program Director: Jeffrey B Bruen, MD
DEpt of Medicine
New Rochelle Hospital Medical Ctr
16 Guion Pl
New Rochelle, NY 10802
914-637-1601
Length: 3 Year(s) Total Positions: 95 (GYI: 15)
Program ID: 140-35-11-258

New York
Albert Einstein College of Medicine at Beth Israel Medical Center Program
Beth Israel Medical Center
Program Director: Stephen G Baum, MD
Beth Israel Medical Center
Dept of Medicine
First Ave at 16th St
New York, NY 10003
212-420-4012
Length: 3 Year(s) Total Positions: 120 (GYI: 56)
Subspecialties: CCM, CD, EN, GE, HO, ID, NEP, PCC
Program ID: 140-35-11-261

Harlem Hospital Center Program
Harlem Hospital Center
Program Director: Charles K Francis, MD
Harlem Hospital Center Dept of Internal Medicine
150th & Lenox Ave
New York, NY 10037
212-938-1091
Length: 3 Year(s) Total Positions: 97 (GYI: 35)
Subspecialties: CD, GE, ID, NEP, PCC
Program ID: 140-35-11-273

Lenox Hill Hospital Program
Lenox Hill Hospital
Program Director: Michael S Bruno, MD
100 E 77th St
New York, NY 10021
212-434-2140
Length: 3 Year(s) Total Positions: 80 (GYI: 36)
Subspecialties: CD, GE, HO, ID, NEP, PCC
Program ID: 140-35-11-278

Mount Sinai School of Medicine (Elmhurst) Program
Mount Sinai School of Medicine
Elmhurst Hospital Center-Mount Sinai Services
Program Director: Frank A Ross, MD
Mount Sinai School of Medicine
Box 1118
One Gustave L Levy Pl
New York, NY 10029
718-834-3444
Length: 3 Year(s) Total Positions: 43 (GYI: 18)
Subspecialties: CD, GE, PCC
Program ID: 140-35-11-268

Mount Sinai School of Medicine (Jamaica) Program
Mount Sinai School of Medicine
Queens Hospital Center
Program Director: Fred Rosner, MD
Queens Hospital Center
Dept of Medicine
82-68 164th St
Jamaica, NY 11432
718-893-4650
Length: 3 Year(s)
Subspecialties: HO
Program ID: 140-35-21-610

Mount Sinai School of Medicine (North General) Program
North General Hospital
Program Director: Samuel J Daniel, MD
North General Hospital
Dept of Internal Medicine
1878 Madison Ave
New York, NY 10035
212-434-4155
Length: 3 Year(s) Total Positions: 33 (GYI: 13)
Program ID: 140-35-11-274

Mount Sinai School of Medicine Program
Mount Sinai School of Medicine
Elmhurst Hospital Center-Mount Sinai Services
Mount Sinai Medical Center
Veterans Affairs Medical Center (Bronx)
Program Director: Lawrence G Smith, MD
Mount Sinai Hospital
One Gustave L Levy Pl
Box 1118
New York, NY 10029
212-244-2544
Length: 3 Year(s) Total Positions: 139 (GYI: 56)
Subspecialties: CCM, CD, EN, GE, HO, ID, NEP, PCC, RHI
Program ID: 140-35-11-298

New York Downtown Hospital Program
New York Downtown Hospital
Program Director: Bruce D Logan, MD
New York Downtown Hosp
170 William St
New York, NY 10007
212-513-5770
Length: 3 Year(s) Total Positions: 52 (GYI: 22)
Program ID: 140-35-31-299

* Updated information not provided.
New York Hospital/Cornell Medical Center Program*
New York Hospital
Memorial Sloan-Kettering Cancer Center
Program Director:
Joseph G. Hayes, MD
The New York Hospital
725 E 56th St
New York, NY 10021
212-746-4700
Length: 3 Year(s) Total Positions: 109 (GYI: 44)
Subspecialties:
CCG, CD, END, GE, HEM, ID, ID, NEP, ON, PUD, RHU
Program ID: 140-35-21-270

New York University Medical Center (Veterans) Program
New York University Medical Center
Veterans Affairs Medical Center (Manhattan)
Program Director:
Norton Spritz, MD
Dept of Veterans Affairs Medical Center (Manhattan)
423 E 85 St
New York, NY 10010
212-263-6728
Length: 3 Year(s) Total Positions: 38 (GYI: 18)
Subspecialties: CD
Program ID: 140-35-31-284

New York University Medical Center Program
New York University Medical Center
Bellevue Hospital Center
Program Director:
Saul J. Farber, MD
New York University Medical Center
Dept of Medicine
555 First Ave
New York, NY 10016
212-263-6584
Total Positions: 113 (GYI: 42)
Subspecialties: CD, END, GE, HEM, ID, ID, NEP, ON, PCC, RHU
Program ID: 140-35-21-292

Presbyterian Hospital in the City of New York Program*
Presbyterian Hospital in the City of New York
Program Director:
John P. Bilezikian, MD
Presbyterian Hosp in the City of New York
622 W 168th St
FHS-106
New York, NY 10032
212-305-3387
Length: 3 Year(s) Total Positions: 134 (GYI: 62)
Subspecialties: CCM, CD, END, GE, ID, NEP, PUD, RHU
Program ID: 140-35-11-295

St Luke's-Roosevelt Hospital Center (Roosevelt) Program
St Luke's-Roosevelt Hospital Center
St Luke's-Roosevelt Hospital Center-Roosevelt Division
Program Director:
Gregory Steinberg, MD
Patrick H. Griffin, MD
Roosevelt Hospital
1000 Tenth Ave
New York, NY 10019
212-523-7232
Length: 3 Year(s) Total Positions: 61 (GYI: 27)
Subspecialties: HEM, ON
Program ID: 140-35-11-295

St Luke's-Roosevelt Hospital Center (St Luke's) Program
St Luke's-Roosevelt Hospital Center
St Luke's-Roosevelt Hospital Center-St Luke's Division
Program Director:
Katherine Hawkins, MD
Jeffrey M. Bresniler, MD
St Luke's Hospital
1111 Amsterdam Ave
New York, NY 10025
212-633-3314
Length: 3 Year(s) Total Positions: 75 (GYI: 35)
Subspecialties: CD, END, GE, HEM, ID, ID, ID, NEP, ON, PCC, RHU
Program ID: 140-35-21-301

Rochester
Highland Hospital of Rochester Program
Highland Hospital of Rochester
Program Director:
Howard B. Beckman, MD
Highland Hospital of Rochester
1000 South Ave
Rochester, NY 14620
716-476-6700
Length: 3 Year(s) Total Positions: 22 (GYI: 9)
Program ID: 140-35-11-310

St Mary's Hospital Program
St Mary's Hospital
Program Director:
Michael Wagner, MD
Dept of Medicine
St Mary's Hospital
80 Genesee St
Rochester, NY 14611
716-268-3150
Length: 3 Year(s) Total Positions: 41 (GYI: 15)
Program ID: 140-35-11-312

University of Rochester (Rochester General) Program
Strong Memorial Hospital of the University of Rochester
Genesee Hospital
Rochester General Hospital
Program Director:
Barbara L. Schuster, MD
Strong Memorial Hospital
601 Elmwood Ave Box 355
Rochester, NY 14642-8702
716-275-5427
Length: 3 Year(s) Total Positions: 60 (GYI: 27)
Program ID: 140-35-11-313

University of Rochester Program
Strong Memorial Hospital of the University of Rochester
Program Director:
Robert P. Betts, MD
Strong Memorial Hospital
601 Elmwood Ave Box Med
Rochester, NY 14642
716-278-2783
Length: 3 Year(s) Total Positions: 65 (GYI: 23)
Subspecialties: CCM, CD, END, GE, HEM, ID, ID, ID, ID, NEP, ON, PUD, RHU
Program ID: 140-35-11-314

Staten Island
Staten Island University Hospital Program
Staten Island University Hospital
Program Director:
Thomas G. McGinn, MD
Staten Island University Hospital Department of Medicine
475 Seaview Ave
Staten Island, NY 10305
718-220-6006
Length: 3 Year(s) Total Positions: 75 (GYI: 43)
Subspecialties: IMG
Program ID: 140-35-11-304

Stony Brook
SUNY at Stony Brook Program
University Hospital-SUNY at Stony Brook
Veterans Affairs Medical Center (Northport)
Program Director:
Douglas L. Brand, MD
Health Science Center Dept of Internal Medicine
T-16 Rm 020
Stony Brook, NY 11794-8160
516-444-3965
Length: 3 Year(s) Total Positions: 79 (GYI: 35)
Subspecialties: CCM, CD, END, GE, ID, ID, IMG, NEP, ON, PUD, RHU
Program ID: 140-35-21-315

Syracuse
SUNY Health Science Center at Syracuse Program
University Hospital-SUNY Health Science Center at Syracuse
Crouse-Irving Memorial Hospital
Veterans Affairs Medical Center (Syracuse)
Program Director:
David G. Heising, MD
Dept of Medicine
SUNY Health Science Center-Syracuse
760 E Adams St
Syracuse, NY 13210
315-445-4566
Length: 3 Year(s) Total Positions: 40 (GYI: 18)
Subspecialties: CCM, CD, END, GE, HEM, ID, IMG, NEP, ON, PCC, RHU
Program ID: 140-35-21-316

Valhalla
New York Medical College (Cabrini) Program
New York Medical College
Cabrini Medical Center
Program Director:
Wilfredo Talavera, MD
Cabrini Med Ctr
227 E 19th St
New York, NY 10003
212-995-6655
Length: 3 Year(s) Total Positions: 54 (GYI: 34)
Subspecialties: CD, GE, ID, ID, PUD, RHU
Program ID: 140-35-31-266

*Updated information not provided.
New York Medical College at St. Vincent's Hospital and Medical Center of New York Program
New York Medical College
St. Vincent’s Hospital and Medical Center of New York
Program Director: Eric C. Racow, MD
St. Vincent’s Hospital and Medical Center of New York 153 W 11th St
New York, NY 10011
212-604-8300
Length: 3 Years (Total Positions: 76 (GY: 30)
Subspecialties: CCM, CD, E&G, H&I, ID, IM, NEP, PUB, RHU
Program ID: 140-36-11-362

New York Medical College at Westchester County Medical Center Program
New York Medical College
Westchester County Medical Center
Program Director: Steven L. Neub, MD
New York Medical College
Dept. of Internal Medicine
Valhalla, NY 10595
914-586-8533
Length: 3 Years (Total Positions: 49 (GY: 25)
Subspecialties: CD, EN, GE, H&I, ID, IM, NEP, ON, PUB, RHU
Program ID: 140-36-11-817

University of North Carolina Hospitals Program
University of North Carolina Hospitals
Program Director: Lee R. Berkowitz, MD
University of North Carolina School of Medicine
Dep. of Medicine CB#7005
3013 Old Clinic Bldg
Chapel Hill, NC 27599-7005
919-966-1042
Length: 3 Years (Total Positions: 90 (GY: 32)
Subspecialties: CD, EN, GE, H&I, ID, IM, NEP, PUB, RHU
Program ID: 140-36-21-318

Carolina Medical Center Program
Carolina Medical Center
Program Director: Marvin M. McGill, MD
Carolina Medical Center Dep. of Internal Medicine
PO Box 23861
Charlotte, NC 28202-3861
704-355-3165
Length: 3 Years (Total Positions: 26 (GY: 8)
Subspecialties: CCM, CD, EN, GE, H&I, ID, IM, NEP, PUB, RHU
Program ID: 140-36-11-319

Duke University Program
Duke University Medical Center
Veterans Affairs Medical Center (Durham)
Program Director: Ralph G. Corey, MD
Duke University Medical Center
PO Box 3013
Durham, NC 27710
919-684-3165
Length: 3 Years (Total Positions: 122 (GY: 47)
Subspecialties: CCM, CD, EN, GE, H&I, ID, IM, NEP, PUB, RHU
Program ID: 140-36-21-320

*Updated information not provided.
North Dakota

Grand Forks

University of North Dakota Program
Univ of North Dakota School of Medicine
Veterans Affairs Medical and Regional Office Center (Fargo)
Dakota Hospital
St Luke's Hospitals
Program Director:
Anthony B Gastadson, MD
UND Dept of Medicine
VA Medical Center
2101 N Elm St 111J
Fargo, ND 58102
701-232-8007
Length: 3 Year(s) Total Positions: 24 (GYI: 8)
Program ID: 140-37-21-328

Ohio

Akron

Akron City Hospital (Summa Health System)/NEOUCOM Program
Akron City Hospital (Summa Health System)
St Thomas Hospital (Summa Health System)
Program Director:
James S Tan, MD
Akron City Hosp
525 E Market St
Akron, OH 44309
216 371-1110
Length: 3 Year(s) Total Positions: 21 (GYI: 20)
Program ID: 140-38-11-327

Akron General Medical Center/NEOUCOM Program
Akron General Medical Center
Program Director:
Joseph P Myers, MD
Akron General Medical Center
400 Wabash Ave
Akron, OH 44307
216 394-6140
Length: 3 Year(s) Total Positions: 26 (GYI: 12)
Program ID: 140-38-11-328

Canton

Canton Medical Education Foundation/NEOUCOM Program
Canton Medical Education Foundation
Aultman Hospital
Timken Mercy Medical Center
Program Director:
Andre J Ognibene, MD
Canton Affiliated Hospitals
NEOUCOM Internal Medicine
2500 Sixth St SW
Canton, OH 44710
216 438-6220
Length: 3 Year(s) Total Positions: 31 (GYI: 10)
Subspecialization: IMG
Program ID: 140-38-21-330

Case Western Reserve University (St Luke's) Program
St Luke’s Medical Center
Program Director:
Richard E Christie, MD
Saint Luke’s Medical Center
IM Residency Dept Rm 4135
11311 Shaker Blvd
Cleveland, OH 44104
800 369-6886
Length: 3 Year(s) Total Positions: 45 (GYI: 16)
Program ID: 140-38-11-329

Case Western Reserve University
Program
University Hospitals of Cleveland
Veterans Affairs Medical Center (Cleveland)
Program Director:
Keith B Armitage, MD
John Aucott, MD
University Hospitals of Cleveland
11000 Euclid Ave
Cleveland, OH 44106
216 944-3600
Length: 3 Year(s) Total Positions: 22 (GYI: 25)
Subspecialities: CCM,CO,RND,GE,HIM,ID,NEPON,PUD,RHU
Program ID: 140-38-21-335

Cleveland Clinic Foundation/St Vincent Charity Hospital Program
Cleveland Clinic Foundation
St Vincent Charity Hospital and Health Center
Program Director:
Susan J Behan, MD
Cleveland Clinic Foundation
9500 Euclid Ave TV32
Dept of Internal Medicine
Cleveland, OH 44195-5242
216 444-5600
Length: 3 Year(s) Total Positions: 116 (GYI: 44)
Subspecialities: CD,END,GE,HIM,ID,NEPON,PUD,RHU
Program ID: 140-38-13-339

Health Cleveland Program
Health Cleveland Corporation
Health Cleveland (Lutheran Medical Center)
Program Director:
Harris C Taylor, MD
Lutheran Medical Center
2500 Franklin Blvd
Cleveland, OH 44113-2992
216 363-2100
Length: 3 Year(s) Total Positions: 36 (GYI: 12)
Program ID: 140-38-21-340

Meridia Huron Hospital Program
Meridia Huron Hospital
Meridia Hillcrest Hospital
Program Director:
Burton C Wust, MD
Meridia Huron Hosp
13061 Terrace Rd
Cleveland, OH 44112-4399
216 781-0200
Length: 3 Year(s) Total Positions: 41 (GYI: 15)
Program ID: 140-38-21-476

Columbus

Mount Carmel Health Program
Mount Carmel Medical Center
Program Director:
G Patrick Eckler, MD
Mount Carmel Health
303 W State St
Columbus, OH 43222
614 225-5710
Length: 3 Year(s) Total Positions: 27 (GYI: 11)
Program ID: 140-38-12-341

* Updated information not provided.
Accredited Programs in Internal Medicine

Ohio State University Program
Ohio State University Medical Center
Program Director: Evelyn E. E. Ricker, MD
Ohio State University Hospital Dept of Medicine
1654 Upham Dr 215 Moors Hall
Columbus, OH 43210-1228
614 293-3989
Length: 3 Year(s) Total Positions: 56 (GYI: 21)
Subspecialties: CD,END,GE,ID,NEP,PCC,RHU
Program Id: 140-38-11-342

Riverside Methodist Hospitals Program
Riverside Methodist Hospital
Program Director: Ian M. Baird, MD
Riverside Methodist Hospital
3035 Olentangy River Rd
Medical Education Dept
Columbus, OH 43214
614 566-4675
Length: 3 Year(s) Total Positions: 54 (GYI: 26)
Program Id: 140-38-12-343

Dayton

Wright State University (Miami Valley) Program
Wright State University School of Medicine
Miami Valley Hospital
Veterans Affairs Medical Center (Dayton)
Program Director: Allen L. Cline, MD
Wright State University
Dept of Internal Medicine
P.O. Box 927
Dayton, OH 45401-0927
612 223-2010
Length: 3 Year(s) Total Positions: 38 (GYI: 10)
Program Id: 140-38-21-345

Wright State University Program
Wright State University School of Medicine
Good Samaritan Hospital and Health Center
Miami Valley Hospital
Veterans Affairs Medical Center (Dayton)
Program Director: Richard A. Serbin, MD
Wright State University
Dept of Medicine
PO Box 927
Dayton, OH 45401-0927
612 223-2010
Length: 3 Year(s) Total Positions: 27 (GYI: 9)
Subspecialties: CD,GE,RO,ID
Program Id: 140-38-21-344

Dayton (Kettering)
Kettering Medical Center Program
Kettering Medical Center
Program Director: Stephen D. McDonald, MD
Kettering Medical Center
3355 Southern Blvd
Kettering, OH 45429
612 296-7283
Length: 3 Year(s) Total Positions: 24 (GYI: 8)
Program Id: 140-38-21-347

Toledo

Medical College of Ohio at Toledo Program
Medical College of Ohio Hospital
St Vincent Medical Center
Toledo Hospital
Program Director: Patrick J. Madson, MD
Medical College of Ohio at Toledo
CS #10686 Dept of Medicine
Toledo, OH 43699-0005
419 391-3957
Length: 3 Year(s) Total Positions: 40 (GYI: 16)
Subspecialties: CD,END,GE,ID,NEP,CN
Program Id: 140-38-21-348

Wright-Patterson AFB
USAF Medical Center (Wright-Patterson) Program
USAF Medical Center (Wright-Patterson)
Program Director: Col Kenneth G. Vann, MD
645 Medical Group/SGHM
5001 Sugar Maple Dr
Wright-Patterson AFB, OH 45433-5539
513 663-9565
Length: 3 Year(s) Total Positions: 24 (GYI: 8)
Program Id: 140-38-11-002

Youngstown

St Elizabeth Hospital Medical Center/NEOUCOM Program
St Elizabeth Hospital Medical Center
Program Director: Charles Wilkins, MD
St Elizabeth Hospital Med Ctr
1044 Belmont Ave
PO Box 1799
Youngstown, OH 44501-1790
216 439-3344
Length: 3 Year(s) Total Positions: 24 (GYI: 8)
Program Id: 140-38-11-348

Western Reserve Care System/NEOUCOM Program
Western Reserve Care System
Northside Medical Center
Southside Medical Center
Program Director: Harvey Blochberg, MD
Western Reserve Care System
345 Oak Hill Ave
Youngstown, OH 44501-0090
216 740-7470
Length: 3 Year(s) Total Positions: 28 (GYI: 10)
Program Id: 140-38-31-350

Oklahoma

Oklahoma City

University of Oklahoma Health Sciences Center Program
University of Oklahoma College of Medicine-Oklahoma City
University Hospital and Clinics
Veterans Affairs Medical Center (Oklahoma City)
Program Director: Jerry D. Less, MD
University of Oklahoma Health Sciences Center
PO Box 28801
South Pavilion 4th FL RM 120
Oklahoma City, OK 73190
405 271-5963
Length: 3 Year(s) Total Positions: 67 (GYI: 54)
Subspecialties: CD,END,GE,ID,HO,JO,NEP,MJC,NEP,PCC,RHU
Program Id: 140-39-21-351

Tulsa

University of Oklahoma College of Medicine-Tulsa Program
University of Oklahoma College of Medicine-Tulsa
Hillcrest Medical Center
St Francis Hospital
St John Medical Center
Veterans Affairs Medical Center (Mus克gon)
Program Director: P. Daniel Duffy, MD
Univ of Oklahoma Coll of Med-Tulsa
Dept of Internal Medicine
2808 S Sheridan Rd
Tulsa, OK 74119-1077
918 225-9645
Length: 3 Year(s) Total Positions: 46 (GYI: 17)
Program Id: 140-39-21-352

Oregon

Portland

Emanuel Hospital and Health Center Program
Emanuel Hospital and Health Center
Good Samaritan Hospital and Medical Center
Program Director: Stephen R. Jones, MD
Good Samaritan Hospital and Medical Center
Dept of Medicine
1015 NW 22nd Ave
Portland, OR 97210
503 229-7454
Length: 3 Year(s) Total Positions: 52 (GYI: 17)
Program Id: 140-40-11-353

Oregon Health Sciences University Program
Oregon Health Sciences University Hospital
Veterans Affairs Medical Center (Portland)
Program Director: Thomas G. Cooney, MD
Oregon Health Sciences University
Dept of Medicine L4155
3181 SW Sam Jackson Park Rd
Portland, OR 97239-3088
503 434-5330
Length: 3 Year(s) Total Positions: 86 (GYI: 21)
Subspecialties: CCM,CD,END,GE,HEM,ID,IMG,NEP,
ON,PCC,RHU
Program Id: 140-40-31-357

* Updated information not provided.
Accredited Programs in Internal Medicine

Providence Medical Center Program
Providence Medical Center
Program Director:
Mark R. Rosenbarg, MD
Providence Medical Center
4800 NE Glisan
Portland, OR 97213-2967
503-225-6523
Length: 3 Year(s) Total Positions: 29 (GY: 15)
Program ID: 140-40-31-355

St Vincent Hospital and Medical Center Program
St Vincent Hospital and Medical Center
Program Director:
Kenneth Melvin, MD
St Vincent Hosp & Med Ctr
1230 SW Barnes Rd
Portland, OR 97235
503-291-2299
Length: 3 Year(s) Total Positions: 23 (GY: 10)
Program ID: 140-40-31-356

Pennsylvania

Abington
Abington Memorial Hospital Program
Abington Memorial Hospital
Program Director:
David G Smith, MD PACP
Abington Memorial Hospital
Dept of Medicine
1230 Old York Rd Ste 28
Abington, PA 19001
215 576-3034
Length: 3 Year(s) Total Positions: 45 (GY: 25)
Program ID: 140-41-12-358

Allentown
Lehigh Valley Hospital/Pennsylvania State University Program
Lehigh Valley Hospital
Program Director:
Richard H Snyder, MD
Lehigh Valley Hospital
Dept of Medicine
Cedar Crest & I-78; PO Box 689
Allentown, PA 18105-1556
610 402-9500
Length: 3 Year(s) Total Positions: 36 (GY: 12)
Program ID: 140-41-21-359

Bethlehem
Temple University/St Luke’s Hospital Program
St Luke’s Hospital
Program Director:
James A Cowan, MD
St Luke’s Hospital
Dept of Internal Medicine
401 Ostrum St
Bethlehem, PA 18015
610 954-4824
Length: 3 Year(s) Total Positions: 24 (GY: 8)
Program ID: 140-41-31-360

Danville
Geisinger Medical Center Program
Geisinger Medical Center
Program Director:
Robert Palinkas MD
Geisinger Medical Center
Dept of Medicine
Danville, PA 17821
717 271-6787
Length: 3 Year(s) Total Positions: 32 (GY: 12)
Subspecialties: CD,GE,PD,RHU
Program ID: 140-41-11-362

Easton
Easton Hospital Program
Easton Hospital
Program Director:
Kenneth H Wildrick, MD
Easton Hospital
250 E 21st St
Easton, PA 18042
215 250-4013
Length: 3 Year(s) Total Positions: 15 (GY: 5)
Program ID: 140-41-11-363

Harrisburg
Polyclinic Medical Center Program
Polyclinic Medical Center
Program Director:
Robert A Gordon, MD
Polyclinic Medical Center
3001 N Third St
Harrisburg, PA 17110
717 782-4247
Length: 3 Year(s) Total Positions: 18 (GY: 6)
Program ID: 140-41-11-365

Hershey
Milton S Hershey Medical Center of Pennsylvania State University Program
Penn State University Hospital Milton S Hershey Med Ctr
Program Director:
Richard J Simons Jr, MD
University Hospital Milton S Hershey Medical Center
Dept of Medicine
PO Box 850
Hershey, PA 17033-0850
717 531-8380
Length: 3 Year(s) Total Positions: 67 (GY: 30)
Subspecialties: CCM,CD,END,GE,ID,NEP,PUD
Program ID: 140-41-11-366

Johnstown
Temple University/Conemaugh Valley Memorial Hospital Program
Conemaugh Valley Memorial Hospital
Program Director:
Dean S Sullivan, MD
Conemaugh Valley Memorial Hospital
1086 Franklin St
Johnstown, PA 15906-4308
814 423-9493
Length: 3 Year(s) Total Positions: 21 (GY: 7)
Program ID: 140-41-31-367

McKeesport
McKeesport Hospital Program
McKeesport Hospital
Program Director:
Louis D Meta, MD
McKeesport Hospital
1500 Fifth Ave
McKeesport, PA 15132
412 694-2167
Length: 3 Year(s) Total Positions: 36 (GY: 12)
Subspecialties: CD,GE,PD,RHU
Program ID: 140-41-21-368

Philadelphia
Albert Einstein Medical Center Program
Albert Einstein Medical Center
Program Director:
Herbert S Waxman, MD
Internal Medicine Residency Program
Albert Einstein Medical Center
5401 Old York Rd Ste 363
Philadelphia, PA 19141-3625
215 456-0647
Length: 3 Year(s) Total Positions: 66 (GY: 22)
Subspecialties: CD,GE,DMG,NEP,PUD
Program ID: 140-41-11-369

Episcopal Hospital Program
Episcopal Hospital
Program Director:
David Schlossberg, MD
Episcopal Hospital
100 E Lehigh Ave
Philadelphia, PA 19125
215 497-7086
Length: 3 Year(s) Total Positions: 20 (GY: 10)
Subspecialties: CD
Program ID: 140-41-11-370

Graduate Hospital Program
Graduate Hospital
Program Director:
Elliot H Norman, MD
St 501 Popen Pavilion
The Graduate Hospital
1900 Lombard St
Philadelphia, PA 19146
215 963-2900
Length: 3 Year(s) Total Positions: 54 (GY: 28)
Subspecialties: CD,END,PD
Program ID: 140-41-11-371

MCNHP/Hahnemann University Hospital Program
Hahnemann University Hospital
Drexel University College of Medicine
Program Director:
Brian H Filipp, MD
Stanley J Russin Jr, MD
Hahnemann University Hospital
Broad & Vine Sta MS 427
Philadelphia, PA 19107-1192
215 782-4800
Length: 3 Year(s) Total Positions: 38 (GY: 38)
Subspecialties: CD,END,6,HO,ID,NEP,PCC,BHU
Program ID: 140-41-21-372

* Updated information not provided.
MCPHU/Medical College of Pennsylvania Hospital Program
Medical College of Pennsylvania Hospital
Veterans Affairs Medical Center (Philadelphia)
Program Director:
Donald Kaye, MD
Medical College of Pennsylvania
c/o Dr Walter Rubin
3300 Henry Ave
Philadelphia, PA 19129
215 662-9067
Length: 3 Year(s) Total Positions: 72 (GYI: 30)
Subspecialties: CD, END, GE, HEM, ID, NEP, ON, FPC, RHU
Program ID: 140-41-21-374

M Mercy Catholic Medical Center Program
Mercy Catholic Medical Center, Inc
Mercy Catholic Medical Center-Pittsburgh Mercy Division
Mercy Catholic Medical Center-Misericordia Division
Program Director:
David S Brody, MD
Mercy Catholic Medical Center
540th & Cedar Ave
Philadelphia, PA 19143
610 237-4568
Length: 3 Year(s) Total Positions: 41 (GYI: 20)
Program ID: 140-41-11-375

Pennsylvania Hospital Program
Pennsylvania Hospital
Program Director:
Francis C Kranan, MD
Dept of Medicine
Pennsylvania Hospital
800 Spruce St
Philadelphia, PA 19102
215 620-3007
Length: 3 Year(s) Total Positions: 41 (GYI: 20)
Program ID: 140-41-11-376

Presbyterian Medical Center of Philadelphia Program
Presbyterian Medical Center of Philadelphia
Program Director:
Yans H Liu, MD
Presbyterian Medical Center of Philadelphia
51 N 39th St
Etna 284
Philadelphia, PA 19104
215 663-8388
Length: 3 Year(s) Total Positions: 40 (GYI: 23)
Subspecialties: CD, GE, HEM, ON, PUD
Program ID: 140-41-11-377

Temple University Program
Temple University Hospital
Germantown Hospital and Medical Center
Program Director:
Richard S Eisenstaedt, MD
Dept of Internal Medicine
Temple University Hospital
Broad & Tioga Sts 88F
Philadelphia, PA 19140
215 707-5772
Length: 3 Year(s) Total Positions: 74 (GYI: 28)
Subspecialties: CD, END, GE, HEM, ID, NEP, ON, FPC, RHU
Program ID: 140-41-11-378

Thomas Jefferson University Program
Thomas Jefferson University Hospital
Program Director:
Thomas J Jaszcz, MD
Jefferson Medical College Dept of Medicine
3025 Walnut St
RM 601
Philadelphia, PA 19107
215 665-8906
Length: 3 Year(s) Total Positions: 104 (GYI: 45)
Subspecialties: CD, END, GE, HEM, ID, NEP, ON, FPC, RHU
Program ID: 140-41-21-379

University of Pennsylvania Program
Hospital of the University of Pennsylvania
Veterans Affairs Medical Center (Philadelphia)
Program Director:
Donald B Martin, MD
Dept of Medicine
110 Centera Box 706
3406 Spruce St
Philadelphia, PA 19104
215 662-3242
Length: 3 Year(s) Total Positions: 105 (GYI: 46)
Subspecialties: CCM, CD, END, GE, HEM, ID, NEP, ON, FPC, RHU
Program ID: 140-41-21-380

Pittsburgh

MCPHU/Allegheny General Hospital Program
Allegheny General Hospital
Program Director:
Claude R Joyner, MD
Dept of Internal Medicine
Allegheny General Hospital
230 E North Ave
Pittsburgh, PA 15212-9986
800 658-9807
Length: 3 Year(s) Total Positions: 40 (GYI: 24)
Subspecialties: CD, GE, NEP, ON, PUD
Program ID: 140-41-11-381

Mercy Hospital of Pittsburgh Program
Mercy Hospital of Pittsburgh
Program Director:
Kimball W Mohr, MD
Mercy Hospital of Pittsburgh
Dept of Medicine
1400 Locust St
Pittsburgh, PA 15219-6166
412 233-5533
Length: 3 Year(s) Total Positions: 54 (GYI: 21)
Program ID: 140-41-11-382

Shadyside Hospital Program
Shadyside Hospital
Program Director:
Mark S Roberts, MD
Shadyside Hospital
5200 Centre Ave
Pittsburgh, PA 15232
412 622-3863
Length: 3 Year(s) Total Positions: 35 (GYI: 10)
Subspecialties: CD, END, GE, HEM
Program ID: 140-41-12-2451

St Francis Medical Center Program
St Francis Hospital Medical Center
Program Director:
T Michael White, MD
St Francis Medical Center
400 45th St
Pittsburgh, PA 15201
412 653-4988
Length: 3 Year(s) Total Positions: 33 (GYI: 11)
Program ID: 140-41-11-386

University Health Center of Pittsburgh Program
University Health Center of Pittsburgh
Monforte University Hospital (UPMC)
Presbyterian-University Hospital (UPMC)
Veterans Affairs Medical Center (Pittsburgh)
Program Director:
Frank J Kroboth, MD
Hoos of the Univ Ill Ctr of Pittsburgh
3500 Terrace St
1118 Scalp Hall
Pittsburgh, PA 15261
412 668-9842
Length: 3 Year(s) Total Positions: 109 (GYI: 39)
Subspecialties: FPC
Program ID: 140-41-21-384

Western Pennsylvania Hospital Program
Western Pennsylvania Hospital
Program Director:
Herbert S Diamond, MD
Western Pennsylvania Hospital
Dept of Medicine
4500 Friendship Ave
Pittsburgh, PA 15224
412 578-5750
Length: 3 Year(s) Total Positions: 51 (GYI: 16)
Subspecialties: CD, GE, HEM, PUD
Program ID: 140-41-11-387

Reading

Reading Hospital and Medical Center Program
Reading Hospital and Medical Center
Program Director:
Daniel B Kimball Jr, MD
Reading Hospital and Medical Center
Sixth & Spruce Sts
Reading, PA 19611
900 692-6943
Length: 3 Year(s) Total Positions: 20 (GYI: 8)
Program ID: 140-41-21-388

Sayre

Guthrie Healthcare System Program
Robert Packer Hospital
Program Director:
Felix J Dolio, MD
Guthrie Healthcare System/Robert Packer Hosp
Guthrie Squ
Sayre, PA 18840-1688
717 582-4307
Length: 3 Year(s) Total Positions: 23 (GYI: 10)
Subspecialties: CD, GE, PUD, RHU
Program ID: 140-41-13-389

Scranton

Scranton-Temple Residency Program
Scranton-Temple Residency Program Inc
Mercy Hospital
Montage Taylor Hospital
Program Director:
Robert E Wright, MD
700 Jefferson Ave
Scranton, PA 18510
717 343-2033
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 140-41-21-390

* Updated information not provided.
Wilkes-Barre
Northeastern Pennsylvania Hospitals Program
Veterans Affairs Medical Center (Wilkes-Barre)
Community Medical Center
Program Director: Barak M. Shah, MD
Veterans Affairs Medical Center
1114 E End Blvd
Wilkes-Barre, PA 18711
717 824-3621
Length: 3 Year(s) Total Positions: 43 (GYI: 17)
Subspecialties: PUD
Program ID: 140-41-31-391

Wynnewood
Lankenau Hospital Program*
Lankenau Hospital
Program Director: Robert L. Breen, MD
Lankenau Hospital
Dept of Medicine Ste 116
100 Lancaster Ave W of City Line
Wynnewood, PA 19096
215 640-3138
Length: 3 Year(s) Total Positions: 46 (GYI: 20)
Subspecialties: CD,GE,HONP
Program ID: 140-41-11-373

York
York Hospital Program
York Hospital
Program Director: W. Heide Blotzer, MD
York Hospital
1001 S George St
York, PA 17405
717 851-2104
Length: 3 Year(s) Total Positions: 20 (GYI: 8)
Program ID: 140-41-11-392

Puerto Rico
Bayamon
Universidad Central del Caribe Program*
University Hospital Ramon Ruiz Arna
Program Director: Robert Hunter-Mellado, MD
University Hospital Ramon Ruiz Arna
Dept of Internal Medicine
PO Box 60-30
Bayamon, PR 00691-0662
809 740-4295
Length: 3 Year(s) Total Positions: 46 (GYI: 22)
Program ID: 140-42-12-452

Caguas
Caguas Regional Hospital Program*
Caguas Regional Hospital
Program Director: Juan R. Otero, MD
Caguas Regional Hospital
Dept of Medicine
Caguas, PR 00625
809 744-3100
Length: 3 Year(s) Total Positions: 25 (GYI: 8)
Program ID: 140-42-31-390

Mayaguez
Ramon E Betances Hospital-Mayaguez Medical Center Program*
Dr Ramon E Betances Hospital-Mayaguez Medical Center
Program Director: Sigfredo Aceon III, MD
Mayaguez Medical Center
Dept of Internal Medicine
Carr 166, n 5/200
Mayaguez, PR 00680
809 884-3588
Length: 3 Year(s) Total Positions: 15 (GYI: 5)
Subspecialties: CD,END,GE,HONP
Program ID: 140-42-12-394

Ponce
Hospital de Damas Program
Hospital de Damas
Program Director: Felix M Cortes, MD
Hospital de Damas
Ponce, PR 00731
809 844-3089
Length: 3 Year(s) Total Positions: 26 (GYI: 7)
Subspecialties: CD,END,GE,HONP
Program ID: 140-42-11-453

Ponce Regional Hospital Program
Ponce Regional Hospital
Hospital San Lucas
Program Director: Lawrence Olsen Maristany, MD
Ponce Regional Hospital
Dept of Internal Medicine
PO Box 810
Ponce, PR 00731
809 844-3089
Length: 3 Year(s) Total Positions: 26 (GYI: 7)
Program ID: 140-42-11-396

Rio Piedras
San Juan City Hospital Program
San Juan City Hospital
Program Director: Jose R Martinez, MD
Dept of Med
San Juan Municipal Hospital
Box 21007
San Juan, PR 00925
809 765-5147
Length: 3 Year(s) Total Positions: 27 (GYI: 9)
Subspecialties: CD,END,HEM,ON,PUD,RHU
Program ID: 140-42-11-396

San German
Hospital de La Concepcion Program
Hospital de La Concepcion
Program Director: Francisco Jaume, MD
Hospital De La Concepcion
Box 205
St Luna #41
San German, PR 00663
809 892-1860
Length: 3 Year(s) Total Positions: 5 (GYI: 5)
Program ID: 140-42-21-489

San Juan
University of Puerto Rico Program
University of Puerto Rico School of Medicine
Hospital Dr Federico Trilla
University Hospital
Program Director: Mario R Garcia-Palmieri, MD
University Hospital Puerto Rico Medical Center
Box 5007
San Juan, PR 00910
809 786-2925
Length: 3 Year(s) Total Positions: 45 (GYI: 15)
Subspecialties: CD,END,GE,HONP
Program ID: 140-42-21-397

Pawtucket
Brown University (Memorial) Program
Memorial Hospital of Rhode Island
Program Director: Richard Garleton, MD
Memorial Hospital of Rhode Island
111 Nott Terrace
Pawtucket, RI 02860
401 729-3478
Length: 3 Year(s) Total Positions: 30 (GYI: 10)
Program ID: 140-42-21-473

Providence
Brown University (Miriam) Program
Miriam Hospital
Program Director: Fred J Schiffman, MD
Miriam Hospital
164 Summit Ave
Providence, RI 02906
401 351-8590
Length: 3 Year(s) Total Positions: 20 (GYI: 20)
Subspecialties: CD
Program ID: 140-42-11-399

Brown University (Roger Williams) Program
Roger Williams Medical Center
Veterans Affairs Medical Center (Providence)
Program Director: Alan B. Weihberg, MD
Dept of Internal Medicine/Brown Univ Program C
Roger Williams Hospital
825 Chalkstone Ave
Providence, RI 02908-4736
401 465-2033
Length: 3 Year(s) Total Positions: 34 (GYI: 14)
Subspecialties: CD,END,GE,HONP
Program ID: 140-42-31-401

* Updated information not provided.
Brown University Program
Rhode Island Hospital
Program Director:
Albert S Most, MD
Rhode Island Hosp
Department of Medicine
555 Eddy St
Providence, RI 02903-4223
401 444-5977
Length: 3 Year(s)  Total Positions: 68  (GYI: 28)
Subspecialties: COM,CD,END,O,GE,NEP
Program ID: 140-43-11-400

South Dakota
Sioux Falls
University of South Dakota Program
University of South Dakota School of Medicine
McKenzie Hospital
Royal C Johnson Veterans Affairs Medical Center
Sioux Valley Hospital
Program Director:
John L Beise, MD
Univ of South Dakota Dept of Internal Medicine
Health Science Center
1400 W 22nd St
Sioux Falls, SD 57105-1570
605 357-1558
Length: 3 Year(s)  Total Positions: 23  (GYI: 10)
Program ID: 140-43-21-406

Tennessee
Chattanooga
University of Tennessee College of Medicine at Chattanooga Program*
University of Tennessee College of Medicine-Chattanooga
Elder Medical Center
Program Director:
Douglas L Bechard, MD
Chattanooga Univ-Univ of Tennessee College of Medicine
979 B Third St
Ste 505
Chattanooga, TN 37403
615 775-9393
Length: 3 Year(s)  Total Positions: 28  (GYI: 8)
Program ID: 140-47-11-407

Johnson City
East Tennessee State University Program
James H Quillen College of Medicine
Bristol Regional Medical Center
Holston Valley Hospital and Medical Center
Johnson City Medical Center hospital
Veterans Affairs Medical Center (Mountain Home)
Program Director:
Steven L Beek, MD
East Tennessee State University
Box 80 622
Johnson City, TN 37614-0622
615 229-3283
Length: 3 Year(s)  Total Positions: 54  (GYI: 22)
Subspecialties: CD,GE,HO,ID,IMG,PUD
Program ID: 140-47-21-408

Knoxville
University of Tennessee Medical Center at Knoxville Program
University of Tennessee Graduate School of Medicine
University of Tennessee Memphis Hospital
Program Director:
Warren G Thompson, MD
The University of Tennessee
Graduate School of Medicine
1504 Alcoa Hwy
Knoxville, TN 37922
615 544-3549
Length: 3 Year(s)  Total Positions: 24  (GYI: 8)
Program ID: 140-47-11-408

Memphis
Methodist Hospital-Central Unit Program
Methodist Hospital-Central Unit
Program Director:
Stephen T Miller, MD
Medical Education Dept 1 Tower
Methodist Hospital-Central Unit
1960 Union Ave
Memphis, TN 38104-3415
901 726-8365
Length: 3 Year(s)  Total Positions: 35  (GYI: 12)
Program ID: 140-47-31-411

University of Tennessee Program*
University of Tennessee College of Medicine
Baptist Memorial Hospital
Regional Medical Center at Memphis
University of Tennessee Medical Center
Veterans Affairs Medical Center (Memphis)
Program Director:
Michael S Bronze, MD
The Univ of Tennessee Memphis Med Educ Office
606 Court Ave B313
Memphis, TN 38163
901 325-5814
Length: 3 Year(s)  Total Positions: 36  (GYI: 36)
Subspecialties: COM,CD,END,O,HEM,ID,IM,NEP,NEPON,PUD,RHU
Program ID: 140-47-21-412

Nashville
George W Hubbard Hospital of Meharry Medical College Program*
George W Hubbard Hospital of Meharry Medical College
Arv C York Veterans Affairs Medical Center
Metropolitan Nashville General Hospital
Program Director:
Robert E Hardy, MD
Meharry Medical College Dept of Medicine
1055 D B Todd Blvd
Nashville, TN 37208
615 327-4777
Length: 3 Year(s)
Program ID: 140-47-11-413

University of Tennessee (Nashville) Program
Baptist Hospital
University of Tennessee College of Medicine
Program Director:
Paul C McNabb, MD
Baptist Hospital
Dept of Medicine
200 Church St
Nashville, TN 37236
615 329-5107
Length: 3 Year(s)  Total Positions: 11  (GYI: 6)
Program ID: 140-47-21-478

Vanderbilt University Program
Vanderbilt University Medical Center
Metropolitan Nashville General Hospital
Veterans Affairs Medical Center (Nashville)
Program Director:
John A Oates, MD
D 3100 Vanderbilt Medical Center North
21st & Garland St
Attn: Ms Glenna Gant
Nashville, TN 37232-2358
615 329-3036
Length: 3 Year(s)  Total Positions: 104  (GYI: 35)
Subspecialties: CD,END,GE,H,G,ID,NEP,P,POD,RHU
Program ID: 140-47-31-414

* Updated information not provided.
Texas

Amarillo

Texas Tech University (Amarillo) Program
Texas Tech University Health Sciences Center at Amarillo
Northwest Texas Health Care System
Veterans Affairs Medical Center (Amarillo)

Program Director:
Constantine K. Sadeh, MD
Texas Tech University Health Sciences Center
1400 Wallace Blvd
Amarillo, TX 79106

606-354-5489

Length: 3 Year(s) Total Positions: 32 (GYI: 14)
Program ID: 140-46-21-477

Austin

Central Texas Medical Foundation Program
Central Texas Medical Foundation
Brackenridge Hospital

Program Director:
Beth W. Miller, MD
Brackenridge Hospital
601 E 18th St
Austin, TX 78701
512-489-1069

Length: 3 Year(s) Total Positions: 24 (GYI: 8)
Program ID: 140-46-12-415

Dallas

Baylor University Medical Center Program
Baylor University Medical Center

Program Director:
John S. Pelzner, MD
Baylor University Medical Center
3500 Gaston Ave Box ME
Dallas, TX 75246
214-820-2671

Length: 3 Year(s) Total Positions: 34 (GYI: 16)
Subspecialties: CD,GE,ID,ON
Program ID: 140-46-31-416

Methodist Hospitals of Dallas Program
Methodist Hospitals of Dallas

Program Director:
Jack P. Bruce, MD
Methodist Hospitals of Dallas
Medical Education Dept
PO Box 603899
Dallas, TX 75265-6899

214-947-2306

Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 140-46-12-417

Presbyterian Hospital of Dallas Program
Presbyterian Hospital of Dallas

Program Director:
James P. Knoechel, MD
Presbyterian Hospital of Dallas

Department of Internal Medicine
8200 Walnut Hill Ln
Dallas, TX 75231-4406
214-345-7781

Length: 3 Year(s) Total Positions: 24 (GYI: 12)
Program ID: 140-46-11-420

St Paul Medical Center Program
St Paul Medical Center

Program Director:
Joseph Viroslav, MD
St Paul Medical Center
Dept of Internal Medicine
5000 Harry Hines Blvd
Dallas, TX 75235
214-878-3788

Length: 3 Year(s) Total Positions: 20 (GYI: 8)
Program ID: 140-46-11-418

University of Texas Southwestern Medical School Program
University of Texas Southwestern Medical School
Dallas County Hospital District-Parkland Memorial Hospital
Veterans Affairs Medical Center (Dallas)

Program Director:
Daniel Foster, MD
Univ of Texas Hlth Sci Ctr
PO Box 36423
Dallas, TX 75235
214-645-9488

Length: 3 Year(s) Total Positions: 132 (GYI: 43)
Subspecialties: CD,END,GE,HI,ID,NEP,FU,RHU
Program ID: 140-46-21-419

El Paso

Texas Tech University (El Paso) Program
Texas Tech University Health Sciences Center at El Paso
KB Thomason General Hospital

Program Director:
William L. Hard, MD
Patricia Bowley, MD
Texas Tech University Health Sciences Center
4800 Albert Ave
El Paso, TX 79905-1268
915-541-6161

Length: 3 Year(s) Total Positions: 30 (GYI: 10)
Subspecialties: CD,END,GE,HI,ID,NEP,FU,RHU
Program ID: 140-46-11-424

William Beaumont Army Medical Center Program
William Beaumont Army Medical Center

Program Director:
Col Preston B Carnady Jr, MD
William Beaumont Army Medical Center
Dept of Medicine
5905 N Piedras St
El Paso, TX 79902-6001
915-567-2180

Length: 3 Year(s) Total Positions: 27 (GYI: 9)
Program ID: 140-46-12-009

Fort Sam Houston

Brooke Army Medical Center Program
Brooke Army Medical Center

Program Director:
Col Michael A Berry, MD
Brooke Army Medical Center
Dept of Medicine
Attn: BAHRE-MD Bldg 3276
Fort Sam Houston, TX 78234-6300
210 916-6020

Length: 3 Year(s) Total Positions: 28 (GYI: 8)
Subspecialties: CD,END,GE,HI,ID,NEP,FU,RHU
Program ID: 140-46-12-009

Galveston

University of Texas Medical Branch Hospitals Program
University of Texas Medical Branch Hospitals

Program Director:
Thomas A. Blackwell, MD
301 University Blvd
Univ of Texas Medical Branch
Galveston, TX 77555-0770
409-772-2653

Length: 3 Year(s) Total Positions: 80 (GYI: 35)
Subspecialties: CD,END,GE,HI,ID,IM,NEP,ON,PD
Program ID: 140-46-21-421

Houston

Baylor College of Medicine Program
Baylor College of Medicine
Harris County Hospital District-Bex Tabl General Hospital
Methodist Hospital
St Luke's Episcopal Hospital
Veterans Affairs Medical Center (Houston)

Program Director:
Edward C. Lynch, MD
Baylor College of Medicine
Dept of Medicine: B-501
6666 Fannin
Houston, TX 77030-2707
713-790-2117

Length: 3 Year(s) Total Positions: 141 (GYI: 54)
Subspecialties: CD,END,GE,HI,ID,IM,NEP,ON,PD,RHU
Program ID: 140-46-11-422

University of Texas at Houston Program
University of Texas Medical School at Houston
Hermann Hospital
Syndon J. Johnson General Hospital

Program Director:
Victor R. Lavis, MD
6661 Fannin St
Room 1.150
Houston, TX 77030
713-793-5091

Length: 3 Year(s) Total Positions: 112 (GYI: 35)
Subspecialties: CD,END,GE,HI,ID,NEP,ON,PD,RHU
Program ID: 140-46-31-423

Lackland AFB

Wilford Hall USAF Medical Center Program
Wilford Hall USAF Medical Center (SG)

Program Director:
George E. Crawford, MD
Wilford Hall Medical Center
Div of Med/PSM
2200 Bergquist Dr Ste 1
San Antonio, TX 78259-5000
210-670-6600

Length: 3 Year(s) Total Positions: 57 (GYI: 25)
Subspecialties: CD,END,GE,HI,ID,IM,NEP,PD,RHU
Program ID: 140-46-12-003

* Updated information not provided.
Accredited Programs in Internal Medicine

Lubbock
Texas Tech University (Lubbock) Program
Texas Tech University Health Sciences Center at Lubbock
University Medical Center
Program Director:
Kenneth M. Nagert, MD
Texas Tech University Health Sciences Center
Dept of Medicine
3601 4th St
Lubbock, TX 79430
806-743-3166
Length: 3 Year(s) Total Positions: 24 (GYI: 10)
Subspecialties: CD,OR,NEP
Program ID: 140-40-21-409

San Antonio
University of Texas Health Science Center at San Antonio Program
University of Texas School of Medicine at San Antonio
Audie L. Murphy Memorial Veterans Hospital (San Antonio)
University Hospital-South Texas Medical Center
Program Director:
Charles A. Duncan, MD
University of Texas Health Science Center
Dept of Medicine Housestaff Office
7703 Floyd Curl Dr
San Antonio, TX 78284-7871
210 567-4280
Length: 3 Year(s) Total Positions: 94 (GYI: 41)
Subspecialties: CD,END,GE,HEM,ID,NEP,ON,PCC,RHU
Program ID: 140-40-21-428

Temple
Texas A&M College of Medicine-Scott and White Program
Scott and White Memorial Hospital
Olin E. Teague Veterans Center
Program Director:
Phillip T Cain, MD
Texas A&M-Scott and White
Graduate Medical Education
2401 S 31st St
Temple, TX 76508-6001
800-286-4463
Length: 3 Year(s) Total Positions: 34 (GYI: 14)
Subspecialties: CD,END,GE,HEM,ON,PUD
Program ID: 140-40-21-426

Utah
Salt Lake City
LDS Hospital Program
LDS Hospital
Program Director:
O Michael Vincent, MD
LDS Hospital
Eighth Ave and C St
Salt Lake City, UT 84143
801 321-1076
Length: 3 Year(s) Total Positions: 27 (GYI: 8)
Program ID: 140-40-11-428

University of Utah Program
University of Utah Medical Center
Veterans Affairs Medical Center (Salt Lake City)
Program Director:
Barry M Stalis, MD
University of Utah Medical
50 N Medical Dr #4C104
Salt Lake City, UT 84102
801 681-7899
Length: 3 Year(s) Total Positions: 36 (GYI: 30)
Subspecialties: CCM,CD,END,GR,HEM,ID,IM,NEP,ON,PUD,RHU
Program ID: 140-40-21-427

Vermont
Burlington
Medical Center Hospital of Vermont Program
Medical Center Hospital of Vermont
Program Director:
Mark A. Leviton, MD
Medical Center Hospital of Vermont
Dept of Medicine
311 Fletcher House
Burlington, VT 05401
802 655-4853
Length: 3 Year(s) Total Positions: 44 (GYI: 38)
Subspecialties: CD,END,GE,HO,ID,NEP,PUD,RHU
Program ID: 140-40-21-429

Virginia
Charlottesville
University of Virginia Program
University of Virginia Medical Center
Program Director:
W Michael Scheld, MD
University of Virginia Hospitals Dept of Internal Med
Box 136
Charlottesville, VA 22908
804 294-2315
Length: 3 Year(s) Total Positions: 72 (GYI: 24)
Subspecialties: CCM,CD,END,GR,HEM,ID,IM,NEP,ON,PUD,RHU
Program ID: 140-40-21-439

Norfolk
Eastern Virginia Graduate School of Medicine Program
Eastern Virginia Graduate School of Medicine
DePaul Medical Center
Sentara Leigh Hospital
Sentara Norfolk General Hospital
Veterans Affairs Medical Center (Hampton)
Program Director:
Thomas J Manser, MD
Eastern Virginia Graduate Sch of Med Dept of Int Med
825 Fairfax Ave Hofheimer Hall
Norfolk, VA 23507
804 445-8919
Length: 3 Year(s) Total Positions: 40 (GYI: 28)
Program ID: 140-40-11-423

Portsmouth
Naval Medical Center (Portsmouth) Program
Naval Medical Center (Portsmouth)
Program Director:
Capt Stephen C Seidel, MD
Naval Hospital
Dept of Medicine
Portsmouth, VA 23708-5100
804 498-5067
Length: 3 Year(s) Total Positions: 38 (GYI: 10)
Subspecialties: GE,NEP,PUD
Program ID: 140-40-21-438

Richmond
Medical College of Virginia/Virginia Commonwealth University Program
Medical College of Virginia/Virginia Commonwealth University
Hunter Holmes McGuire VA Medical Center (Richmond)
Medical College of Virginia Hospitals
Program Director:
Shan J Ruddy, MD
MCI/Virginia Commonwealth Univ
PO Box 800663
Richmond, VA 23298-0663
804 371-5151
Length: 3 Year(s) Total Positions: 93 (GYI: 38)
Subspecialties: CD,END,GR,HO,ID,IM,NEP,PCC,RHU
Program ID: 140-40-21-439

Roanoke
University of Virginia (Roanoke-Salem) Program
Carilion Health System
Community Hospital of Roanoke Valley
Roanoke Memorial Hospitals
Veterans Affairs Medical Center (Salem)
Program Director:
Neil K Dorsey, MD
Charles J Schuepner, MD
Roanoke Memorial Hosp
PO Box 1336
Roanoke, VA 24033
703 982-7726
Length: 3 Year(s) Total Positions: 38 (GYI: 16)
Subspecialties: CD,ID,PUD
Program ID: 140-40-21-438

Washington
Seattle
University of Washington Program
University of Washington School of Medicine
Harborview Medical Center
Providence Medical Center
Swedish Medical Center-Seattle
University of Washington Medical Center
Veterans Affairs Medical Center (Seattle)
Program Director:
James F Wallace, MD
University of Washington
Medicine Residency Program 7G-21
1509 NE Pacific St
Seattle, WA 98195
206 543-3249
Length: 3 Year(s) Total Positions: 148 (GYI: 58)
Subspecialties: CCM,CD,END,GR,HEM,ID,IM,NEP,ON,PCC,RHU
Program ID: 140-40-21-438

* Updated information not provided.
Virginia Mason Medical Center Program
Virginia Mason Medical Center
Program Director: Judith L. Bowen, MD
Virginia Mason Medical Center Office of Housestaff Affairs HT-ME
925 5th Ave
Seattle, WA 98101
206 566-6079
Length: 3 Year(s) Total Positions: 22 (GYI: 13)
Program ID: 140-54-12-445

Spokane
Spokane Program
Sacred Heart Medical Center
Deaconess Medical Center
Program Director: George Noonan, MD
W 10th Elkhorn Ave
PO Box 2555
Spokane, WA 99202-2555
509 855-3022
Length: 3 Year(s) Total Positions: 21 (GYI: 7)
Program ID: 140-54-81-436

Tacoma
Madigan Army Medical Center Program
Madigan Army Medical Center
Program Director: Col Eric B Schomaker, MD PhD
Madigan Army Medical Center
Dept of Medicine
Tacoma, WA 98431-5000
256 969-1290
Length: 3 Year(s) Total Positions: 24 (GYI: 8)
Subspecialties: CD,END,HO,IMG,PUD
Program ID: 140-54-15-010

West Virginia
Charleston
West Virginia University (Charleston Division) Program
Charleston Area Medical Center
Program Director: Shawn A Chilling, MD
Dept of Internal Medicine
Robert C Byrd HSC/WVU/Charleston
3100 MacCorkle Ave
Charleston, WV 25304
304 347-1341
Length: 3 Year(s) Total Positions: 30 (GYI: 13)
Program ID: 140-55-11-456

Huntington
Marshall University School of Medicine Program
Marshall University School of Medicine
Cabell Huntington Hospital
St Mary's Hospital
Weinsen Affairs Medical Center (Huntington)
Program Director: Kevin W Yingling, MD
Marshall University School of Medicine
Dept of Internal Medicine
Huntington, WV 25705-9410
304 696-7242
Length: 3 Year(s) Total Positions: 28 (GYI: 12)
Subspecialties: CD,END,ID,IMG,PUD
Program ID: 140-55-31-439

Morgantown
West Virginia University Program
West Virginia University Hospitals
Program Director: Rashida A Khakoo, MD
West Virginia University Hospitals
Dept of Internal Medicine
PO Box 8165
Morgantown, WV 26506-0168
304 283-4121
Length: 3 Year(s) Total Positions: 33 (GYI: 13)
Subspecialties: CD,END,GE,HID,IMG,NEPON,PUC
Program ID: 149-56-11-440

Wheeling
Ohio Valley Medical Center Program
Ohio Valley Medical Center
Program Director: Jeffrey S Shultz, MD
Ohio Valley Medical Center Dept of Internal Medicine
2000 East St
Wheeling, WV 26003
304 234-8157
Length: 3 Year(s) Total Positions: 29 (GYI: 8)
Program ID: 140-65-11-441

Wisconsin
La Crosse
Gundersen Medical Foundation-La Crosse Lutheran Hospital Program
Gundersen Medical Foundation-La Crosse Lutheran Hospital
Program Director: Robert S Witte, MD
Gundersen Medical Foundation
Lutheran Hospital-La Crosse
1836 South Ave
La Crosse, WI 54601-5420
608 781-6661
Length: 3 Year(s) Total Positions: 27 (GYI: 9)
Program ID: 140-56-15-442

Madison
University of Wisconsin Program
University of Wisconsin Hospital and Clinics
William S Middleton Veterans Hospital
Program Director: Bennett S Vogelman, MD
University of Wisconsin Hospital & Clinics
600 Highland Ave
Madison, WI 53792-2464
608 263-7352
Length: 3 Year(s) Total Positions: 72 (GYI: 23)
Subspecialties: CD,END,GE,HID,IMG,NEPON,KHU
Program ID: 140-56-21-443

Marshfield
University of Wisconsin (Marshfield) Program
Marshfield Clinic-St Joseph's Hospital
Program Director: Norman A Debiens, MD
Marshfield Clinic
Dept Internal Medicine 382
1000 N Oak Ave
Marshfield, WI 54449
715 387-5866
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Subspecialties: HNG
Program ID: 140-56-31-444

*Updated information not provided.
Medical Microbiology (Pathology-Anatomic and Clinical)

Connecticut

Hartford

Hartford Hospital Program
Hartford Hospital
Program Director: Richard Quintilli, MD
Hartford Hospital
80 Seymour St
Hartford, CT 06115
203-524-5373
Length: 1 Year(s)
Total Positions: 1
Program ID: 314-08-11-003

Illinois

Chicago

McGaw Medical Center of Northwestern University Program
Northwestern University Medical School
Northwestern Memorial Hospital
Program Director: Lance R Peterson, MD
Microbiology Section
Northwestern Memorial Hospital
250 E Superior Wesley 506
Chicago, IL 60611
312-926-1102
Length: 1 Year(s)
Total Positions: 2
Program ID: 314-16-01-000

Indiana

Indianapolis

Indiana University Medical Center Program
Indiana University Medical Center
Richard L Roudebush Veterans Affairs Medical Center
William N Wulhard Memorial Hospital
Program Director: Stephen D Allen, MD
Indiana University School of Medicine
Div of Clinical Microbiology
500 N University Blvd
Indianapolis, IN 46202-5283
317-274-5557
Length: 1 Year(s)
Total Positions: 2
Program ID: 314-17-21-001

Minnesota

Rochester

Mayo Graduate School of Medicine Program
Mayo Graduate School of Medicine-Mayo Foundation
Program Director: Jon E Rosenblatt, MD
Mayo Graduate School of Medicine Application Processing Ctr
Mayo Graduate School of Medicine
200 First St SW
Rochester, MN 55905
507-284-3050
Length: 1 Year(s)
Total Positions: 1
Program ID: 314-28-21-009

Missouri

St Louis

St Louis University Group of Hospitals Program
St Louis University School of Medicine
Cardinal Glennon Children's Hospital
Veterans Affairs Medical Center (St Louis)
Program Director: Joseph P Lang, MD
St Louis University Hospital
3636 Vista at Grand Blvd
P O Box 15350
St Louis, MO 63110-0530
314-577-8383
Length: 1 Year(s)
Total Positions: 1
Program ID: 314-39-21-007

North Carolina

Chapel Hill

University of North Carolina Hospitals Program
University of North Carolina Hospitals
Program Director: William W McLendon, MD
Dept of Laboratories
Univ of North Carolina Hospitals
101 Manning Dr
Chapel Hill, NC 27514-7600
919-966-2317
Length: 1 Year(s)
Total Positions: 1
Program ID: 314-36-31-005

Durham

Duke University Program
Duke University Medical Center
Program Director: L Barth Reiner, MD
Duke University Medical Center
Depts of Pathology
Box 3938
Durham, NC 27710
919-684-5474
Length: 1 Year(s)
Total Positions: 3
Program ID: 314-36-21-004

Ohio

Cleveland

Cleveland Clinic Foundation Program
Cleveland Clinic Foundation
Program Director: John A Washington, MD
Cleveland Clinic Foundation
9500 Euclid Ave BT12
Dept of Microbiology
Cleveland, OH 44195-5242
216-444-5690
Length: 1 Year(s)
Total Positions: 1
Program ID: 314-38-21-008

* Updated information not provided.
Musculoskeletal Oncology (Orthopaedic Surgery)

Michigan
Detroit
Wayne State University/Detroit Medical Center Program
Wayne State University School of Medicine
Children's Hospital of Michigan
Harper Hospital
Hutzel Hospital
Program Director:
James Raymond Ryan, MD
Hutzel Hospital 1 S
Dept of Orthopaedic Surgery
4707 St Antoine Blvd
Detroit, MI 48201
313 745-6669
Length: 1 Year(s) Total Positions: 3
Program ID: 270-25-21-011

Minnesota
Rochester
Mayo Graduate School of Medicine Program
Mayo Graduate School of Medicine Mayo Foundation
Mayo Clinic (Rochester)
Rochester Methodist Hospital
St Mary's Hospital of Rochester
Program Director:
Douglas J Pritchard, MD
Mayo Graduate School of Medicine
MOSUM Application Processing Center
260 First St SW
Rochester, MN 55905
507 284-3316
Length: 1 Year(s)
Program ID: 270-26-21-004

New York

New York
Memorial Sloan-Kettering Cancer Center Program
Memorial Sloan-Kettering Cancer Center Hospital for Special Surgery
Program Director:
John H Healey, MD
Memorial Sloan Kettering Cancer Center
A-876
1275 York Ave
New York, NY 10021
212 639-7610
Length: 1 Year(s) Total Positions: 2
Program ID: 270-35-21-005

Ohio
Cleveland
Case Western Reserve University Program
University Hospitals of Cleveland
MetroHealth Medical Center
Veterans Affairs Medical Center (Cleveland)
Program Director:
John T Makley, MD
University Hospitals of Cleveland
11100 Euclid Ave
Cleveland, OH 44106
216 844-5903
Length: 1 Year(s) Total Positions: 1
Program ID: 270-35-21-006

Texas
Dallas
University of Texas Southwestern Medical School Program
University of Texas Southwestern Medical School
Children's Medical Center of Dallas
Dallas County Hospital District-Parkland Memorial Hospital
Presbyterian Hospital of Dallas
Program Director:
Gerhard F Maale, MD
8230 Walnut Hill Ln
Ste 514
Dallas, TX 75231
214.691.1700
Length: 1 Year(s) Total Positions: 1
Program ID: 270-48-21-008

* Updated information not provided.*
Neonatal-Perinatal Medicine (Pediatrics)

Alabama

Birmingham

University of Alabama Medical Center Program
University of Alabama Hospital
Children's Hospital of Alabama
Program Director:
Waldemar A Carlo, MD
Regional Newborn Intensive Care Unit
University Health Row NTI B 526
Birmingham, AL 35294
205 934-8600
Length: 2 Year(s) Total Positions: 6
Program ID: 320-01-21-001

Arizona

Tucson

University of Arizona Program
University of Arizona College of Medicine
Tucson Medical Center
University Medical Center
Program Director:
Anthony P Phillips, MD
University of Arizona Health Sciences Center
Dept of Pediatrics
1501 N Campbell Blvd
Tucson, AZ 85724
520 626-6607
Length: 2 Year(s) Total Positions: 1
Program ID: 320-03-21-101

Arkansas

Little Rock

University of Arkansas for Medical Sciences Program*
University of Arkansas College of Medicine
Arkansas Children's Hospital
Program Director:
Bonnie J Taylor, MD
Dept of Pediatrics Arkansas Children's Hospital
800 Marshall St Rm #4-470
Little Rock, AR 72202-3591
501 328-1081
Length: 2 Year(s) Total Positions: 3
Program ID: 320-04-21-101

California

Loma Linda

Loma Linda University Program
Loma Linda University Medical Center
Program Director:
Douglas D Deming, MD
Loma Linda University Medical Center
Dept of Pediatrics
12354 Anderson St
Loma Linda, CA 92354
909 796-7311
Length: 2 Year(s) Total Positions: 3
Program ID: 320-05-31-082

Los Angeles

Cedars Sinai Medical Center Program
Cedars Sinai Medical Center
Program Director:
Jeffrey J Pomerance, MPH
Cedars Sinai Medical Center
8700 Beverly Blvd
Los Angeles, CA 90048
310 856-4434
Length: 2 Year(s) Total Positions: 3
Program ID: 320-06-21-112

Children's Hospital of Los Angeles Program*
Children's Hospital of Los Angeles
Program Director:
Arnold G Plattke, MD
Children's Hospital Los Angeles
Div Neonatology & Ped Pulmonology
4650 Sunset Blvd 460
Los Angeles, CA 90027
213 664-2051
Length: 2 Year(s) Total Positions: 5
Program ID: 320-05-21-103

UCLA Medical Center Program
UCLA School of Medicine
LAC-Diehly View Medical Center
UCLA Medical Center
Program Director:
Cynthia T Barrett, MD
University of California Los Angeles School of Medicine
Pediatrics/Neonatology
MDCC 62-325A
Los Angeles, CA 90095-1752
310 825-7763
Length: 2 Year(s) Total Positions: 6
Program ID: 320-05-31-065

University of Southern California Program
Los Angeles County-USC Medical Center
Program Director:
Manuel Duran, MD
Los Angeles County-USC Medical Center Dept of Pediatrics
Women's & Children's Hospital
Rm L-919 1240 North Mission Rd
Los Angeles, CA 90033
213 225-5463
Length: 2 Year(s) Total Positions: 8
Program ID: 320-05-31-004

Orange

University of California (Irvine) Program*
University of California (Irvine) Medical Center
Long Beach Memorial Medical Center
Program Director:
Houchang D Modanloo, MD
Medical Center Bldg 29A Rm 81
101 The City Drive S
Orange, CA 92666
213 562-3261
Length: 2 Year(s)
Program ID: 320-05-31-114

Sacramento

University of California (Davis) Program
University of California (Davis) Medical Center
Program Director:
Thurman A Merritt, MD
Dept of Pediatrics/Div of Neonatology
UC Davis Medical Center
2616 Stockton Blvd
Sacramento, CA 95817
916 734-5513
Length: 2 Year(s) Total Positions: 4
Program ID: 320-05-31-107

San Diego

University of California (San Diego) Program
University of California (San Diego) Medical Center
Children's Hospital and Health Center
Program Director:
Frank I Mannino, MD
University of California San Diego Medical Center
Dept of Pediatrics/Neonatology
200 W Arbor Dr
San Diego, CA 92103-2774
619 543-3794
Length: 2 Year(s) Total Positions: 7
Program ID: 320-05-01-096

San Francisco

California Pacific Medical Center Program
California Pacific Medical Center
California Pacific Medical Center (California Campus)
Program Director:
Steven L Goldman, MD
California Pacific Medical Center
PO Box 7400
San Francisco, CA 94115
415 750-6052
Length: 2 Year(s) Total Positions: 3
Program ID: 320-05-31-065

University of California (San Francisco) Program*
University of California (San Francisco) School of Medicine
University of California (San Francisco) Medical Center
Program Director:
Joseph A Ritterman, MD
University of California (San Francisco) Dept of Pediatrics
505 U Box 0794
533 Parnassus
San Francisco, CA 94143-0794
415 476-1388
Length: 2 Year(s)
Program ID: 320-05-31-009

* Updated information not provided.
Stanford
Stanford University Program
Stanford University Hospital
Program Director:
David K Stevenson, MD
Stanford University School of Medicine
750 Welch Bld Ste 310
Palo Alto, CA 94304-0196
415 723-5711
Length: 2 Year(s) Total Positions: 7
Program ID: 329-06-21-010

District of Columbia
Washington
George Washington University Program
George Washington University School of Medicine
Children's National Medical Center
Washington, DC 20020
202-835-5555
Length: 2 Year(s) Total Positions: 6
Program ID: 329-18-21-015

Florida
Gainesville
University of Florida Program
University of Florida College of Medicine
Shands Hospital at the University of Florida
Program Director:
Joseph No, MD
University of Florida College of Medicine
Div of Neonatology
PO Box 100316
Gainesville, FL 32610-0316
305 352-3496
Length: 2 Year(s) Total Positions: 6
Program ID: 329-18-21-016

Illinois
Chicago
Cook County Hospital Program
Cook County Hospital
Program Director:
Sema P Pyati, MD
Division of Neonatology
Cook County Children's Hospital
700 S Wood St
Chicago, IL 60612-9085
312 355-6546
Length: 2 Year(s) Total Positions: 8
Program ID: 329-16-21-020

* Updated information not provided.
Accredited Programs in Neonatal-Perinatal Medicine (Pediatrics)

McGaw Medical Center of Northwestern University Program
Northwestern University Medical School
Children's Memorial Medical Center
Brannan Hospital
Northwestern Memorial Hospital
Program Director:
Edward 8 Ogata, MD
Children's Memorial Hospital
Div of Neonatology #45
2300 Children's Plaza
Chicago, IL 60614
312-892-1140
Length: 2 Year(s)  Total Positions: 6
Program ID: 329-16-21-024

University of Chicago Program
Wynler Children's Hospital at the University of Chicago
Program Director:
Kwang-San Lee, MD
Wynler Children's Hospital
5841 S Maryland Ave
MC5969
Chicago, IL 60637-1470
312-795-2120
Length: 2 Year(s)  Total Positions: 6
Program ID: 329-16-11-098

University of Illinois College of Medicine at Chicago Program*
University of Illinois College of Medicine at Chicago
Illinois Masonic Medical Center
University of Illinois Hospital and Clinics
Program Director:
Dharmapuri Vidyasagar, MD
University of Illinois Hospital
840 S Wood St MC 856
Chicago, IL 60612
312-946-4185
Length: 2 Year(s)  Total Positions: 6
Program ID: 329-16-21-022

Maywood
Loyola University Program
Foster G McGaw Hospital-Loyola University of Chicago
Program Director:
Thomas P Myers, MD
Foster G McGaw Hospital
2160 S First Ave
Maywood, IL 60153
708-216-1067
Length: 2 Year(s)  Total Positions: 6
Program ID: 329-16-21-069

Park Ridge
Lutheran General Hospital Program
Lutheran General Hospital
Program Director:
Henry H Mangurian, MD
Lutheran General Hospital
1775 Dempster St
Park Ridge, IL 60068
708-696-6313
Length: 2 Year(s)  Total Positions: 5
Program ID: 329-16-21-070

Indiana
Indianapolis
Indianapolis University Medical Center Program
Indianapolis University Medical Center
William N Wishard Memorial Hospital
Program Director:
Mervin Y Yoder, MD
Section of Neonatal-Perinatal Med
702 Barnhill Dr One Children's Sq
Barnhill Research Room 306
Indianapolis, IN 46202-6210
317-274-4716
Length: 2 Year(s)  Total Positions: 6
Program ID: 329-17-21-023

Iowa
Iowa City
Iowa University Hospitals and Clinics Program
University of Iowa Hospitals and Clinics
Program Director:
Edward F Keill, MD
University of Iowa Hospitals and Clinics
Dept of Pediatrics
200 Hawkins Dr
Iowa City, IA 52242-1060
319-356-4906
Length: 2 Year(s)  Total Positions: 6
Program ID: 329-18-11-097

Kentucky
Lexington
University of Kentucky Medical Center Program
University of Kentucky Medical Center- Albert B Chandler Medical Center
Program Director:
Thomas Pauly, MD
Albert B Chandler Medical Center Dept of Pediatrics
University of Kentucky
Neonatology M3 472
Lexington, KY 40506-0044
606-323-6550
Length: 2 Year(s)  Total Positions: 5
Program ID: 329-20-21-024

Louisville
University of Louisville Program
University of Louisville School of Medicine
Louisville Medical Center
Program Director:
David H Adamson, MD
Dept of Pediatrics
University of Louisville
Louisville, KY 40292
502-852-8825
Length: 2 Year(s)  Total Positions: 8
Program ID: 329-20-21-025

Louisiana
New Orleans
Louisiana State University-Tulane University Program
Louisiana State University School of Medicine
Children's Hospital
Medical Center of Louisiana at New Orleans
Tulane University Hospital and Clinics
Program Director:
David A Clark, MD
Louisiana State University School of Medicine
1542 Tulane Ave
New Orleans, LA 70112
504-588-4421
Length: 2 Year(s)  Total Positions: 5
Program ID: 329-21-21-106

Shreveport
Louisiana State University (Shreveport) Program
Louisiana State University School of Medicine
Medical Education (Neonatal-Perinatal)
1601 Kings Hwy PO Box 39632
Shreveport, LA 71139-3932
318-677-7726
Length: 2 Year(s)  Total Positions: 8
Program ID: 329-21-11-058

Maryland
Baltimore
Johns Hopkins University Program
Johns Hopkins University School of Medicine
Johns Hopkins Bayview Medical Center
Johns Hopkins Hospital
Program Director:
Estelle B Gunda, MD
The Johns Hopkins Hospital
Eudowood Neonatal Pulmonary Div
600 N Wolfe St CMSC 210
Baltimore, MD 21287-9500
410-955-6256
Length: 2 Year(s)  Total Positions: 5
Program ID: 329-23-21-020

University of Maryland Program
University of Maryland Medical System
Mercy Medical Center
Program Director:
Ira H Gewolb, MD
Dept of Pediatrics - UUMS NSWBS
22 S Greene Street
Baltimore, MD 21201
410-328-5874
Length: 2 Year(s)  Total Positions: 2
Program ID: 329-23-21-027

* Updated information not provided.
Bethesda
Walter Reed Army Medical Center Program
USUHS F Edward Herbert School of Medicine
Walter Reed Army Medical Center
Program Director:
C. Cheryl Nadal MD
Uniformed Services University of the Health Sciences
4301 Jones Bridge Rd Dept of Peds
Bethesda, MD 20814-4799
202-268-0131
Length: 2 Year(s) Total Positions: 6
Program ID: 328-10-11-089

Massachusetts
Boston
Boston Perinatal Center Program
New England Medical Center Hospitals
Boston City Hospital
Program Director:
Kevin J Petz MD
New England Medical Center-NEMC #44
760 Washington St
Boston, MA 02111
617-730-7066
Length: 2 Year(s) Total Positions: 8
Program ID: 328-24-21-071

Harvard Medical School Program
Children's Hospital
Beth Israel Hospital
Brigham and Women's Hospital
Program Director:
Morton Bernfield, MD
Joint Program in Neonatology
Children's Hospital
300 Longwood Ave Enders 9
Boston, MA 02115
617-734-6566
Length: 2 Year(s) Total Positions: 17
Program ID: 328-24-21-029

Worcester
University of Massachusetts Medical Center Program*
University of Massachusetts Medical Center
Medical Center of Central Massachusetts
Program Director:
Francis J Bednarz, MD
Medical Center of Central Massachusetts
119 Belmont St
Worcester, MA 01605
508-795-6256
Length: 2 Year(s) Total Positions: 2
Program ID: 328-24-21-029

Michigan
Ann Arbor
University of Michigan Program
University of Michigan Hospitals
Program Director:
Roger G Fanc MD
Newborn Services
5750 Mott Box 0354
1500 E Medical Center Dr
Ann Arbor, MI 48109-0354
313-764-4196
Length: 2 Year(s) Total Positions: 6
Program ID: 328-25-21-030

Detroit
Wayne State University/Detroit Medical Center Program
Wayne State University School of Medicine
Children's Hospital of Michigan
Hutzel Hospital
Program Director:
Sutha Shankaran, MD
Children's Hospital of Michigan
3601 Beaubien Blvd
Detroit, MI 48201
313-765-5536
Length: 2 Year(s) Program ID: 328-25-21-031

East Lansing
Michigan State University Program
Michigan State University College of Human Medicine
Spartan Hospital
Program Director:
J. M. Lerner, MD
Edward W Sparrow Hospital
1215 E Michigan Ave
PO Box 30489
Lansing, MI 48906-7890
517-483-2970
Length: 2 Year(s) Total Positions: 3
Program ID: 328-25-21-032

Minnesota
Minneapolis
University of Minnesota Program
University of Minnesota Medical School
Children's Health Care-St Paul
University of Minnesota Hospital and Clinic
Program Director:
Michael K Georgiades, MD
University of Minnesota Hospital and Clinic
420 Delaware St SE
Box 3001
Minneapolis, MN 55455
612-624-2971
Length: 2 Year(s) Total Positions: 5
Program ID: 328-25-21-033

Mississippi
Jackson
University of Mississippi Medical Center Program
University of Mississippi School of Medicine
University Hospital
Program Director:
Philip G Rhodes, MD
University of Mississippi Medical Center
Div of Newborn Medicine
2500 N State St
Jackson, MS 39216-4006
601-894-5360
Length: 2 Year(s) Total Positions: 6
Program ID: 328-27-21-034

Missouri
Columbia
University of Missouri-Columbia Program
University of Missouri-Columbia School of Medicine
University and Children's Hospital
Program Director:
Elizabeth P James, MD
Missouri University School of Medicine
Dept of Child Health-M758
One Hospital Dr
Columbia, MO 65212
314-882-7610
Length: 2 Year(s) Total Positions: 6
Program ID: 328-25-21-035

Kansas City
University of Missouri at Kansas City Program
University of Missouri-Kansas City School of Medicine
Children's Mercy Hospital
Truman Medical Center-West
Program Director:
William T. Tuong, MD
2101 NW 87th St
Kansas City, MO 64116
816-231-3592
Length: 2 Year(s) Total Positions: 6
Program ID: 328-25-11-091

St Louis
St Louis University Group of Hospitals Program
St Louis University School of Medicine
Cardinal Glennon Children's Hospital
Program Director:
William J Keenan, MD
University of Missouri School of Medicine
Columbia, MO 65212
314-882-7610
Length: 2 Year(s) Total Positions: 5
Program ID: 328-25-21-038

Washington University Program
St Louis Children's Hospital
Program Director:
Peter J Hickey, MD
Div of Newborn Medicine
St Louis Children's Hospital
One Children's Pl
St Louis, MO 63110
314-454-0149
Length: 2 Year(s) Total Positions: 9
Program ID: 328-25-21-037

* Updated information not provided.
 Accredited Programs in Neonatal-Perinatal Medicine (Pediatrics)

New Hampshire

Lebanon

Dartmouth-Hitchcock Medical Center Program
Mary Hitchcock Memorial Hospital
Program Director: Robert A Barnall, MD
Dartmouth-Hitchcock Medical Center
Dept of Pediatrics
H 7445
Lebanon, NH 03766
603 650-6385
Length: 2 Year(s) Total Positions: 1
Program ID: 329-33-21-111

New Jersey

Piscataway

UMDNJ-Robert Wood Johnson Medical School Program
UMDNJ-Robert Wood Johnson Medical School
St Peter's Medical Center
Program Director: Thomas Siegel, MD
St Peter's Medical Center Div of Neonatology
264 Easton Ave
New Brunswick, NJ 08903
732 746-9323
Length: 3 Year(s) Total Positions: 9
Program ID: 329-33-21-092

New Mexico

Albuquerque

University of New Mexico Program*
University of New Mexico School of Medicine
University Hospital
Program Director: LeAnn Papile, MD
University of New Mexico School of Medicine
Dept of Pediatrics
Ambulatory Care Ctr 3 West
Albuquerque, NM 87131-5311
505 272-5951
Length: 2 Year(s) Total Positions: 3
Program ID: 329-33-21-072

New York

Albany

Albany Medical Center Program
Albany Medical Center Hospital
Program Director: Joaquim M Pinheiro, MD
Albany Medical College A-101
Dept of Pediatrics/Neonatal
47 New Scotland Ave
Albany, NY 12208-3479
518 262-5421
Length: 2 Year(s) Total Positions: 4
Program ID: 329-33-21-038

Bronx

Albert Einstein College of Medicine Program
Albert Einstein College of Medicine of Yeshiva University
Bronx Municipal Hospital Center
Montefiore Medical Center-Weiler Hospital
North Central Bronx Hospital
Program Director: Philip Rous, MD PhD
Weiler Hospital
Div of Neonatology
1825 Eastchester Rd Rm 725
Bronx, NY 10461
718 604-4106
Length: 2 Year(s) Total Positions: 9
Program ID: 329-33-21-039

Brooklyn

SUNY Health Science Center at Brooklyn Program
SUNY HSC at Brooklyn College of Medicine
Kings County Hospital Center
Long Island College Hospital
University Hospital SUNY Health Science Center at Brooklyn
Program Director: Leonard Glass, MD
State University of New York Health Science Ctr at Brooklyn
450 Clarkson Ave Box 49
Brooklyn, NY 11205-2088
718 278-3082
Length: 2 Year(s) Total Positions: 6
Program ID: 329-35-21-040

Buffalo

SUNY at Buffalo Graduate Medical-Dental Education Consortium Program*
SUNY at Buffalo Grad Medical-Dental Education Consortium
Children's Hospital of Buffalo
Program Director: Cortinne L Leach, MD PhD
Children's Hospital of Buffalo
219 Bryant St
Buffalo, NY 14222
716 878-7673
Length: 2 Year(s) Total Positions: 3
Program ID: 329-35-21-041

Manhasset

North Shore University Hospital Program
North Shore University Hospital
Program Director: Rita G Harper, MD
Div of Perinatal Medicine
North Shore University Hospital
300 Community Dr
Manhasset, NY 11030
516 563-4665
Length: 2 Year(s) Total Positions: 6
Program ID: 329-33-21-073

New Hyde Park

Albert Einstein College of Medicine at Long Island Jewish Medical Center Program
Long Island Jewish Medical Center
Schneider Children's Hosp (Long Island Jewish Med Ctr)
Program Director: Philip J Lipitz, MD
Schneider Children's Hospital
27-16 76th Ave
New Hyde Park, NY 11042
718 478-3440
Length: 2 Year(s) Total Positions: 6
Program ID: 329-35-21-074

New York

Mount Sinai School of Medicine Program
Mount Sinai School of Medicine
Elmhurst Hospital Center-Mount Sinai Services
Mount Sinai Medical Center
Program Director: Ian R Holtzman, MD
Mount Sinai Medical Center Dept of Pediatrics
One Gustave L Levy Pl
New York, NY 10029-6074
212 241-5446
Length: 2 Year(s) Total Positions: 4
Program ID: 329-35-21-075

New York Hospital/Cornell Medical Center Program
New York Hospital
Program Director: Peter M Auld, MD
The New York Hospital-Cornell Medical Center
Ferrisology
535 E 58th St
New York, NY 10022
212 746-3530
Length: 2 Year(s) Total Positions: 9
Program ID: 329-35-21-042

New York University Medical Center Program
New York University Medical Center
Bellevue Hospital Center
Program Director: Karen D Hendrick-Munoz, MD
New York University Medical Center
550 First Ave
New York, NY 10016
212 346-6425
Length: 2 Year(s) Total Positions: 2
Program ID: 329-35-21-198

Presbyterian Hospital in the City of New York
Presbyterian Hospital in the City of New York
Program Director: K F Schuster, MD
Baby's Hospital Columbia Presbyterian Medical Center
3609 Broadway
New York, NY 10032
212 305-3221
Length: 2 Year(s) Total Positions: 6
Program ID: 329-35-21-076

* Updated information not provided.
Rochester
University of Rochester Program
Strong Memorial Hospital of the University of Rochester
Program Director:
Dale L Phelps, MD
Dept of Pediatrics
954 E Main St Box 651
Rochester, NY 14624
716 276-6844
Length: 2 Year(s)  Total Positions: 7
Program ID: 329-38-21-043

Stony Brook
SUNY at Stony Brook Program
University Hospital-SUNY at Stony Brook
Program Director:
Leonard I Kleinman, MD
Dept of Pediatrics
State University of New York
Hlth Sci Ctr T11
Stony Brook, NY 11794-8111
516 444-7161
Length: 2 Year(s)  Total Positions: 9
Program ID: 329-38-21-098

Syracuse
SUNY Health Science Center at Syracuse Program
University Hospital-SUNY Health Science Center at Syracuse
Crouse-Irving Memorial Hospital
Program Director:
Howard L Weinberger, MD
State University of New York Health Science Ctr at Syracuse
700 E Adams St
Syracuse, NY 13210
315 444-6868
Length: 2 Year(s)  Total Positions: 2
Program ID: 329-38-21-044

Valhalla
New York Medical College at Westchester County Medical Center Program
New York Medical College
Lincoln Medical and Mental Health Center
Metropolitan Hospital Center
Westchester County Medical Center
Program Director:
Harry S Dweck, MD
Westchester County Medical Center
Regional Neonatal Intensive Care Services
Grasslands Rd
Valhalla, NY 10595
914 256-8558
Length: 2 Year(s)  Total Positions: 5
Program ID: 329-38-21-077

North Carolina
Chapel Hill
University of North Carolina Hospitals Program
University of North Carolina Hospitals
Program Director:
Alan D Stiles, MD
University of North Carolina School of Medicine
Dept of Pediatrics CB07506
Div of Neonatal-Perinatal Medicine
Chapel Hill, NC 27599-7220
919 966-5063
Length: 2 Year(s)  Total Positions: 6
Program ID: 329-38-21-044

Durham
Duke University Program
Duke University Medical Center
Program Director:
David T Haraka, MD
Agne Kimberly F Galula, MD
Duke University Medical Center
P.O. Box 3179
Durham, NC 27710
919 684-6024
Length: 2 Year(s)  Total Positions: 6
Program ID: 329-38-21-046

Greenville
East Carolina University Program
East Carolina University School of Medicine
Pitt County Memorial Hospital
Program Director:
Commen P Mathew, MD
East Carolina University
School of Medicine
Dept of Pediatrics
Greenville, NC 27858-4354
919 814-4767
Length: 2 Year(s)  Total Positions: 3
Program ID: 329-38-21-078

Winston-Salem
Bowman Gray School of Medicine Program
North Carolina Baptist Hospital
Program Director:
Stevens M Black, MD
Bowman Gray/North Carolina Baptist Hospital Medical Center
Medical Center Blvd
Winston-Salem, NC 27157
910 716-4653
Length: 2 Year(s)  Total Positions: 3
Program ID: 329-38-11-103

Ohio
Cincinnati
University of Cincinnati Hospital Group Program
Children's Hospital Medical Center
University of Cincinnati Hospital
Program Director:
Reginald C Chang, MD
University of Cincinnati Medical Center Feds
PO Box 070541
Cincinnati, OH 45267-0541
513 558-3643
Length: 2 Year(s)  Total Positions: 11
Program ID: 329-38-21-047

Cleveland
Case Western Reserve University (MetroHealth) Program
MetroHealth Medical Center
Program Director:
John J Moore, MD
MetroHealth Medical Center
2600 MetroHealth Dr
Cleveland, OH 44106-1988
216 699-5804
Length: 2 Year(s)  Total Positions: 6
Program ID: 329-38-21-088

Columbus
Ohio State University Program
Ohio State University Medical Center
Children's Hospital
Program Director:
James Moeke, MD
Education Center
3rd Fl Rm 321
700 Children's Dr
Columbus, OH 43205
614 733-4099
Length: 2 Year(s)  Total Positions: 3
Program ID: 329-38-21-049

* Updated information not provided.
## Accredited Programs in Neonatal-Perinatal Medicine (Pediatrics)

### Oklahoma
#### Oklahoma City
**University of Oklahoma Health Sciences Center Program**
University of Oklahoma College of Medicine-Oklahoma City
Children's Hospital of Oklahoma
Program Director: Punaksha S Venkataraman, MBBS
401 N 4th St, Suite 400
Oklahoma City, OK 73103
405-708-1313
Length: 2 Year(s) Total Positions: 3
Program ID: 029-09-21-070

### Tulsa
**University of Oklahoma College of Medicine-Tulsa Program**
University of Oklahoma College of Medicine-Tulsa
St. Francis Hospital
Program Director: George P Giacola, MD
Neonatal-Perinatal Medicine
St. Francis Hospital
4101 S Yale Ave
Tulsa, OK 74136
918-444-2277
Length: 2 Year(s) Total Positions: 6
Program ID: 029-09-21-080

### Oregon
#### Portland
**Oregon Health Sciences University Program**
Oregon Health Sciences University Hospital
Program Director: Gerda I Bendis, MD
Neonatal-Perinatal Medicine
Oregon Health Sciences University Hospital
220 SW Sam Jackson Park Rd
Portland, OR 97239
503-494-0503
Length: 2 Year(s) Total Positions: 3
Program ID: 029-09-21-081

### Pennsylvania
#### Hershey
**Milton S Hershey Medical Center of Pennsylvania State University Program**
Penn State University Hospital-Milton S Hershey Med Ctr
Program Director: Beth H Marks, MD PhD
Milton S Hershey Medical Center of Pennsylvania State Univ
PO Box 850
500 University Dr
Hershey, PA 17033-8110
717-531-9412
Length: 2 Year(s) Total Positions: 4
Program ID: 029-09-21-050

### Philadelphia
**Albert Einstein Medical Center Program**
Albert Einstein Medical Center
Program Director: Hallam Hart, MD
Div of Neonatology
Albert Einstein Medical Center
5501 Old York Rd
Philadelphia, PA 19141-3996
215-456-6096
Length: 2 Year(s) Total Positions: 3
Program ID: 029-09-21-097

**St Christopher's Hospital for Children Program**
St Christopher's Hospital for Children
Temple University Hospital
Program Director: S David Rabenstein, MD
St Christopher's Hospital for Children
215-456-2022
Length: 2 Year(s) Total Positions: 6
Program ID: 029-09-21-082

**Thomas Jefferson University Program**
Thomas Jefferson University Hospital
The Medical Center of Delaware
Program Director: Alan R Spitzer, MD
Thomas Jefferson University Hospital
1025 Walnut St
Philadelphia, PA 19107
215-555-6223
Length: 2 Year(s) Total Positions: 9
Program ID: 029-09-21-104

**University of Pennsylvania Program**
Children's Hospital of Philadelphia
Hospital of the University of Pennsylvania
Pennsylvania Hospital
Program Director: Robert A Ballard, MD
Children's Hospital of Philadelphia
Div of Neonatology
34th St & Civic Center Blvd
Philadelphia, PA 19104-4499
215-496-1053
Length: 2 Year(s) Total Positions: 9
Program ID: 029-09-21-081

### Puerto Rico
#### San Juan
**University of Puerto Rico Program**
University of Puerto Rico School of Medicine
University Pediatric Hospital
Program Director: Marta Valcarcel, MD
University of Puerto Rico Medical Science Campus
GPO Box 365067
San Juan, PR 00936-5067
787-764-6675
Length: 2 Year(s)
Program ID: 029-09-21-112

### Rhode Island
#### Providence
**Brown University Program**
Women and Infants Hospital of Rhode Island
Program Director: William Oh, MD
Women and Infants Hospital of Rhode Island
101 Dudley St
Providence, RI 02905-2409
401-274-1122
Length: 2 Year(s) Total Positions: 6
Program ID: 029-09-21-063

### South Carolina
#### Charleston
**Medical University of South Carolina Program**
Medical University of South Carolina College of Medicine
MUSC Medical Center
Program Director: David J Annibale, MD
Medical University of South Carolina
171 Ashley Ave
Charleston, SC 29425
803-792-2506
Length: 2 Year(s) Total Positions: 6
Program ID: 029-09-21-100

### Tennessee
#### Memphis
**University of Tennessee Program**
University of Tennessee College of Medicine
Regional Medical Center at Memphis
Program Director: Sheldon B Korones, MD
Newborn Center
533 Jefferson 2nd Fl
Memphis, TN 38163
901-448-5800
Length: 2 Year(s) Total Positions: 6
Program ID: 029-09-21-083

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* Updated information not provided.
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<th>Program Name</th>
<th>Program Director</th>
<th>Length</th>
<th>Total Positions</th>
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<td>Nashville</td>
<td>Vanderbilt University Program</td>
<td>Robert B Cotton, MD</td>
<td>2 years</td>
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<td>Texas</td>
<td>University of Texas Southwestern Medical School Program</td>
<td>Charles &amp; Ronesfeld, MD</td>
<td>2 years</td>
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<td>Salt Lake City</td>
<td>University of Utah Program</td>
<td>J. Ross Milley, MD</td>
<td>2 years</td>
<td>4</td>
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<td>Burlington</td>
<td>Medical Center Hospital of Vermont Program</td>
<td>Jerold F Lacey, MD</td>
<td>2 years</td>
<td>2</td>
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<tr>
<td>Charlottesville</td>
<td>University of Virginia Program</td>
<td>John Katzweiler, MD</td>
<td>2 years</td>
<td>3</td>
</tr>
<tr>
<td>Madison</td>
<td>University of Wisconsin Program</td>
<td>Frank R Greene, MD</td>
<td>2 years</td>
<td>2</td>
</tr>
<tr>
<td>Richmond</td>
<td>Medical College of Virginia/Virginia Commonwealth University Program</td>
<td>Gary R Gutches, MD</td>
<td>2 years</td>
<td>3</td>
</tr>
<tr>
<td>Seattle</td>
<td>University of Washington Program</td>
<td>W Allan Hodge, MD</td>
<td>2 years</td>
<td>2</td>
</tr>
<tr>
<td>Morgantown</td>
<td>West Virginia University Program</td>
<td>Mark L Polak, MD</td>
<td>2 years</td>
<td>2</td>
</tr>
<tr>
<td>West Virginia</td>
<td>University of Wisconsin Program</td>
<td>Frank R Greene, MD</td>
<td>2 years</td>
<td>2</td>
</tr>
</tbody>
</table>
Nephrology (Internal Medicine)

**Alabama**

**Birmingham**

University of Alabama Medical Center Program
University of Alabama Hospital
Program Director:
David G Warnock, MD
Div of Nephrology
THI 647
1900 University Blvd
Birmingham, AL 35294-0007
205 834-3585
Length: 2 Year(s) Total Positions: 16
Program ID: 146-05-1-21-197

**Arizona**

**Tucson**

University of Arizona Program
University of Arizona College of Medicine
University Medical Center
Veterans Affairs Medical Center (Tucson)
Program Director:
Young-I Ha, MD, PhD
Univ of Arizona Dept of Internal Medicine
1501 N Campbell Ave
Tucson, AZ 85724
520 626-6570
Length: 2 Year(s) Total Positions: 2
Program ID: 144-05-11-091

**Arkansas**

**Little Rock**

University of Arkansas for Medical Sciences Program
University of Arkansas College of Medicine
John L McCollum Memorial Veterans Hospital
University Hospital of Arkansas
Program Director:
Sudhir V Shah, MD
University of Arkansas for Medical Sciences
450 W Markham St Ste 501
Little Rock, AR 72205
501 671-2517
Length: 2 Year(s) Total Positions: 4
Program ID: 140-04-21-092

**California**

**Loma Linda**

Loma Linda University Program
Loma Linda University Medical Center
Jerry L Pettis Memorial Veterans Hospital
Program Director:
Paul G St John-Hammond, MD
Loma Linda University Medical Center
11201 Benton Rd (111N)
Loma Linda, CA 92350
714 432-3080
Length: 2 Year(s) Total Positions: 4
Program ID: 146-05-21-109

**Los Angeles**

Cedars-Sinai Medical Center Program
Cedars-Sinai Medical Center
Program Director:
Jacob Green, MD
Cedars-Sinai Medical Center Dept of Nephrology
8700 Beverly Blvd
Los Angeles, CA 90048-1869
310 855-4625
Length: 2 Year(s) Total Positions: 3
Program ID: 148-05-11-093

UCLA Medical Center Program
UCLA School of Medicine
UCLA Medical Center
Veterans Affairs Medical Center (West Los Angeles)
Program Director:
Ira Kurtz, MD
UCLA Sch of Med
Ctr for the Hlth Sci
7-155 Factor
Los Angeles, CA 90024-1706
310 206-6741
Length: 2 Year(s) Total Positions: 2
Program ID: 144-05-11-110

University of Southern California Program*
Los Angeles County-USC Medical Center
St Vincent Medical Center
USC University Hospital
Program Director:
Shaul Massry, MD
University of Southern California Medical Center
1200 N State St
Los Angeles, CA 90033
213 228-7377
Length: 2 Year(s) Program ID: 149-05-21-042

Los Angeles (Sepulveda)

UCLA San Fernando Valley Program
Veterans Affairs Medical Center (Sepulveda)
Cedars-Sinai Medical Center
UCLA Medical Center
Program Director:
David B N Lee, MD
Veterans Administration Medical Center
6111 Plummer St
Sepulveda, CA 91343-3099
818 896-9386
Length: 2 Year(s) Total Positions: 3
Program ID: 149-05-21-111

*Updated information not provided.
Orange
University of California (Irvine) Program
University of California (Irvine) Medical Center
Veterans Affairs Medical Center (Long Beach)
Program Director:
N D Vaziri, MD
Univ of California Irvine Medical Center Dept of Int Med
101 The City Dr
Bldg 63 Rm 81
Orange, CA 92668
714 456-6142
Length: 2 Year(s) Total Positions: 4
Program ID: 148-06-21-125

Pasadena
Southern California Kaiser Permanente Medical Care (Los Angeles) Program
Southern California Kaiser Permanente Medical Group
Kaiser Foundation Hospital (Los Angeles)
Program Director:
Hock H Yeh, MD
Kaiser Foundation Hospital
Dept of Nephrology
4700 Sunset Blvd.
Los Angeles, CA 90027-6682
213 667-7406
Length: 2 Year(s) Total Positions: 2
Program ID: 148-05-13-029

Sacramento
University of California (Davis) Program
University of California (Davis) Medical Center
Program Director:
George A Kaysen, MD PhD
University of California (Davis)
Div of Nephrology
TB 136
Davis, CA 95616
916 530-4010
Length: 2 Year(s) Total Positions: 5
Program ID: 148-08-21-082

San Diego
University of California (San Diego) Program
University of California (San Diego) Medical Center
Naval Medical Center (San Diego)
Veterans Affairs Medical Center (San Diego)
Program Director:
Roland C Skuta, MD
University of California
9000 Gilman Dr
La Jolla, CA 92036-9111
619 534-6885
Length: 2 Year(s) Program ID: 148-05-21-149

San Francisco
University of California (San Francisco) Program*
University of California (San Francisco) School of Medicine
San Francisco General Hospital Medical Center
University of California (San Francisco) Medical Center
Veterans Affairs Medical Center (San Francisco)
Program Director:
Harlan R Ives, MD PhD
University of California Hospitals
Dept of Medicine
Box 0120
San Francisco, CA 94143
415 476-2172
Length: 2 Year(s) Program ID: 148-05-21-127

Stanford
Stanford University Program
Stanford University Hospital
Veterans Affairs Medical Center (Palo Alto)
Program Director:
Rex L Janison, MD
Stanford University Medical Center
Dept of Medicine
300 Pasteur Dr
Stanford, CA 94305-5114
415 725-6248
Length: 2 Year(s) Total Positions: 15
Program ID: 148-05-21-019

Torrance
Los Angeles County-Harbor-UCLA Medical Center Program
Los Angeles County-Harbor-UCLA Medical Center
Program Director:
Joel D Kopple, MD
Los Angeles County-Harbor-UCLA Medical Center
Bin 400 1000 W Caxton St
Torrance, CA 90509
310 533-2910
Length: 2 Year(s)
Program ID: 148-05-11-150

Colorado
Denver
University of Colorado Program
University of Colorado Health Sciences Center
Denver Health and Hospitals
Veterans Affairs Medical Center (Denver)
Program Director:
Stuart L Lina, MD
Univ of Colorado Health Sciences Center Dept of Medicine
2060 E Ninth Ave
Res B-178
Denver, CO 80220
303 438-5802
Length: 2 Year(s) Total Positions: Program ID: 148-07-21-051

Connecticut
Farmington
University of Connecticut Program
University of Connecticut School of Medicine
Univ of Connecticut Health Center/John Dempsey Hospital
Program Director:
Nancy D Adams, MD
Philip R Steinmetz, MD
University of Connecticut Health Center
Dept of Internal Medicine
Div of Nephrology MC-1405
Farmington, CT 06030
203 675-7298
Length: 2 Year(s) Total Positions: 2
Program ID: 148-08-31-001

New Haven
Hospital of St Raphael Program
Hospital of St Raphael
Program Director:
Frederic O Pinkowski, MD
Hospital of St Raphael
Dept of Medicine
1450 Chapel St
New Haven, CT 06511
203 776-5205
Length: 2 Year(s) Total Positions: 2
Program ID: 148-08-31-112

Yale-New Haven Medical Center Program
Yale-New Haven Hospital
Veterans Affairs Medical Center (West Haven)
Program Director:
Peter S Arenson, MD
Yale Univ School of Medicine
Dept of Int Medicine/Nephrology
PO Box 199308
New Haven, CT 06520-8029
203 784-4186
Length: 2 Year(s) Total Positions: 9
Program ID: 148-05-21-020

District of Columbia
Washington
George Washington University Program
George Washington University School of Medicine
George Washington University Hospital
Veterans Affairs Medical Center (Washington DC)
Program Director:
Juan P Roach, MD
George Washington Univ Hospital Dept of Medicine
2150 Pennsylvania Ave NW #4-425
Washington, DC 20037
202 994-4244
Length: 2 Year(s) Total Positions: 4
Program ID: 148-10-21-085

Georgetown University Program*
Georgetown University Hospital
Arlington Hospital
District of Columbia General Hospital
Program Director:
Director Training Program,
Georgetown University Hospital
Dept of Medicine
3800 Reservoir Rd NW
Washington, DC 20007
202 784-3602
Length: 2 Year(s) Total Positions: 5
Program ID: 148-10-21-072

* Updated information not provided.

Graduate Medical Education Directory 505
Accredited Programs in Nephrology (Internal Medicine)

Howard University Program*  
Howard University Hospital  
District of Columbia General Hospital  
Program Director:  
Martin G Dillard, MD  
Howard University Hospital  
Dept of Medicine  
2841 Georgia Ave NW  
Washington, DC 20006  
202 385-1111  
Length: 2 Year(s)  
Total Positions: 2  
Program ID: 146-10-21-074

Walter Reed Army Medical Center Program  
Walter Reed Army Medical Center  
Program Director:  
Paul G Welch, MD  
Dept of Nephrology Serv  
Walter Reed Army Med Ctr  
6625 18th St NW  
Washington, DC 20010  
202 576-1454  
Length: 2 Year(s)  
Total Positions: 4  
Program ID: 146-10-11-113

Washington Hospital Center Program  
Washington Hospital Center  
Program Director:  
Mary Ann Lange, MD  
Washington Hospital Center  
110 Irving St NW #2A06  
Washington, DC 20010  
202 877-6034  
Length: 2 Year(s)  
Total Positions: 2  
Program ID: 146-10-11-114

Florida  
Gainesville  
University of Florida Program  
University of Florida College of Medicine  
Shands Hospital at the University of Florida  
Veterans Affairs Medical Center (Gainesville)  
Program Director:  
C Craig Tisher, MD  
Univ of Florida Div of Nephrology Hypertension  
Box 10024  
Gainesville, FL 32610  
904 292-408  
Length: 2 Year(s)  
Total Positions: 9  
Program ID: 146-11-21-001

Miami  
University of Miami-Jackson Memorial Medical Center Program*  
University of Miami-Jackson Memorial Medical Center  
Veterans Affairs Medical Center (Miami)  
Program Director:  
John Ee Bong Bong, MD  
University of Miami School of Medicine  
PO Box 016900 (N126)  
Miami, FL 33101  
305 647-5251  
Length: 2 Year(s)  
Total Positions: 7  
Program ID: 146-11-21-151

Tampa  
University of South Florida Program  
University of South Florida College of Medicine  
James A Haley Veterans Hospital  
Tampa General Healthcare  
Veterans Affairs Medical Center (Bay Pines)  
Program Director:  
German Ramirez, MD  
University of South Florida College of Medicine  
12061 Bruce B Downs Blvd Box 19  
Tampa, FL 33616-4799  
813 978-6447  
Length: 2 Year(s)  
Total Positions: 2  
Program ID: 146-11-21-002

Georgia  
Atlanta  
Emory University Program  
Emory University School of Medicine  
Emory University Hospital  
Grady Memorial Hospital  
Program Director:  
William E Mitch, MB  
Emory University Hospital  
901 E Clifton Blvd NE Box 19  
Atlanta, GA 30322  
404 777-2555  
Length: 2 Year(s)  
Total Positions: 12  
Program ID: 146-12-21-113

Augusta  
Medical College of Georgia Program  
Medical College of Georgia Hospital and Clinics  
Veterans Affairs Medical Center (Augusta)  
Program Director:  
Laura L Malloy, DO  
Medical College of Georgia  
Section of Nephrology  
BAM-907  
Augusta, GA 30913-3140  
706 721-2861  
Length: 2 Year(s)  
Total Positions: 5  
Program ID: 146-12-21-002

Illinois  
Chicago  
McGaw Medical Center of Northwestern University Program*  
Northwestern University Medical School  
Northwestern Memorial Hospital  
Veterans Affairs Latose Dist Medical Center (Chicago)  
Program Director:  
Daniel C Batte, MD  
Northwestern University Medical School  
300 E Chicago Ave  
Mayo Hall (MC S297)  
Chicago, IL 60611  
312 986-8296  
Length: 2 Year(s)  
Total Positions: 5  
Program ID: 146-18-21-058

Rush-Presbyterian-St Luke's Medical Center Program*  
Rush-Presbyterian-St Luke's Medical Center  
Program Director:  
Edmund J Lewis, MD  
Rush-Presbyterian-St Luke's Medical Center  
1763 W Congress Pkwy  
Chicago, IL 60612  
312 928-0688  
Length: 2 Year(s)  
Total Positions: 4  
Program ID: 146-16-11-110

University of Chicago Program  
University of Chicago Hospitals  
Program Director:  
Fredric L Cole, MD  
University of Chicago Hospitals and Clinics  
5841 S Maryland Ave MC 5300  
Chicago, IL 60637-1470  
312 722-1475  
Length: 2 Year(s)  
Total Positions: 10  
Program ID: 146-16-11-052

University of Illinois College of Medicine at Chicago Program  
University of Illinois College of Medicine at Chicago  
Cook County Hospital  
University of Illinois Hospital and Clinics  
Veterans Affairs Westside Medical Center (Chicago)  
Program Director:  
A L Arruda, MD  
University of Illinois Hospital  
840 S Wood St MC 793  
Chicago, IL 60612  
312 966-6775  
Length: 2 Year(s)  
Total Positions: 6  
Program ID: 146-16-21-117

Maywood  
Loyola University Program  
Foster G McGaw Hospital-Loyola University of Chicago  
Edward J Bluestein Veterans Affairs Hospital  
Program Director:  
Cecelia J Hano, MD  
Dept of Medicine Room 3068  
2160 S First Ave  
Maywood, IL 60153  
708 216-336  
Length: 2 Year(s)  
Total Positions: 7  
Program ID: 146-16-21-003

Indiana  
Indianapolis  
Indiana University Medical Center Program  
Indiana University Medical Center  
Program Director:  
Sharon Moe, MD  
Indiana University Medical Center Dept of Medicine  
Pusler Hall 108 1130 South Dr  
Indianapolis, IN 46202-6116  
317 274-5527  
Length: 2 Year(s)  
Total Positions: 9  
Program ID: 146-17-21-129

Methodist Hospital of Indiana Program  
Methodist Hospital of Indiana  
Program Director:  
William H Dague, MD  
Methodist Professional Center  
1001 N Senate Blvd #665  
Indianapolis, IN 46204  
317 294-1430  
Length: 2 Year(s)  
Total Positions: 1  
Program ID: 146-17-11-004

* Updated information not provided.
Iowa

Iowa City

University of Iowa Hospitals and Clinics Program
University of Iowa Hospitals and Clinics
Program Director: John B Stokes, MD
University of Iowa Hospitals and Clinics
Dept of Internal Medicine
Iowa City, IA 52242-1000
319 356-4409
Length: 2 Year(s) Total Positions: 9
Program ID: 148-18-21-083

Louisiana

New Orleans

Louisiana State University Program
Louisiana State University School of Medicine
Louisiana State University Medical Center
Medical Center of Louisiana at New Orleans-LSU Division
Medical Center of Louisiana University Hospital Campus
Program Director: John D Wallin, MD
LSU Medical Center Dept of Medicine
1542 Tulane Ave SM 524
New Orleans, LA 70112-2822
504 568-8655
Length: 2 Year(s) Total Positions: 3
Program ID: 148-21-21-104

Tulane University Program
Tulane University School of Medicine
Medical Center of Louisiana at New Orleans-Tulane Division
Veterans Affairs Medical Center-Tulane Service (New Orleans)
Program Director: L Lee Hamm, MD
Tulane Medical Center
Section of Nephrology
1430 Tulane Ave
New Orleans, LA 70112
504 588-6346
Length: 2 Year(s) Total Positions: 3
Program ID: 148-21-21-090

Shreveport

Louisiana State University (Shreveport) Program
Louisiana State University Medical Center-Shreveport
Overton Brooks Veterans Affairs Medical Center
Program Director: Jack Wink, MD
Louisiana State University Medical Center
Medical Education Dept (Nephrology)
1501 Kings Hwy PO Box 33932
Shreveport, LA 71130-3393
318 677-7402
Length: 2 Year(s) Total Positions: 4
Program ID: 148-21-21-063

Maryland

Baltimore

Johns Hopkins University Bayview Medical Center Program
Johns Hopkins University School of Medicine
Johns Hopkins Bayview Medical Center
Program Director: David A Specter, MD
Div of Renal Medicine
Johns Hopkins Bayview Med Ctr
4940 Eastern Ave
Baltimore, MD 21224
410 550-0614
Length: 2 Year(s) Total Positions: 3
Program ID: 148-23-11-163

Johns Hopkins University Program*
Johns Hopkins University School of Medicine
Johns Hopkins Hospital
Program Director: Andrew Whelton, MD
The Johns Hopkins University
Dept of Medicine
Ross 958 720 Rutland Ave
Baltimore, MD 21205
410 659-6568
Length: 2 Year(s) Total Positions: 3
Program ID: 148-23-11-059

University of Maryland Program
University of Maryland Medical System
Program Director: Matthew R Weir, MD
University of Maryland Medical System
22 S Greene St
Div of Nephrology Res NSW143
Baltimore, MD 21201
410 288-5723
Length: 2 Year(s) Total Positions: 5
Program ID: 148-23-21-033

Bethesda

National Naval Medical Center (Bethesda) Program
National Naval Medical Center (Bethesda)
USUHS F Edward Herbert School of Medicine
Program Director: Penrose Hirschel, MD
National Naval Medical Center
Dept of Medicine
8801 Wisconsin Ave
Bethesda, MD 20889-5600
301 295-4500
Length: 2 Year(s) Total Positions: 2
Program ID: 148-23-21-147

Massachusetts

Boston

Beth Israel Hospital Program
Beth Israel Hospital
Program Director: Vikas P Sukhatme, MD PhD
Beth Israel Hospital Dept of Medicine
330 Brookline Ave
Boston, MA 02215
617 735-1106
Length: 2 Year(s) Total Positions: 12
Program ID: 148-24-21-004

* Updated information not provided.
Accredited Programs in Nephrology (Internal Medicine)

Boston University Program
Boston University School of Medicine
Boston City Hospital
Boston University Medical Center-University Hospital
Program Director:
David J Saikali, MD
University Hospital Dept of Internal Medicine
88 E Newton St
Boston, MA 02118
617 638-7380
Length: 2 Year(s) Total Positions: 9
Program ID: 148-24-21-130

Brigham and Women's Hospital Program
Brigham and Women's Hospital
Program Director:
Barry M Breuner, MD
Julian L Seifter, MD
Brigham and Women's Hospital Dept of Medicine
76 Francis St
Boston, MA 02115
617 733-8959
Length: 2 Year(s) Total Positions: 20
Program ID: 148-24-21-605

Massachusetts General Hospital Program
Massachusetts General Hospital
Program Director:
Cecil H Craggas, MD
Massachusetts General Hospital
Renal Unit Jacksonville, 855
Boston, MA 02114
617 731-2722
Length: 2 Year(s) Total Positions: 10
Program ID: 148-24-21-606

New England Medical Center Hospitals Program
New England Medical Center Hospitals
Program Director:
Nicholas D Madzian, MD
New England Medical Center Hospitals
755 Washington St Box 172
Boston, MA 02111
617 998-5655
Length: 2 Year(s) Total Positions: 9
Program ID: 148-24-21-606

Worcester
University of Massachusetts Medical Center Program
University of Massachusetts Medical Center
Program Director:
Jeffrey S Stoff, MD
Department of Renal Medicine
University of Massachusetts Medical Center
55 Lake Ave N
Worcester, MA 01655
508 856-3156
Length: 2 Year(s) Total Positions: 2
Program ID: 148-24-21-607

Michigan
Ann Arbor
University of Michigan Program
University of Michigan Hospitals
Veterans Affairs Medical Center (Ann Arbor)
Program Director:
Roger C Wiggins, MD
Univ of Michigan Hospitals 5914 Taurman Center Box 0384
1500 E Medical Center Dr
Ann Arbor, MI 48109-0384
313 853-6645
Length: 2 Year(s) Total Positions: 12
Program ID: 148-25-21-601

Detroit
Henry Ford Hospital Program
Henry Ford Hospital
Program Director:
Robert G Narins, MD
Henry Ford Hospital Dept of Int Med-Nephrology
2795 W Grand Blvd
Detroit, MI 48202
313 876-9405
Length: 2 Year(s) Total Positions: 9
Program ID: 148-25-11-118

St John Hospital and Medical Center Program
St John Hospital and Medical Center
Program Director:
Robert Provenzano, MD
St John Hospital and Medical Center
Dept of Med Ed
22101 Moross Rd
Detroit, MI 48236
313 943-7837
Length: 2 Year(s) Total Positions: 4
Program ID: 148-25-21-174

Wayne State University/Detroit Medical Center Program
Wayne State University School of Medicine
Detroit Receiving Hospital and University Health Center
Harper Hospital
Veterans Affairs Medical Center (Allen Park)
Program Director:
Stephen D Migdal, MD
Harper Hospital
1601 John R Ste 908
Detroit, MI 48201
313 745-7145
Length: 2 Year(s) Total Positions: 6
Program ID: 148-25-21-040

Minnesota
Minneapolis
Hennepin County Medical Center Program
Hennepin County Medical Center
Program Director:
John J Opsahl, MD
Hennepin County Medical Center
Div of Nephrology
701 Park Ave
Minneapolis, MN 55415-1839
612 347-6358
Length: 3 Year(s) Total Positions: 5
Program ID: 148-28-21-087

University of Minnesota Program
University of Minnesota School of Medicine
University of Minnesota Hospital and Clinic
Program Director:
Thomas R Hosenette, MD
Univ of Minnesota Hospital and Clinic Dept of Medicine
Box 76 UMCIC
420 Delaware St SE
Minneapolis, MN 55455
612 343-6977
Length: 2 Year(s) Total Positions: 9
Program ID: 148-26-21-698

Rochester
Mayo Graduate School of Medicine Program
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Rochester)
Rochester Methodist Hospital
St Mary's Hospital of Rochester
Program Director:
Thomas R Schwall, MD
MGSM Application Processing Center
Siebens 5th Fl
Mayo Graduate School of Medicine
Rochester, MN 55905
507 284-3136
Length: 2 Year(s) Total Positions: 9
Program ID: 148-26-21-146

Mississippi
Jackson
University of Mississippi Medical Center Program
University of Mississippi School of Medicine
University Hospital
Program Director:
John D Bower, MD
University of Mississippi Medical Center
2300 N State St
Jackson, MS 39216-4506
601 984-5070
Length: 2 Year(s) Total Positions: 4
Program ID: 148-07-21-082

Missouri
Columbia
University of Missouri-Columbia Program
University of Missouri-Columbia School of Medicine
University and Children's Hospital
Program Director:
Karl D Neish, MD
University of Missouri Health Sciences Center
MA/66 Health Sciences Ctr
One Hospital Dr
Columbia, MO 65212
314 882-7991
Length: 2 Year(s) Total Positions: 6
Program ID: 148-28-21-063

* Updated information not provided.
Kansas City
University of Missouri at Kansas City
Program
University of Missouri-Kansas City School of Medicine
Menorah Medical Center
Truman Medical Center-West
Program Director:
Dwayne Grochowski, MD
University of Missouri-Kansas City
4211 Holmes St
Kansas City, MO 64108
816 566-3797
Length: 2 Year(s)
Program ID: 148-28-21-170

St Louis
Barnes Hospital Group Program
Barnes Hospital
Program Director:
Marc R Hammerman, MD
Barnes Hospital Group
Dept of Internal Medicine
4880 Barner Hospital Plaza
St Louis, MO 63110
314 362-8231
Length: 2 Year(s) Total Positions: 10
Program ID: 148-28-21-131

St Louis University Group of Hospitals
Program
St Louis University School of Medicine
St Louis University Hospital
Veteran Affairs Medical Center (St Louis)
Program Director:
Kevin J Martin, MB Bch
St Louis University School of Medicine
3600 Vista Ave at Grand Blvd
St Louis, MO 63110-0590
314 577-5765
Length: 2 Year(s) Total Positions: 8
Program ID: 148-28-21-076

Washington University Program
Jewish Hospital of St Louis
Program Director:
Keith A Huraska, MD
Jewish Hospital Renal Div
216 Kingshighway
St Louis, MO 63110
314 454-7771
Length: 2 Year(s) Total Positions: 6
Program ID: 148-28-21-132

New Jersey
Camden
UMDNJ-Robert Wood Johnson Medical School (Camden) Program
Cooper Hospital-University Medical Center
Program Director:
Lawrence S Weisberg, MD
UMDNJ-Robert Wood Johnson Medical School
Cooper Hospital-Univ Medical Center
One Cooper Plaza
Camden, NJ 08103
609 757-7544
Length: 2 Year(s) Total Positions: 2
Program ID: 148-33-21-140

Newark
UMDNJ-New Jersey Medical School Program
UMDNJ-New Jersey Medical School
Dept of Veterans Affairs Medical Center (East Orange)
Newark Beth Israel Medical Center
St Barnabas Medical Center
UMDNJ University Hospital
Program Director:
Norman Lasker, MD
UMDNJ-University Hospital
100 Bergen St
Newark, NJ 07107
201 992-4100
Length: 2 Year(s) Total Positions: 5
Program ID: 148-33-21-168

Piscataway
UMDNJ-Robert Wood Johnson Medical School Program
UMDNJ-Robert Wood Johnson Medical School
St Peter's Medical Center
Program Director:
John A Walker, MD
UMDNJRobert Wood Johnson Med School Dept of Medicine
One Robert Wood Johnson Pl CN10
New Brunswick, NJ 08903-0019
908 235-7775
Length: 2 Year(s) Total Positions: 4
Program ID: 148-33-21-021

New Mexico
Albuquerque
University of New Mexico Program
University of New Mexico School of Medicine
University Hospital
Veteran Affairs Medical Center (Albuquerque)
Program Director:
Philip G Zagor, MD
University of New Mexico School of Medicine
Dept of Internal Medicine
2111 Lohss Rd
Albuquerque, NM 87108
505 272-4750
Length: 2 Year(s) Total Positions: 3
Program ID: 148-34-21-110

New York
Albany
Albany Medical Center Program
Albany Medical Center Hospital
Program Director:
M Donald McDaidrick, MD
Albany Medical College A-69
Dept of Nephrology
47 New Scotland Ave
Albany, NY 12208
518 262-5175
Length: 2 Year(s) Total Positions: 2
Program ID: 148-35-31-022

Bronx
Albert Einstein College of Medicine Program
Albert Einstein College of Medicine of Yeshiva University
Bronx Municipal Hospital Center
Montefiore Medical Center-Henry and Lucy Moses Division
Program Director:
Norman Bank, MD
Montefiore Medical Center
Div ofNephrology
111 E 210th St
Bronx, NY 10467
718 200-5442
Length: 2 Year(s) Total Positions: 3
Program ID: 148-35-21-086

Bronx-Lebanon Hospital Center Program
Bronx-Lebanon Hospital Center
Program Director:
Mahendarbady B Dave, MD
Bronx-Lebanon Hospital Center
1650 Grand Concourse
Bronx, NY 10457
718 618-5222
Length: 2 Year(s) Total Positions: 3
Program ID: 148-35-11-162

Brooklyn
Brookdale Hospital Medical Center Program
Brookdale Hospital Medical Center
Program Director:
Jerome O Poler, MD
Brookdale Hospital Medical Center
Linden Blvd at Brookdale Plaza
Brooklyn, NY 11212
718 246-0016
Length: 2 Year(s) Total Positions: 6
Program ID: 148-35-11-134

Long Island College Hospital Program
Long Island College Hospital
Program Director:
Morrell M Avian, MD
Long Island College Hospital Dept of Medicine
Hicks and Atlantic Ave
Brooklyn, NY 11201
718 780-1247
Length: 2 Year(s) Total Positions: 6
Program ID: 148-35-11-023

Maimonides Medical Center Program
Maimonides Medical Center
Program Director:
Heery I Lipner, MD
Maimonides Medical Center
4902 7th Ave
Brooklyn, NY 11219
718 228-7908
Length: 2 Year(s) Total Positions: 2
Program ID: 148-35-11-135

* Updated information not provided.
SUNY Health Science Center at Brooklyn Program
SUNY HSC at Brooklyn College of Medicine
Kings County Hospital Center
University Hospital/SUNY Health Science Center at Brooklyn
Veterans Affairs Medical Center (Brooklyn)
Program Director: Ella A Friedman, MD
SUNY Health Science Center at Brooklyn
Box 52
460 Clarkson Ave
Brooklyn, NY 11203-2666
718-270-1394
Length: 2 Year(s) Total Positions: 10
Program ID: 148-35-21-008

Buffalo
SUNY at Buffalo Graduate Medical-Dental Education Consortium Program
SUNY at Buffalo Grad Medical-Dental Education Consortium
Erie County Medical Center
Veterans Affairs Medical Center (Buffalo)
Program Director: Joseph C Wenato, MD
Erie County Medical Center
462 Grider St
Buffalo, NY 14215
716-899-4883
Length: 2 Year(s) Total Positions: 4
Program ID: 148-35-21-034

East Meadow
SUNY at Stony Brook (East Meadow) Program
Nassau County Medical Center
Program Director: Christina P Caruvenis, MD
Nassau County Medical Center
2201 Hempstead Tpke
East Meadow, NY 11554-5406
516-572-9879
Length: 2 Year(s) Total Positions: 8
Program ID: 148-35-21-077

Flushing
New York Hospital Medical Center of Queens Program*
New York Hospital Medical Center of Queens
Program Director: Chuan Chuyuan, MD
New York Hospital Medical Center of Queens
56-45 Main St
Flushing, NY 11356
718-970-1111
Length: 2 Year(s) Total Positions: 3
Program ID: 148-35-11-978

Manhasset
North Shore University Hospital Program
North Shore University Hospital
Program Director: Barry N Wilke, MD
North Shore University Hospital
Div of Nephrology/Hypertension
300 Community Br
Manhasset, NY 11030-3876
516-682-4848
Length: 2 Year(s) Total Positions: 4
Program ID: 148-35-21-149

Minorea
Winthrop-University Hospital Program
Winthrop-University Hospital
Program Director: John K Maesaka, MD
Winthrop University Hospital
Dept of Nephrology
369 First St
Minorea, NY 11501
516-683-2160
Length: 2 Year(s) Total Positions: 4
Program ID: 148-35-11-064

New Hyde Park
Albert Einstein College of Medicine at Long Island Jewish Medical Center Program
Long Island Jewish Medical Center
Program Director: Pratim C Senghal, MD
270-05 79th Ave
New Hyde Park, NY 11040
718-470-7561
Length: 2 Year(s) Total Positions: 4
Program ID: 148-35-21-129

New York
Albert Einstein College of Medicine at Beth Israel Medical Center Program
Beth Israel Medical Center
Program Director: Nathan W Lennon, MD
Beth Israel Medical Center
10th Fl Bernstein Bldg
10 Nathan D Perlman Pl
New York, NY 10003
212-420-4070
Length: 2 Year(s) Total Positions: 5
Program ID: 148-35-11-055
Harlem Hospital Center Program* Harlem Hospital Center Program
Program Director: Vebrine A Pogue, MD
Harlem Hospital Center
156 Lenox Ave at 135th St
New York, NY 10037
212-998-1440
Length: 2 Year(s) Total Positions: 4
Program ID: 148-35-11-147
Lenox Hill Hospital Program Lenox Hill Hospital Program
Program Director: Michael M Michelson, MD
Lenox Hill Hospital
100 E 77th St
New York, NY 10021-1888
212-434-2656
Length: 2 Year(s) Total Positions: 3
Program ID: 148-35-11-155
Mount Sinai School of Medicine Program Mount Sinai School of Medicine
Mount Sinai Hospital Program
Mount Sinai Medical Center
Veterans Affairs Medical Center (Bronx)
Program Director: Paul E Klotman, MD
Mount Sinai Hospital
One Gustave Levy Place
Box 1248
New York, NY 10029
212-844-5601
Length: 2 Year(s) Total Positions: 9
Program ID: 148-35-31-106

New York Hospital/Cornell Medical Center Program
New York Hospital
Program Director: Manikkan Sathanandham, MD
New York Hospital
525 E 68th St
New York, NY 10021
212-746-4400
Length: 2 Year(s) Total Positions: 8
Program ID: 148-35-21-144

New York University Medical Center Program
New York University Medical Center
Bellevue Hospital Center
Program Director: Jerome Lowenstein, MD
David B Baldwin, MD
Renal Section
550 First Ave
New York, NY 10016
212-263-5665
Total Positions: 8
Program ID: 148-35-21-101

Presbyterian Hospital in the City of New York Program
Presbyterian Hospital in the City of New York
Program Director: Quais Al-Awadi, MD
Presbyterian Hospital in the City of New York
622 W 168th St
New York, NY 10032
212-305-3512
Length: 2 Year(s) Total Positions: 2
Program ID: 148-35-11-079
St Luke's-Roosevelt Hospital Center (St Luke's) Program
St Luke's-Roosevelt Hospital Center
St Luke's-Roosevelt Hospital Center-St Luke's Division
Program Director: Judith A Bernstein, MD
St Luke's Hospital
1111 Amsterdam Ave
New York, NY 10025
212-593-5530
Length: 2 Year(s) Total Positions: 3
Program ID: 148-35-21-008

Rochester
University of Rochester Program
Strong Memorial Hospital of the University of Rochester
Program Director: David A Rushing, MD
Strong Memorial Hospital
Nephrology Unit Box 770
601 Elmwood Ave
Rochester, NY 14642
716-275-3960
Length: 2 Year(s) Total Positions: 4
Program ID: 148-35-11-157

Stony Brook
SUNY at Stony Brook Program
University Hospital-SUNY at Stony Brook
Veternas Affairs Medical Center (Northport)
Program Director: Edward Nord, MD
Health Science Center Dept of Medicine
Div of Nephrology HSC-T15-200
Stony Brook, NY 11794-8132
516-444-2038
Length: 2 Year(s) Total Positions: 4
Program ID: 148-35-21-009

* Updated information not provided.
Syracuse

SUNY Health Science Center at Syracuse Program
University Hospital-SUNY Health Science Center at Syracuse
Veterans Affairs Medical Center (Syracuse)
Program Director:
Steven J Scheiman, MD
Dept of Medicine
SUNY Health Science Center
750 E Adams St
Syracuse, NY 13210
315 464-5290
Length: 2 Year(s)  Total Positions: 2
Program ID: 148-35-21-089

Valhalla

New York Medical College (Metropolitan) Program
New York Medical College
Metropolitan Hospital Center – St Vincent's Medical Center of Richmond
Program Director:
All M Tannenberg, MD
Metropolitan Hospital Center
1901 First Ave
New York, NY 10029
212 423-6401
Length: 2 Year(s)  Total Positions: 4
Program ID: 148-35-21-047

New York Medical College (Our Lady of Mercy) Program*
New York Medical College
Our Lady of Mercy Medical Center
Lincoln Medical and Mental Health Center
Program Director:
Jim Yoo, MD
Our Lady of Mercy Medical Center
400 E 233rd St
Bronx, NY 10466
212 930-9000
Length: 2 Year(s)
Program ID: 148-35-21-035

New York Medical College at St Vincent's Hospital and Medical Center of New York Program
New York Medical College
St Vincent's Hospital and Medical Center of New York
Program Director:
Godfrey Burns, MD
St Vincent's Hospital and Medical Center of New York
153 W 11th St
New York, NY 10011
212 604-8322
Length: 2 Year(s)  Total Positions: 2
Program ID: 148-35-31-024

New York Medical College Program
New York Medical College
Weinstein Center Medical Center
Program Director:
Alvin I Goodman, MD
New York Medical College
Dept of Medicine
Valhalla, NY 10595
914 285-7701
Length: 2 Year(s)  Total Positions: 4
Program ID: 148-35-11-010

North Carolina

Chapel Hill

University of North Carolina Hospitals Program
University of North Carolina Hospitals
Program Director:
Ronald J Falk, MD
Univ of North Carolina School of Medicine
3034 Old Clinic Bldg 225H
CB# 7155
Chapel Hill, NC 27590
919 966-5651
Length: 2 Year(s)  Total Positions: 4
Program ID: 148-35-21-121

Durham

Duke University Program
Duke University Medical Center
Program Director:
William E Yarger, MD
Duke University Medical Center
Box 3041
Durham, NC 27710
919 668-2116
Length: 2 Year(s)  Total Positions: 9
Program ID: 148-35-21-122

Winston-Salem

Bowman Gray School of Medicine Program
North Carolina Baptist Hospital
Program Director:
Vardaman M Bucklew, MD
Bowman Gray School of Medicine/NC Baptist Hospital
Medical Center Blvd
Winston-Salem, NC 27157-1053
336 716-2062
Length: 2 Year(s)  Total Positions: 2
Program ID: 148-35-21-011

Ohio

Cincinnati

University of Cincinnati Hospital Group Program
University of Cincinnati Hospital
Veterans Affairs Medical Center (Cincinnati)
Program Director:
John H Galla, MD
University of Cincinnati
PO Box 670585
Cincinnati, OH 45267-0585
513 558-5471
Length: 2 Year(s)  Total Positions: 5
Program ID: 148-35-21-046

Cleveland

Case Western Reserve University Program
University Hospitals of Cleveland
MetroHealth Medical Center
Veterans Affairs Medical Center (Cleveland)
Program Director:
Michael J Dunn, MD
University Hospitals of Cleveland
11100 Euclid Ave
Lakeline Bldg 5th Flr 5124-C Benjamin
Cleveland, OH 44106-5048
216 444-3123
Length: 2 Year(s)  Total Positions: 10
Program ID: 148-35-21-137

Cleveland Clinic Foundation/St Vincent Charity Hospital Program
Cleveland Clinic Foundation
Program Director:
Joseph V Nally, MD
Cleveland Clinical Foundation
Dept of Hypertension/Nephrology
9600 Euclid Ave 7722
Cleveland, OH 44195-5342
216 444-5680
Length: 2 Year(s)  Total Positions: 8
Program ID: 148-35-12-159

Columbus

Ohio State University Program
Ohio State University Medical Center
Program Director:
N Stanley Nakamura Jr, MD
Ohio State University Hospital Dept of Medicine
664 Uptain Dr Rm 210
Columbus, OH 43210-1229
614 292-4697
Length: 2 Year(s)  Total Positions: 7
Program ID: 148-35-11-060

Toledo

Medical College of Ohio at Toledo Program*
Medical College of Ohio Hospital
Program Director:
Jayanti Venkatadassan, MD
Medical College of Ohio at Toledo
CS #1008
Dept of Medicine
Toledo, OH 43699-0008
419 381-3724
Length: 2 Year(s)  Total Positions: 2
Program ID: 148-35-21-012

Oklahoma

Oklahoma City

University of Oklahoma Health Sciences Center Program
University of Oklahoma College of Medicine-Oklahoma City
University Hospital and Clinics
Veterans Affairs Medical Center (Oklahoma City)
Program Director:
Kai Lau, MD
Chief Nephrology Section
Veterans Administration Medical Ctr
PO Box 26901 VAs 711-G
Oklahoma City, OK 73104
405 270-0501
Length: 2 Year(s)  Total Positions: 3
Program ID: 148-35-21-067

* Updated information not provided.
Accredited Programs in Nephrology (Internal Medicine)

Oregon

Portland

Oregon Health Sciences University Program*

Program Director:
William M Bennett, MD
Oregon Health Sciences University
Dept of Medicine L403
Portland, OR 97201
503-370-8490
Length: 2 Year(s)
Program ID: 148-40-31-140

Pennsylvania

Hershey

Milton S Hershey Medical Center of Pennsylvania State University Program

Program Director:
Joseph Y Cheung, MD PhD
Milton S Hershey Medical Center Division of Nephrology PO Box 650
Hershey, PA 17033-0650
717-531-9166
Length: 2 Year(s) Total Positions: 1
Program ID: 148-41-11-010

Philadelphia

Albert Einstein Medical Center Program

Program Director:
Rajiv M Bajaj, MD
Albert Einstein Medical Center
Krafton Division of Nephrology
5601 Old York Rd
Philadelphia, PA 19141-3088
215-456-2570
Length: 2 Year(s) Total Positions: 4
Program ID: 148-41-11-046

MCPH/Athonmann University Hospital Program

Athonmann University Hospital Program Director:
Charles D Swartz, MD
Athonmann University Broad & Vine St
4104 NCB MS-437
Philadelphia, PA 19102
215-762-8047
Length: 2 Year(s) Total Positions: 4
Program ID: 148-41-21-048

MCPH/Medical College of Pennsylvania Hospital Program

Medical College of Pennsylvania Hospital Program Director:
Sandra P Levion, MD
Med Coll of Pennsylvania Hosp
3000 Henry Ave
Philadelphia, PA 19129
215-443-6898
Length: 2 Year(s) Total Positions: 3
Program ID: 148-41-21-102

Puerto Rico

San Juan

University of Puerto Rico Program

Program Director:
Rafael Burgos-Calderon, MD
University Hospital Puerto Rico Medical Center
Box 5067
San Juan, PR 00936
787-754-3651
Length: 2 Year(s)
Program ID: 148-42-21-104

Veterans Affairs Medical and Regional Office Center Program

Program Director:
Hector S Cordero, MD
VA Medical Center
One Veterans Plaza
San Juan, PR 00927-5600
887-754-6000
Length: 2 Year(s) Total Positions: 2
Program ID: 148-42-31-103

Rhode Island

Providence

Brown University Program

Program Director:
Lance D Dworski, MD
Rhode Island Hospital
593 Eddy St
Providence, RI 02903
401-444-6944
Length: 2 Year(s) Total Positions: 5
Program ID: 148-43-11-105

South Carolina

Charleston

Medical University of South Carolina Program

Medical University of South Carolina College of Medicine MUSC Medical Center Veterans Affairs Medical Center (Charleston)

Program Director:
David W Ploth, MD
Medical University of South Carolina
171 Ashley Ave
Charleston, SC 29425-2225
803-792-4123
Length: 2 Year(s) Total Positions: 8
Program ID: 148-45-21-156

* Updated information not provided.
Tennessee

Memphis
University of Tennessee Program*
University of Tennessee College of Medicine
Regional Medical Center at Memphis
Veterans Affairs Medical Center (Memphis)
Program Director:
Fred B. Hatch, MD
University of Tennessee at Memphis
951 Court Ave Rm D649
Memphis, TN 38163
901 528-6764
Length: 2 Year(s)  Total Positions: 4
Program ID: 148-47-21-123

Nashville
Vanderbilt University Program
Vanderbilt University Medical Center
Veterans Affairs Medical Center (Nashville)
Program Director:
Harry Jacobson, MD
Vanderbilt University
21st & Garland S-3223 MCN
Nashville, TN 37232-3372
615 343-6105
Length: 2 Year(s)  Total Positions: 18
Program ID: 148-47-31-014

Texas

Dallas
University of Texas Southwestern Medical School Program
University of Texas Southwestern Medical School
Dallas County Hospital District-Packard Memorial Hospital
Veterans Affairs Medical Center (Dallas)
Program Director:
Robert J Alpern, MD
University of Texas Southwestern Medical Center
5323 Harry Hines Blvd
Dallas, TX 75235-8856
214 648-2764
Length: 2 Year(s)  Total Positions: 10
Program ID: 148-48-21-084

Fort Sam Houston
Brooke Army Medical Center Program
Brooke Army Medical Center
Program Director:
Maj Steven F. Gouge, MD
Brooke Army Medical Center
Nephrology Service
Dept of Medicine
Fort Sam Houston, TX 78234-6200
512 221-4665
Length: 2 Year(s)  Total Positions: 4
Program ID: 148-48-12-124

Galveston
University of Texas Medical Branch Hospitals Program
University of Texas Medical Branch Hospitals
Program Director:
Robert L. Safirstein, MD
University of Texas Medical Branch
4.300 John Sealy Annex
301 University Blvd
Galveston, TX 77555-0562
409 772-1611
Length: 2 Year(s)  Total Positions: 4
Program ID: 148-48-21-049

Houston
Baylor College of Medicine Program
Baylor College of Medicine
Harris County Hospital District-Ben Taub General Hospital
Methodist Hospital
Veterans Affairs Medical Center (Houston)
Program Director:
Wadi N Suki, MD
Baylor College of Medicine-Methodist Hospital
6550 Fannin Steet #1377
Houston, TX 77030
713 796-3976
Length: 2 Year(s)  Total Positions: 7
Program ID: 148-48-21-070

University of Texas at Houston Program
University of Texas Medical School at Houston
Hermann Hospital
Lyndon B Johnson General Hospital
University of Texas M D Anderson Cancer Center
Program Director:
Thomas D Dubose Jr, MD
Univ of Texas Medical School Dept of Medicine
PO Box 28708
Houston, TX 77225
713 792-5425
Length: 2 Year(s)  Total Positions: 6
Program ID: 148-48-31-015

Lackland AFB
Wilford Hall USAF Medical Center Program
Wilford Hall USAF Medical Center (SG)
Program Director:
Deborah N Burgess, MD
Wilford Hall Medical Center/PSMR
50th Medical Wing (AFMC)
2200 Bergquist Dr Ste 1
Lackland AFB, TX 78236-6300
210 670-7348
Length: 2 Year(s)  Total Positions: 4
Program ID: 148-48-12-690

Lubbock
Texas Tech University (Lubbock) Program
Texas Tech University Health Sciences Center at Lubbock
University Medical Center
Program Director:
Donald A Wesson, MD
Texas Tech University Health Sciences Center
Dept of Medicine
3601 Fourth St
Lubbock, TX 79430
806 743-3130
Length: 2 Year(s)  Total Positions: 3
Program ID: 148-4821-081

San Antonio
University of Texas Health Science Center at San Antonio Program
University of Texas Medical School at San Antonio
Audie L Murphy Memorial Veterans Hospital (San Antonio)
University Hospital-South Texas Medical Center
Program Director:
Hanna E Abaad, MD
University of Texas Health Science Center
Div of Nephrology
7700 Floyd Curl Dr
San Antonio, TX 78284-7882
210 667-4700
Length: 2 Year(s)  Total Positions: 6
Program ID: 148-48-21-097

Utah
Salt Lake City
University of Utah Program
University of Utah Medical Center
Veterans Affairs Medical Center (Salt Lake City)
Program Director:
Wayne A Border, MD
University of Utah Medical Center
50 N Medical Dr
Salt Lake City, UT 84132
801 681-6700
Length: 2 Year(s)  Program ID: 148-49-21-141

Vermont
Burlington
Medical Center Hospital of Vermont Program
Medical Center Hospital of Vermont
Program Director:
J F John Germain, MD
University of Vermont College of Medicine
Dept of Medicine
D306 Giffen Bldg
Burlington, VT 05406
802 656-2834
Length: 2 Year(s)  Total Positions: 2
Program ID: 148-52-21-142

Virginia
Charlottesville
University of Virginia Program
University of Virginia Medical Center
Program Director:
Warren K Bolton, MD
Div of Nephrology
Box 133
University of Virginia
Charlottesville, VA 22908
804 982-5125
Length: 2 Year(s)  Total Positions: 4
Program ID: 148-51-21-016

* Updated information not provided.

Graduate Medical Education Directory 513
Portsmouth
Naval Medical Center (Portsmouth)
Program
Naval Medical Center (Portsmouth)
Program Director:
David J Coanito, MD
Naval Hosp (Portsmouth)
Portsmouth, VA 23708
804 389-5451
Length: 2 Year(s)  Total Positions: 1
Program ID: 148-61-11-071

Wisconsin
Madison
University of Wisconsin Program
University of Wisconsin Hospital and Clinics
William S Middleton Veterans Hospital
Program Director:
Richard E Rieselbach, MD
University of Wisconsin Hospitals and Clinics
600 Highland Ave Bn H4/5/18
Madison, WI 53792-0140
608 263-2778
Length: 2 Year(s)  Total Positions: 3
Program ID: 148-66-21-106

Richmond
Medical College of Virginia/Virginia Commonwealth University Program*
Medical College of Virginia/Virginia Commonwealth University
Medical College of Virginia Hospitals
Program Director:
Anton C Schoolworth, MD
MCN/Virginia Commonwealth Univ
PO Box 989560
Richmond, VA 23229-0160
804 789-9962
Length: 2 Year(s)  Total Positions: 9
Program ID: 148-61-21-017

Milwaukee
Medical College of Wisconsin Program
Medical College of Wisconsin Affiliated Hospitals Inc
Clement J Zablocki Veterans Affairs Medical Center
Froedtert Memorial Lutheran Hospital
John L Doege Hospital
Program Director:
Virginia J Savin, MD
Medical College of Wisconsin
Froedtert Memorial Lutheran Hosp
9200 W Wisconsin Ave
Milwaukee, WI 53226
414 258-3070
Length: 2 Year(s)  Total Positions: 4
Program ID: 148-66-31-030

Washington
Seattle
University of Washington Program
University of Washington School of Medicine
Harborview Medical Center
University of Washington Medical Center
Veterans Affairs Medical Center (Seattle)
Program Director:
William G Cooze, MD
University of Washington Medical Center
1950 NE Pacific St IB 1265 HSB
Seattle, WA 98195
206 543-3792
Length: 2 Year(s)  Total Positions: 3
Program ID: 148-64-21-072

Arkansas
Little Rock
University of Arkansas for Medical Sciences Program*
University of Arkansas College of Medicine
Arkansas Children’s Hospital
John L McClean Memorial Veterans Hospital
University Hospital of Arkansas
Program Director:
Osama Al-Mety, MD
Univ of Arkansas for Medical Sciences
4301 W Markham Slot 507
Little Rock, AR 72205-7189
501 686-5270
Length: 5 Year(s)  Total Positions: 5  (GYI: 0)
Program ID: 1004-04-21-005

* Updated information not provided.
California

Loma Linda

Loma Linda University Program
Loma Linda University Medical Center
Jerry L. Pettis Memorial Veterans Hospital
Program Director:
Shokisi Yamada, MD
Loma Linda University School of Medicine
Div of Neurosurgery Rm 2539
Loma Linda, CA 92554
909 786-7311
Length: 5 Year(s) Total Positions: 6 (GYT: 1)
Program ID: 160-06-11490

Los Angeles

UCLA Medical Center Program*
UCLA School of Medicine
Los Angeles County-Harbor-UCLA Medical Center
UCLA Medical Center
Veterans Affairs Medical Center (West Los Angeles)
Program Director:
Donald F. Becker, MD
UCLA School of Medicine
Div of Neurosurgery
74-140 CHS
Los Angeles, CA 90024-0991
213 825-5111
Length: 5 Year(s) Total Positions: 2 (GYT: 2)
Program ID: 160-06-21-010

University of Southern California Program
Los Angeles County-USC Medical Center
Children's Hospital of Los Angeles
USC University Hospital
Program Director:
Martin H. Weiss, MD
Los Angeles County-USC Medical Center
1200 N State St
Ste 5046
Los Angeles, CA 90033
213 226-7421
Length: 5 Year(s) Total Positions: 14 (GYT: 2)
Program ID: 160-05-21-009

Orange

University of California (Irvine) Program
University of California (Irvine) Medical Center
Veterans Affairs Medical Center (Long Beach)
Program Director:
John H. Neal, MD
UCI Medical Center
Neurosurgery B1 81
101 The City Dr
Orange, CA 92868
714 456-6392
Length: 5 Year(s) Total Positions: 6 (GYT: 0)
Program ID: 160-05-21-007

Sacramento

University of California (Davis) Program
University of California (Davis) Medical Center
Kaiser Foundation Hospital (Sacramento)
Program Director:
Franklin C Wagner Jr, MD
University of California School of Medicine
2516 Stockton Blvd
Room 554
Sacramento, CA 95817
916 734-3636
Length: 5 Year(s) Total Positions: 7 (GYT: 1)
Program ID: 160-04-11-006

San Diego

University of California (San Diego) Program
University of California (San Diego) Medical Center
Children's Hospital and Health Center
Kaiser Foundation Hospital (San Diego)
Program Director:
Lawrence R Marshall, MD
UCSD Med Ctr
Div of Neurosurgery
520 W Arbor Dr
San Diego, CA 92103-8863
619 543-5650
Length: 5 Year(s) Total Positions: 8 (GYT: 1)
Program ID: 160-06-21-190

San Francisco

University of California (San Francisco) Program
University of California (San Francisco) School of Medicine
Mount Zion Medical Center of the University of California
San Francisco General Hospital Medical Center
University of California (San Francisco) Medical Center
Veterans Affairs Medical Center (San Francisco)
Program Director:
Philip H Gutin, MD
Dept of Neurosurgery
Univ of California San Francisco
505 Parnassus Box 0112
San Francisco, CA 94143-0112
415 646-1065
Length: 5 Year(s) Total Positions: 14 (GYT: 1)
Program ID: 160-05-21-011

Stanford

Stanford University Program
Stanford University Hospital
Veterans Affairs Medical Center (Palo Alto)
Program Director:
Lawrence B Shuer, MD
Stanford Univ Med Ctr Dept of Neurosurgery
300 Pasteur Dr
Edwards Bldg R155
Stanford, CA 94305-5327
415 723-4093
Length: 5 Year(s) Total Positions: 6 (GYT: 0)
Program ID: 160-05-21-012

Colorado

Denver

University of Colorado Program
University of Colorado Health Sciences Center
Children's Hospital Denver Health and Hospitals
Veterans Affairs Medical Center (Denver)
Program Director:
Glenn Kindt, MD
University of Colorado Health Sciences Center
Neurosurgery
4200 E Ninth Ave Box C308
Denver, CO 80262
303 270-7577
Length: 5 Year(s) Total Positions: 5 (GYT: 1)
Program ID: 100-07-21-162

Connecticut

Farmington

University of Connecticut Program
University of Connecticut School of Medicine
Univ of Connecticut Health Center/John Dempsey Hospital
Program Director:
Richard H Simon, MD
University of Connecticut Health Center
Div of Neurosurgery
Bldg 20 Rm 6
Farmington, CT 06030-2855
203 679-3620
Length: 5 Year(s) Total Positions: 3 (GYT: 0)
Program ID: 160-06-21-014

New Haven

Yale-New Haven Medical Center Program
Yale-New Haven Hospital
Veterans Affairs Medical Center (West Haven)
Program Director:
Debia J Spencer, MD
Yale University School of Medicine
330 Cedar St
PO Box 200808
New Haven, CT 06520-8038
203 785-2811
Length: 5 Year(s) Total Positions: 6 (GYT: 0)
Program ID: 100-06-21-015

District of Columbia

Washington

George Washington University Program
George Washington University School of Medicine
Children's National Medical Center
George Washington University Hospital
Washington Hospital Center
Program Director:
Lalligan N Sekhar, MD
Dept of Neurosurgery
2150 Pennsylvania Ave NW
Washington, DC 20037
202 344-4035
Length: 5 Year(s) Total Positions: 13 (GYT: 6)
Program ID: 100-10-21-017

Georgetown University Program
Georgetown University Hospital
Children's National Medical Center
Program Director:
Robert L Martuza, MD
Georgetown University Medical Center
Dept of Neurosurgery
3800 Reservoir Rd NW 1FHC
Washington, DC 20007
202 355-4072
Length: 5 Year(s) Total Positions: 5 (GYT: 0)
Program ID: 100-10-21-016

* Updated information not provided.
Accredited Programs in Neurological Surgery

Walter Reed Army Medical Center Program
Walter Reed Army Medical Center
Children’s Hospital of Philadelphia
Program Director: Thomas E. Carter, MD
Neurosurgery Service
Walter Reed Army Medical Center
6825 16th St NW
Washington, DC 20307-5001
202-767-2431
Length: 5 Year(s) Total Positions: 6 (GYT: 0)
Program ID: 160-10-11-001

Florida

Gainesville

University of Florida Program
University of Florida College of Medicine
Shands Hospital at the University of Florida
Veterans Affairs Medical Center (Gainesville)
Program Director: Albert L. Kehan Jr, MD
University of Florida Health Center
PO Box 100295
Gainesville, FL 32610-0295
904 392-3081
Length: 5 Year(s) Total Positions: 12 (GYT: 0)
Program ID: 160-11-21-018

Miami

University of Miami-Jackson Memorial Medical Center Program
University of Miami-Jackson Memorial Medical Center
Mount Sinai Medical Center of Greater Miami
Veterans Affairs Medical Center (Miami)
Program Director: Robert L. Rosomoff, MD
University of Miami School of Medicine
1150 NW 11th Ave
Miami, FL 33136
305 547-6846
Length: 5 Year(s) Total Positions: 14 (GYT: 0)
Program ID: 160-11-21-019

Tampa

University of South Florida Program
University of South Florida College of Medicine
All Children’s Hospital
H Lee Moffitt Cancer Center
James A Haley Veterans Hospital
Tampa General Healthcare
Program Director: David W Cahill, MD
Univ of South Florida Coll of Med
Div of Neurological Surgery
4 Columbia Dr Ste 720
Tampa, FL 33606
613 253-5001
Length: 5 Year(s) Total Positions: 5 (GYT: 0)
Program ID: 160-11-51-109

Georgia

Atlanta

Emory University Program
Emory University School of Medicine
Crawford Long Hospital of Emory University
Emory University Hospital
Grady Memorial Hospital
Harrington Hospital for Children
Program Director: George T Tindall, MD
Emory Clinic
1527 Clifton Rd
Atlanta, GA 30322
404 420-8395
Length: 5 Year(s) Total Positions: 12 (GYT: 2)
Program ID: 160-12-21-020

Augusta

Medical College of Georgia Program
Medical College of Georgia Hospital and Clinics
Veterans Affairs Medical Center (Augusta)
Program Director: Dennis E McDonnell, MD
Medical College of Georgia
Section of Neurosurgery
Augusta, GA 30912-0109
706 721-3071
Length: 5 Year(s) Total Positions: 6 (GYT: 1)
Program ID: 160-12-21-021

Illinois

Chicago

McGaw Medical Center of Northwestern University Program*
Northwestern University Medical School
Children’s Memorial Medical Center
Barnes Hospital
Northwestern Memorial Hospital
Veterans Affairs Lakeside Medical Center (Chicago)
Program Director: Robert R Levy, MD
Northwestern University Dept of Surgery
250 E Superior St
Chicago, IL 60611
312 955-8143
Length: 5 Year(s) Total Positions: 6 (GYT: 1)
Program ID: 160-12-21-022

Rush-Presbyterian-St Luke’s Medical Center Program*
Rush-Presbyterian-St Luke’s Medical Center
Program Director: Walter W Whisler, MD PhD
Rush-Presbyterian-St Luke’s Med Ctr Jlake Bldg
1653 W Congress Pkwy
S1 441 Jlake
Chicago, IL 60612
312 942-5600
Length: 5 Year(s) Total Positions: 6 (GYT: 1)
Program ID: 160-11-11-023

University of Chicago Program
University of Chicago Hospitals
Program Director: Bryce Weir, MD
University of Chicago Medical Center
5841 S Maryland
MC3826
Chicago, IL 60637-1470
312 922-9086
Length: 5 Year(s) Total Positions: 6 (GYT: 0)
Program ID: 160-11-11-024

University of Illinois College of Medicine at Chicago Program
University of Illinois College of Medicine at Chicago
Michael Reese Hospital and Medical Center
University of Illinois Hospital and Clinics
Program Director: James J Atman, MD PhD
University of Illinois
4th Fl North CPI MC 709
912 S Wood St
Chicago, IL 60612
312 996-4712
Length: 5 Year(s) Total Positions: 6 (GYT: 0)
Program ID: 160-12-21-025

Maywood

Loyola University Program
Foster G McGraw Hospital-Loyola University of Chicago
Cook County Hospital
Edward J Ryan Jr Veterans Affairs Hospital
Program Director: O Howard Reichman, MD
Foster G McGraw Hospital
2100 S First Ave
Maywood, IL 60153
708 218-5120
Length: 5 Year(s) Total Positions: 11 (GYT: 0)
Program ID: 160-12-21-026

Peoria

University of Illinois College of Medicine at Peoria Program
University of Illinois College of Medicine at Peoria
Methodist Medical Center of Illinois
St Francis Medical Center
Program Director: Patrick W Elwood, MD
University of Illinois College of Medicine
PO Box: 5249
Dept of Neurosurgery
Peoria, IL 61656-1649
309 680-2642
Length: 5 Year(s) Total Positions: 6 (GYT: 1)
Program ID: 160-12-21-069

Indiana

Indiana University Program
Indiana University Medical Center
Methodist Hospital of Indiana
Richard L Roudebush Veterans Affairs Medical Center
William N Wishard Memorial Hospital
Program Director: Paul B Nelson, MD
Indiana Univ Med Ctr/Emerson Hall
545 Barnhill Dr Ste 139
Indianapolis, IN 46202-6324
317 274-5720
Length: 5 Year(s) Total Positions: 8 (GYT: 0)
Program ID: 160-17-11-027

* Updated information not provided.
Iowa

Iowa City

University of Iowa Hospitals and Clinics Program
University of Iowa Hospitals and Clinics
Veterans Affairs Medical Center (Iowa City)
Program Director: John C. VanGilder, MD
University of Iowa Hospitals and Clinics
Dept of Neurosurgery
203 Hawkins Dr
Iowa City, IA 52242-1009
319 356-7772
Length: 5 Year(s) Total Positions: 12 (GYT: 2)
Program ID: 160-18-11-028

Kansas

Kansas City

University of Kansas Medical Center Program
University of Kansas School of Medicine
Children's Mercy Hospital
University of Kansas Medical Center
Veterans Affairs Medical Center (Kansas City)
Program Director: Paul L. O'Boynick, MD
University of Kansas Medical Center
39th & Rainbow Blvd
Kansas City, KS 66160-7395
913 586-4117
Length: 5 Year(s) Total Positions: 5 (GYT: 0)
Program ID: 160-19-21-029

Kentucky

Lexington

University of Kentucky Medical Center Program
University Hospital- Albert B Chandler Medical Center
Veterans Affairs Medical Center (Lexington)
Program Director: Byron Young, MD
University of Kentucky Medical Center
Dept of Neurosurgery MN 208
Lexington, KY 40536-0284
606 323-5664
Length: 5 Year(s) Total Positions: 9 (GYT: 2)
Program ID: 160-20-21-030

Louisiana

New Orleans

Louisiana State University Program
Louisiana State University School of Medicine
Alton Ochsner Medical Foundation
Medical Center of Louisiana at New Orleans-LSU Division
Program Director: David G Kline, MD
Louisiana State Univ Medical Center Dept of Neurosurgery
1542 Tulane Ave
New Orleans, LA 70112-2822
504 668-6120
Length: 5 Year(s) Total Positions: 5 (GYT: 0)
Program ID: 160-21-21-032

Tulane University Program
Tulane University School of Medicine
Children's Hospital
Medical Center of Louisiana at New Orleans-Tulane Division
Tulane University Hospital and Clinics
Veterans Affairs Medical Center-Tulane Service (New Orleans)
Program Director: Donald E Richardson, MD
Tulane University Medical Center/Dept of Medicine
1-50 Tulane Ave
New Orleans, LA 70112-3596
504 888-5656
Length: 5 Year(s) Total Positions: 5 (GYT: 0)
Program ID: 160-21-21-033

Maryland

Baltimore

Johns Hopkins University Program
Johns Hopkins University School of Medicine
Johns Hopkins Bayview Medical Center
Johns Hopkins Hospital
Program Director: Doulain M. Long, MD PhD
Johns Hopkins Hospital
600 N Wolfe St Meyer 7-109
Baltimore, MD 21287-7709
410 955-2152
Length: 5 Year(s) Total Positions: 12 (GYT: 0)
Program ID: 160-23-21-034

University of Maryland Program*
University of Maryland Medical System
Veterans Affairs Medical Center (Baltimore)
Program Director: Howard Eisenberg, MD
University of Maryland Hospital
Div of Neurological Surgery
22 S Greene St
Baltimore, MD 21201
301 398-3614
Length: 5 Year(s) Total Positions: 8 (GYT: 0)
Program ID: 160-23-21-035

Bethesda

National Naval Medical Center (Bethesda) Program*
National Naval Medical Center (Bethesda)
Children’s National Medical Center
NH Warren Grant Magnuson Clinical Center
Program Director: Morris W Pulliam, MD
National Naval Medical Center
Dept of Neurosurgery
9801 Wisconsin Ave
Bethesda, MD 20890-5000
301 265-4420
Length: 5 Year(s) Total Positions: 6 (GYT: 1)
Program ID: 160-23-21-036

Massachusetts

Boston

Children's Hospital/Brigham and Women's Hospital Program*
Children’s Hospital
Brigham and Women’s Hospital
Program Director: Peter M Black, MD PhD
Children’s Hospital
Dept of Neurosurgery
300 Longwood Ave
Boston, MA 02115
617 732-6056
Length: 5 Year(s) Total Positions: 6 (GYT: 0)
Program ID: 160-24-21-037

Massachusetts General Hospital Program
Massachusetts General Hospital
Program Director: Nicholas T Zervas, MD
Massachusetts General Hospital
Fruit St
Boston, MA 02114-5090
617 726-8861
Length: 5 Year(s) Total Positions: 12 (GYT: 0)
Program ID: 160-24-21-038

Tufts University Program
New England Medical Center Hospitals
Program Director: William A Shucart, MD
New England Medical Center
750 Washington St Box 179
Boston, MA 02111
617 968-5888
Length: 5 Year(s) Total Positions: 5 (GYT: 1)
Program ID: 160-24-21-039

Worcester

University of Massachusetts Medical Center Program*
University of Massachusetts Medical School
Children's Hospital
St Vincent Hospital
University of Massachusetts Medical Center
Program Director: Harold A Wilkinson, MD PhD
University of Massachusetts Medical Center
55 Lake Ave N
Worcester, MA 01655
508 856-3964
Length: 5 Year(s) Total Positions: 7 (GYT: 1)
Program ID: 160-24-21-105

* Updated information not provided.
Michigan

Ann Arbor

University of Michigan Program
University of Michigan Hospitals
Program Director:
Julian T Hing
University of Michigan Hospital
Department of Neurosurgery
500 E Medical Center Dr
Ann Arbor, MI 48109-0338
313-763-9516
Length: 5 Year(s) Total Positions: 14 (GYT: 2)
Program ID: 160-25-21-033

Detroit

Henry Ford Hospital Program
Henry Ford Hospital
Program Director:
Mark L. Roebuck, MD
1499 W Grand Blvd
Neurological Surgery
Detroit, MI 48202
313-876-1340
Length: 5 Year(s) Total Positions: 12 (GYT: 2)
Program ID: 160-25-11-040

Wayne State University/Detroit Medical Center Program
Wayne State University School of Medicine
Children's Hospital of Michigan
Detroit Children's Hospital and University Health Center
Harper Hospital
Program Director:
Pernando C. Diaz, MD
4201 St Antoine St
Detroit, MI 48201
313-765-4661
Length: 5 Year(s) Total Positions: 5 (GYT: 1)
Program ID: 160-25-21-041

Minnesota

Minneapolis

University of Minnesota Program
University of Minnesota Medical School
Hennepin County Medical Center
University of Minnesota Hospital and Clinic
Veterans Affairs Medical Center (Minneapolis)
Program Director:
Robert C. Heros, MD
Box 8080 Minnesota
420 Delaware St SE
Minneapolis, MN 55455-0800
612-624-6566
Length: 5 Year(s) Total Positions: 12 (GYT: 0)
Program ID: 160-26-21-042

Rochester

Mayo Graduate School of Medicine Program
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Rochester)
St Mary's Hospital of Rochester
Program Director:
David W. Morgan, MD
MOSIM Application Processing Center
200 1st St SW
Rochester, MN 55905
507-284-1274
Length: 6 Year(s) Total Positions: 12 (GYT: 3)
Program ID: 160-26-21-043

Mississippi

Jackson

University of Mississippi Medical Center Program
University of Mississippi School of Medicine
University Hospital
Veterans Affairs Medical Center (Jackson)
Program Director:
Andrew D. Parent, MD
University of Mississippi Medical Center
2500 N State St
Jackson, MS 39216
601-884-7292
Length: 5 Year(s) Total Positions: 5 (GYT: 1)
Program ID: 160-27-31-206

Missouri

Columbia

University of Missouri-Columbia Program
University of Missouri-Columbia School of Medicine
Boone Hospital Center
Harry S Truman Memorial Veterans Hospital
University and Children's Hospital
Program Director:
John J. Oro, MD
University of Missouri Health Science Center
One Hospital Dr NS21
Columbia, MO 65212
314-882-4908
Length: 6 Year(s) Total Positions: 5 (GYT: 0)
Program ID: 160-26-21-045

St Louis

St Louis University Group of Hospitals Program
St Louis University School of Medicine
Cardinal Glennon Children's Hospital
St Louis University Hospital
Program Director:
Kenneth B. Smith Jr, MD
St Louis University Hospital Div of Neurosurgery
3635 Vista Ave at Grand Blvd
P0 Box 13250
St Louis, MO 63110-0320
314-577-8376
Length: 5 Year(s) Total Positions: 6 (GYT: 1)
Program ID: 160-26-21-047

Washington University Program*
Barnes Hospital
St Louis Children's Hospital
Program Director:
Ralph C. Dacey Jr, MD
Att. Kevin Birek
Grad Med Ed/Washington Univ of Med
One Barnes Hospital Plaza
St Louis, MO 63110
314-268-3617
Length: 5 Year(s) Total Positions: 8 (GYT: 0)
Program ID: 160-28-11-040

Nebraska

Omaha

University of Nebraska Program
University of Nebraska Medical Center
Children's Memorial Hospital
Methodist Hospital
Program Director:
Lyle L. Leibrock, MD
University of Nebraska Medical Center
Section of Neurosurgery
1000 S 42nd St
Omaha, NE 68198-2085
402-559-4189
Length: 5 Year(s) Total Positions: 5 (GYT: 1)
Program ID: 160-30-21-111

New Hampshire

Lebanon

Dartmouth-Hitchcock Medical Center Program
Mary Hitchcock Memorial Hospital
Program Director:
Richard D. Saunders, MD
Dartmouth-Hitchcock Medical Center
Section of Neurosurgery
One Medical Center Dr
Lebanon, NH 03756-6001
603-650-8730
Length: 5 Year(s) Total Positions: 6 (GYT: 1)
Program ID: 160-33-21-048

New Mexico

Albuquerque

University of New Mexico Program*
University of New Mexico School of Medicine
Lovelace Medical Center
University Hospital
Program Director:
Edward C. Bowne, MD
University of New Mexico School of Medicine
Dept of Neurosurgery
Albuquerque, NM 87131
505 272-3401
Length: 5 Year(s) Total Positions: 5 (GYT: 1)
Program ID: 160-34-21-176

* Updated information not provided.
New York

Albany
Albany Medical Center Program
Albany Medical Center Hospital
Program Director:
A John Popp, MD
Albany Medical Center
Dept. of Neurosurgery A-61
New Scotland Ave
Albany, NY 12208
518-262-5088
Length: 5 Year(s) Total Positions: 5 (GYT: 0)
Program ID: 160-35-21-049

Bronx

Albert Einstein College of Medicine Program
Albert Einstein College of Medicine of Yeshiva University
Bronx Municipal Hospital Center
Montefiore Medical Center and Albert Einstein College of Medicine
Program Director:
W Jost Michelson, MD
Montefiore Med Ctr/Albert Einstein Coll of Med
Dept. of Neurological Surgery
111 E 210th St
Bronx, NY 10467-3440
718-923-7400
Length: 5 Year(s) Total Positions: 8 (GYT: 0)
Program ID: 160-35-21-041

Brooklyn

SUNY Health Science Center at Brooklyn Program
SUNY HSC at Brooklyn College of Medicine
Kings County Hospital Center
University Hospital-SUNY Health Science Center at Brooklyn
Program Director:
Thomas H Milhorat, MD
SUNY-8th St Ctr at Brooklyn
450 Clarkson Ave Box 1198
Brooklyn, NY 11208
718-270-2111
Length: 5 Year(s) Total Positions: 6 (GYT: 0)
Program ID: 160-35-21-006

Buffalo

SUNY at Buffalo Graduate Medical-Dental Education Consortium Program
SUNY at Buffalo Grad Medical-Dental Education Consortium
Buffalo General Hospital
Children's Hospital of Buffalo
Erie County Medical Center
Millard Fillmore Hospitals
Program Director:
L N Hopkins III, MD
363 Elmwood Ave
Three Gates Circle
Buffalo, NY 14209
716-898-3100
Length: 5 Year(s) Total Positions: 11 (GYT: 3)
Program ID: 160-35-21-050

New York

Mount Sinai School of Medicine Program
Mount Sinai School of Medicine
Elmhurst Hospital Center-Mount Sinai Services
Mount Sinai Medical Center
Program Director:
Kalmox D Post, MD
Mount Sinai Hosp/Dpt of Neurosurgery
Box 1138
One Gustave Levy Pl
New York, NY 10029-6574
212-241-0680
Length: 5 Year(s) Total Positions: 11 (GYT: 0)
Program ID: 160-35-21-063

New York Hospital/Cornell Medical Center Program
New York Hospital
Hospital for Special Surgery
Memorial Sloan-Kettering Cancer Center
Program Director:
Russell H Patterson Jr, MD
New York Hospital
525 E 83rd St
New York, NY 10021
212-746-3571
Length: 5 Year(s) Total Positions: 5 (GYT: 2)
Program ID: 160-35-21-052

New York University Medical Center Program
New York University Medical Center
Bellevue Hospital Center
Veterans Affairs Medical Center (Manhattan)
Program Director:
Patrick J Kelly, MD
New York University Medical Center
Dept. of Neurosurgery
550 First Ave
New York, NY 10016
212-263-6414
Length: 5 Year(s) Total Positions: 12 (GYT: 0)
Program ID: 160-35-21-054

Presbyterian Hospital in the City of New York Program
Presbyterian Hospital in the City of New York
Program Director:
Benjamin M Stein, MD
Neurological Service
715 W 168 St
New York, NY 10032
212-968-5563
Length: 5 Year(s) Total Positions: 11 (GYT: 0)
Program ID: 160-35-11-055

Rockefeller University Program
Rockefeller University Program
Strong Memorial Hospital of the University of Rochester
Program Director:
Shige H Okawara, MD
University of Rochester Medical Center
Box 670 600 Elmwood Ave
Rochester, NY 14642-0670
716-255-9160
Length: 5 Year(s) Total Positions: 7 (GYT: 1)
Program ID: 160-35-11-067

Syracuse

SUNY Health Science Center at Syracuse Program
University Hospital-SUNY Health Science Center at Syracuse
Gross-Irving Memorial Hospital
Veterans Affairs Medical Center (Syracuse)
Program Director:
Charles J Hodge, MD
Dept. of Neurosurgery
Health Science Center at Syracuse
790 E Adams St
Syracuse, NY 13210
315-464-4470
Length: 5 Year(s) Total Positions: 11 (GYT: 0)
Program ID: 160-35-21-058

Valhalla

New York Medical College at Westchester County Medical Center Program
New York Medical College
St. Vincent's Hospital and Medical Center of New York
Westchester County Medical Center
Program Director:
Samuel S Kasoff, MD
New York Medical College
Munger Pavilion 3rd Fl
Valhalla, NY 10595
914-285-8982
Length: 5 Year(s) Total Positions: 6 (GYT: 0)
Program ID: 160-35-21-108

North Carolina

Chapel Hill
University of North Carolina Hospitals Program
University of North Carolina Hospitals
Program Director:
Steven K Goldenman, MD
University of North Carolina Hospitals
Div. of Neurosurgery
148 Burnett-Womack Bldg CB#7060
Chapel Hill, NC 27599-7060
919-966-1374
Length: 5 Year(s) Total Positions: 6 (GYT: 0)
Program ID: 160-35-11-059

Durham

Duke University Program
Duke University Medical Center
Duke Regional Hospital
Veterans Affairs Medical Center (Durham)
Program Director:
Robert H Wilkins, MD
Duke University Medical Center
Box 8587
Durham, NC 27710
919-684-3371
Length: 5 Year(s) Total Positions: 10 (GYT: 0)
Program ID: 160-35-21-060

* Updated information not provided.

Graduate Medical Education Directory 519
Winston-Salem
Bowman Gray School of Medicine
Program
North Carolina Baptist Hospital
Program Director: David L. Kelly Jr., MD
Bowman Gray School of Medicine
Dept of Neurosurgery
Medical Center Blvd
Winston-Salem, NC 27157-0029
910 716-4038
Length: 5 Year(s) Total Positions: 6 (GYT: 1)
Program ID: 160-34-11-061

Ohio
Cincinnati
University of Cincinnati Hospital Group Program
Program
University of Cincinnati Hospital
Good Samaritan Hospital
Program Director: John M. Siew Jr., MD
University of Cincinnati
PO Box 707615
251 Bethesda Ave
Cincinnati, OH 45267-0515
513 558-5587
Length: 5 Year(s) Total Positions: 13 (GYT: 2)
Program ID: 160-35-21-064

Cleveland
Case Western Reserve University Program
Program
University Hospitals of Cleveland-MetroHealth Medical Center—Veterans Affairs Medical Center (Cleveland)
Program Director: Robert A. Bacheanu, MD
Case Western Reserve University Hospital
11100 Euclid Ave
Cleveland, OH 44106
216 544-5747
Length: 5 Year(s) Total Positions: 13 (GYT: 0)
Program ID: 160-35-21-065

Cleveland Clinic Foundation Program
Cleveland Clinic Foundation
Program Director: Joseph F. Hahn, MD
The Cleveland Clinic
9500 Euclid Ave T393
Dept of Neurological Surgery
Cleveland, OH 44195-6242
216 444-5690
Length: 5 Year(s) Total Positions: 13 (GYT: 2)
Program ID: 160-35-22-066

Columbus
Ohio State University Program
Ohio State University Medical Center—Children's Hospital—Riverside Methodist Hospitals
Program Director: Michael E. Nisen, MD PhD
Ohio State University Hospital
316 Me亥 Hall
1664 Upland Dr
Columbus, OH 43210-1260
614 293-9714
Length: 5 Year(s) Total Positions: 14 (GYT: 2)
Program ID: 160-35-21-067

* Updated information not provided.

Oklahoma
Oklahoma City
University of Oklahoma Health Sciences Center Program
University of Oklahoma College of Medicine-Oklahoma City
Children's Hospital of Oklahoma
University Hospital and Clinics—Veterans Affairs Medical Center (Oklahoma City)
Program Director: L. Philip Carter, MD
Dept of Neurosurgery
PO Box 26901, 42P200
Oklahoma City, OK 73190
405 271-4912
Length: 5 Year(s) Total Positions: 6 (GYT: 1)
Program ID: 160-34-11-068

Oregon
Portland
Oregon Health Sciences University Program
Oregon Health Sciences University Hospital—Veterans Affairs Medical Center (Portland)
Program Director: Kim J. Burchiel, MD
Div of Neurosurgery L-472
2161 SW Sam Jackson Park Rd
Portland, OR 97201-3088
503 494-9070
Length: 5 Year(s) Total Positions: 7 (GYT: 0)
Program ID: 160-40-21-070

Pennsylvania
Hershey
Milton S Hershey Medical Center of Pennsylvania State University Program
Penn State University Hospital-Milton S Hershey Med Ctr
Program Director: Stephen K. Powers, MD
Milton S Hershey Medical Center
Div of Neurological Surgery
PO Box 850
Hershey, PA 17033-0850
717 531-8907
Length: 5 Year(s) Total Positions: 5 (GYT: 1)
Program ID: 160-41-21-116

Philadelphia
MCPH/Thomas Jefferson University Hospital Program
Hahnemann University Hospital—Cooper Hospital—University Medical Center—New York University Medical Center
Program Director: Somnath N. Nair, MD
Hahnemann University Hospital
Div of Neurosurgery MS 407
Broad & Vine
Philadelphia, PA 19102-1192
215 746-8072
Length: 5 Year(s) Total Positions: 5 (GYT: 0)
Program ID: 160-41-21-072

Temple University Program
Temple University Hospital—St Christopher's Hospital for Children
Program Director: Paul M. Lin, MD
Temple University Hospital
3401 N Broad St
Philadelphia, PA 19140
215 221-4047
Length: 5 Year(s) Total Positions: 1 (GYT: 0)
Program ID: 160-41-21-073

Thomas Jefferson University Program
Thomas Jefferson University Hospital—Pennsylvania Hospital—Wills Eye Hospital
Program Director: William A Buchheit, MD
Thomas Jefferson University Hospital
1115 Chestnut St
14th Fl
Philadelphia, PA 19107-4302
215 956-6744
Length: 5 Year(s) Total Positions: 10 (GYT: 3)
Program ID: 160-41-21-074

University of Pennsylvania Program
Hospital of the University of Pennsylvania—Children's Hospital of Philadelphia—Veterans Affairs Medical Center (Philadelphia)
Program Director: Eugene S. Tamm, MD
Hospital of the University of Pennsylvania
3400 Spruce St
6th Fl Silverstein
Philadelphia, PA 19104-4283
215 662-3483
Length: 5 Year(s) Total Positions: 14 (GYT: 2)
Program ID: 160-41-21-075

Pittsburgh
Allegheny General Hospital/Medical College of Pennsylvania Program
Allegheny General Hospital—Medical College of Pennsylvania
Program Director: Jack E. Willeber, MD
Dept of Neurosurgery
Allegheny General Hospital
300 E North Ave
Pittsburgh, PA 15212
412 269-6200
Length: 5 Year(s) Total Positions: 5 (GYT: 0)
Program ID: 160-41-21-116

University Health Center of Pittsburgh Program
University Health Center of Pittsburgh—Children's Hospital of Pittsburgh—Mercyhurst University Hospital (UPMC)
Veterans Affairs Medical Center (Pittsburgh)
Program Director: Peter J. Jannetta, MD
Dept of Neurosurgery
Presbyterian University Hospital—UPMC
200 Lothrop St Ste B-400
Pittsburgh, PA 15213
412 647-0988
Length: 5 Year(s) Total Positions: 19 (GYT: 3)
Program ID: 160-41-31-076

Graduate Medical Education Directory
520
Puerto Rico
San Juan
University of Puerto Rico Program
University of Puerto Rico School of Medicine
San Juan (City Hospital)
University Hospital
University Pediatric Hospital
Veterans Affairs Medical Center (San Juan)
Program Director:
Nathan R. Robinson, MD
University Hospital
Dept. of Neurosurgery
GPO Box 5067
San Juan, PR 00906
206-766-8276
Length: 6 Year(s)  Total Positions: 6
Program ID: 160-42-21-103

Rhode Island
Providence
Brown University Program
Rhode Island Hospital
Program Director:
Mel H. Epstein, MD
Brown University Program in Neurosurgery
563 Eddy St.
Providence, RI 02903
401 444-879
Length: 6 Year(s)  Total Positions: 6 (GYT: 0)
Program ID: 160-42-21-103

South Carolina
Charleston
Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
MUSC Medical Center
Program Director:
Phanor P. Pinto Jr., MD PhD
Medical University of South Carolina
517 Ashley Ave
Charleston, SC 29425-2272
843-879-2453
Length: 6 Year(s)  Total Positions: 6 (GYT: 1)
Program ID: 160-45-11-1079

Tennessee
Memphis
University of Tennessee Program
University of Tennessee College of Medicine
Baptist Memorial Hospital
Medicaid Hospital-Central Unit
Regional Medical Center at Memphis
Veterans Affairs Medical Center (Memphis)
Program Director:
James T. Robertson, MD
Dept. of Neurosurgery
587 Monroe Ave #427
Memphis, TN 38103
901 448-6854
Length: 6 Year(s)  Total Positions: 19 (GYT: 5)
Program ID: 160-47-21-080

Nashville
Vanderbilt University Program*
Vanderbilt University Medical Center
St Thomas Hospital
Veterans Affairs Medical Center (Nashville)
Program Director:
George Allen, MD PhD
Vanderbilt University Medical Center
T4224 Med Ctr N
Nashville, TN 37232-2380
615 222-7417
Length: 6 Year(s)  Total Positions: 12 (GYT: 0)
Program ID: 160-47-21-081

Texas
Dallas
University of Texas Southwestern Medical School Program
University of Texas Southwestern Medical School
Children’s Medical Center of Dallas
Dallas County Hospital District-Parkland Memorial Hospital
St Paul Medical Center
Veterans Affairs Medical Center (Dallas)
Zale-Lipshy University Hospital
Program Director:
Duke Samson, MD
University of Texas Southwestern Medical Center
Dept. of Neurosurgery
5333 Harry Hines Blvd
Dallas, TX 75390-855
214 648-5770
Length: 5 Year(s)  Total Positions: 10 (GYT: 0)
Program ID: 160-48-21-082

Galveston
University of Texas Medical Branch Hospitals Program
University of Texas Medical Branch Hospitals
Program Director:
Haring J W Kautz, MD PhD
University of Texas Medical Branch
Div of Neurosurgery E17
301 University Blvd
Galveston, TX 77555-0517
409 772-1500
Length: 5 Year(s)  Total Positions: 6 (GYT: 1)
Program ID: 160-48-21-083

Houston
Baylor College of Medicine Program
Baylor College of Medicine
Harris County Hospital District-Ben Taub General Hospital
Methodist Hospital
Veterans Affairs Medical Center (Houston)
Program Director:
Robert G Grossman, MD
Dept. of Neurosurgery
Baylor College of Medicine
One Baylor Plaza
Houston, TX 77030
713 798-4666
Length: 5 Year(s)  Total Positions: 15 (GYT: 0)
Program ID: 160-48-21-084

San Antonio
University of Texas Health Science Center at San Antonio Program
University of Texas School of Medicine at San Antonio
Audie L. Murphy Memorial Veterans Hospital (San Antonio)
University Hospital-South Texas Medical Center
Program Director:
Jan L. Story, MD
University of Texas Health Science Center
2700 Floyd Curl Dr
San Antonio, TX 78284-7843
210 656-5065
Length: 5 Year(s)  Total Positions: 6 (GYT: 0)
Program ID: 160-48-21-085

Utah
Salt Lake City
University of Utah Program
University of Utah Medical Center
Primary Children’s Medical Center
Veterans Affairs Medical Center (Salt Lake City)
Program Director:
Peter Heibrunn, MD
University of Utah Hospital
50 N Medical Dr
Salt Lake City, UT 84132
801 581-9008
Length: 5 Year(s)  Total Positions: 12 (GYT: 0)
Program ID: 160-49-81-086

Vermont
Burlington
Medical Center Hospital of Vermont Program
Medical Center Hospital of Vermont
Program Director:
Curtiss E. Gross, MD
Div of Neurosurgery
One S Prospect St
Burlington, VT 05401
802 660-4598
Length: 5 Year(s)  Total Positions: 7 (GYT: 1)
Program ID: 160-50-21-101

Virginia
Charlottesville
University of Virginia Program
University of Virginia Medical Center
Program Director:
John A. Jane, MD PhD
University of Virginia Health Science Center
Box 212
Charlottesville, VA 22908
804 982-2303
Length: 5 Year(s)  Total Positions: 12 (GYT: 2)
Program ID: 160-51-21-088

* Updated information not provided.

Graduate Medical Education Directory
Richmond

Medical College of Virginia/Virginia Commonwealth University Program*
Medical College of Virginia/Virginia Commonwealth University
Hunter Holmes McGuire VA Medical Center (Richmond)
Medical College of Virginia Hospitals
Program Director:
Harold P. Young, MD
MC/Virginia Commonwealth Univ
PO Box 80051
Richmond, VA 23298-0511
804 788-9165
Length: 5 Year(s) Total Positions: 10 (GYT: 0)
Program ID: 180-01-21-089

Milwaukee

Medical College of Wisconsin Program
Medical College of Wisconsin Affiliated Hospitals Inc.
Children’s Hospital of Wisconsin
Clement J Zablocki Veterans Affairs Medical Center
 Froedtert Memorial Lutheran Hospital
John J. Doyne Hospital
Program Director:
Sanford J. Larson, MD PhD
MCW Clinic at Froedtert Dept of Neurosurgery
2020 W Wisconsin Ave
Milwaukee, WI 53226
414 445-5497
Length: 5 Year(s) Total Positions: 7 (GYT: 1)
Program ID: 180-03-21-003

Washington

Seattle

University of Washington Program
University of Washington School of Medicine
Children’s Hospital and Medical Center
Harborview Medical Center
University of Washington Medical Center
Veterans Affairs Medical Center (Seattle)
Program Director:
H Richard Wex, MD
Univ of Washington Schl of Med Harborview Med Center
Dept of Neurosurgery
325 Ninth Ave 2A-96
Seattle, WA 98104
206 521-1830
Length: 5 Year(s) Total Positions: 2 (GYT: 0)
Program ID: 180-04-21-090

West Virginia

Morgantown

West Virginia University Program
West Virginia University Hospitals
Program Director:
Howard H Kaufman, MD
Health Science Center
Dept of Neurosurgery
PO Box 9183
Morgantown, WV 26506-9183
304 293-5041
Length: 5 Year(s) Total Positions: 5 (GYT: 1)
Program ID: 180-05-11-091

Wisconsin

Madison

University of Wisconsin Program
University of Wisconsin Hospital and Clinics
Meriter Hospital
William S Middleton Veterans Hospital
Program Director:
Manucher J Javid, MD
University of Wisconsin Hospital and Clinics
600 Highland Ave Rm H4448
Madison, WI 53792-3392
608 263-1410
Length: 5 Year(s) Total Positions: 7 (GYT: 1)
Program ID: 180-06-21-092

* Updated information not provided.
Arkansas
Little Rock
University of Arkansas for Medical Sciences Program
University of Arkansas College of Medicine
John L McCollum Memorial Veterans Hospital
University Hospital of Arkansas
Program Director:
Samuel M Ward, MD
University of Arkansas for Medical Science
4301 W Markham Slot 500
Little Rock, AR 72205-7199
501 686-6135
Length: 3 Year(s) Total Positions: 8 (GY: 0)
Program ID: 180-04-21-007

California
Loma Linda
Loma Linda University Program
Loma Linda University Medical Center
Jerry L Pettis Memorial Veterans Hospital
Riverside General Hospital-University Medical Center
Program Director:
Gordon W Peterson, MD
Loma Linda Medical Center
Dept of Neurology Rm 1490
PO Box 2000
Loma Linda, CA 92354
909 824-4067
Length: 3 Year(s) Total Positions: 9 (GY: 0)
Subspecialties: CHN
Program ID: 180-05-21-124

Los Angeles
UCLA Medical Center Program
UCLA School of Medicine
UCLA Medical Center
Program Director:
Timothy F Coughary, MD
Reed Neurological Research Center
710 Westwood Plaza
Los Angeles, CA 90095-1769
310-202-6661
Length: 3 Year(s) Total Positions: 18 (GY: 0)
Subspecialties: CHN
Program ID: 180-05-21-012

University of Southern California Program
Los Angeles County-USC Medical Center
Program Director:
Mark Fisher, MD
USC School of Medicine
2025 Zonal Ave
Los Angeles, CA 90033-1034
213 228-7388
Length: 3 Year(s) Total Positions: 12 (GY: 0)
Subspecialties: CHN
Program ID: 180-05-21-011

Veterans Affairs Medical Center (West Los Angeles) Program
Veterans Affairs Medical Center (West Los Angeles)
Program Director:
Wallace W Toureille, MD PhD
West Los Angeles Veterans Administration Medical Center
Widener & Swallette Bldgs
Bldg 221 Rm 1
Los Angeles, CA 90073
213 824-6407
Length: 3 Year(s) Total Positions: 9 (GY: 0)
Program ID: 180-05-01-013

Oakland
University of California (Davis) East Bay Program
Highland General Hospital
David Grant Medical Center
Merrittbow Memorial Hospital and Clinics
Program Director:
Michael P Remler, MD
VA Northern California System of Clinics (621/227)
Dept of Neurology
160 Muir Rd
Martinez, CA 94553
925 372-2959
Length: 4 Year(s) Total Positions: 11 (GY: 1)
Program ID: 180-05-21-160

Orange
University of California (Irvine) Program
University of California (Irvine) Medical Center
Veterans Affairs Medical Center (Long Beach)
Program Director:
Robert J Young, MD
University of California (Irvine)
Dept of Neurology
Irvine, CA 92717-4275
714 725-8406
Length: 3 Year(s) Total Positions: 10 (GY: 0)
Subspecialties: CHN
Program ID: 180-05-21-099

Pasadena
Southern California Kaiser Permanente Medical Care (Los Angeles) Program
Southern California Kaiser Permanente Medical Group
Kaiser Foundation Hospital (Los Angeles)
Program Director:
Sheldon Wolf, MD
Southern California Kaiser Permanente Medical Group
385 S Walnut St
Pasadena, CA 91105-8103
800 541-7946
Length: 4 Year(s) Total Positions: 8 (GY: 2)
Program ID: 180-05-12-010

San Diego
University of California (San Diego) Program
University of California (San Diego) Medical Center
Veterans Affairs Medical Center (San Diego)
Program Director:
Mark J Kritchevsky, MD
UCSD Med Ctr
200 W Arbor Dr 8405
San Diego, CA 92103-8405
619 543-6266
Length: 3 Year(s) Total Positions: 12 (GY: 0)
Subspecialties: CHN
Program ID: 180-05-01-014

San Francisco
University of California (San Francisco) Program
University of California (San Francisco) School of Medicine
San Francisco General Hospital Medical Center
University of California (San Francisco) Medical Center
Veterans Affairs Medical Center (San Francisco)
Program Director:
Stephen L Hauser, MD
Univ of California (San Francisco)
Dept of Neurology
505 Parnassus Ave Rm M-794
San Francisco, CA 94143-0114
415 476-9211
Length: 3 Year(s) Total Positions: 17 (GY: 0)
Subspecialties: CHN
Program ID: 180-05-01-016

Stanford
Stanford University Program
Stanford University Hospital
Santa Clara Valley Medical Center
Veterans Affairs Medical Center (Palo Alto)
Program Director:
Gregory W Albers, MD
Stanford Medical Center
Dept of Neurology 36160
330 Pasteur Dr
Stanford, CA 94305-6206
415 725-6688
Length: 3 Year(s) Total Positions: 15 (GY: 5)
Subspecialties: CHN
Program ID: 180-05-21-017

Torrance
Los Angeles County-Harbor-UCLA Medical Center Program
Los Angeles County-Harbor-UCLA Medical Center
Program Director:
Mark A Goldberg, MD PhD
Los Angeles City Harbor-UCLA Med Ctr
1000 W Carson St
Torrance, CA 90409
310 222-3897
Length: 3 Year(s) Total Positions: 9 (GY: 0)
Subspecialties: CHN
Program ID: 180-05-11-018

* Updated information not provided.

Graduate Medical Education Directory 523
Accredited Programs in Neurology

Colorado

Denver

University of Colorado Program*
University of Colorado Health Sciences Center
Denver Health and Hospitals
Veterans Affairs Medical Center (Denver)
Program Director:
Donald H. Gilden, MD
University of Colorado Health Sciences Center
4200 E Ninth Ave
Neurology Dept. (B-182)
Denver, CO 80262
303 370-8981
Length: 3 Year(s)  Total Positions: 5 (GY: 0)
Subspecialties: CNH
Program ID: 180-07-21-019

Connecticut

Farmington

University of Connecticut Program
University of Connecticut School of Medicine
Hartford Hospital
Univ of Connecticut Health Center/John Dempsey Hospital
Program Director:
Leslie J. Wabnitz, MD
Hartford Hospital
Dept of Neurology
90 Seymour St PO Box 6937
Hartford, CT 06102-6037
203 545-3651
Length: 3 Year(s)  Total Positions: 3 (GY: 0)
Program ID: 180-08-21-139

New Haven

Yale-New Haven Medical Center Program
Yale-New Haven Hospital
Veterans Affairs Medical Center (West Haven)
Program Director:
Stephen G. Waxman, MD PhD
Yale University School of Medicine
10 York St LC-7
New Haven, CT 06520
203 785-4085
Length: 3 Year(s)  Total Positions: 16 (GY: 0)
Program ID: 180-08-21-021

District of Columbia

Washington

Georgetown University Program*
Georgetown University Hospital
Veterans Affairs Medical Center (Washington DC)
Program Director:
Jonathan H Pincus, MD
Georgetown University Hospital
Dept of Neurology
3800 Reservoir Rd NW
Washington, DC 20007-5197
202 784-2170
Length: 3 Year(s)  Total Positions: 15 (GY: 0)
Program ID: 180-10-21-022

Howard University Program
Howard University Hospital
District of Columbia General Hospital
Program Director:
Roger L. Weir, MD
Howard University Hospital
2041 Georgia Ave NW
Washington, DC 20050
202 865-1545
Length: 3 Year(s)  Total Positions: 8 (GY: 0)
Program ID: 180-10-21-024

Walter Reed Army Medical Center Program
Walter Reed Army Medical Center
Program Director:
Col Carl H Gunderson, MD
Neurology Serv
Walter Reed Army Medical Center
6055 16th St NW
Washington, DC 20010-5001
202 276-1510
Length: 4 Year(s)  Total Positions: 18 (GY: 3)
Subspecialties: CNH
Program ID: 180-10-11-002

Florida

Gainesville

University of Florida Program
University of Florida College of Medicine
Shands Hospital at the University of Florida
Veterans Affairs Medical Center (Gainesville)
Program Director:
Edward Valenstein, MD
University of Florida College of Medicine
Dept of Neurology
Box 100236 JHMHC
Gainesville, FL 32610-0236
301 392-5407
Length: 3 Year(s)  Total Positions: 5 (GY: 0)
Program ID: 180-11-21-025

Miami

University of Miami-Jackson Memorial Medical Center Program*
University of Miami-Jackson Memorial Medical Center
Veterans Affairs Medical Center (Miami)
Program Director:
Bruce Nolan, MD
Jackson Memorial Hospital
Neurology Serv
PO Box 016840
Miami, FL 33101
305 547-6722
Length: 3 Year(s)  Total Positions: 24 (GY: 0)
Subspecialties: CNH
Program ID: 180-11-21-026

Tampa

University of South Florida Program
University of South Florida College of Medicine
James A Haley Veterans Hospital
Tampa General Healthcare
Program Director:
Leon D. Proctor, MD
University of South Florida College of Medicine
12401 Bruce B Downs Blvd Box 55
Tampa, FL 33612
813 974-2063
Length: 3 Year(s)  Total Positions: 12 (GY: 0)
Program ID: 180-11-21-027

Georgia

Atlanta

Emory University Program
Emory University School of Medicine
Emory University Hospital
Grady Memorial Hospital
Hениetta Egleston Hospital for Children
Program Director:
Sarah B Delhoussee, MD PhD
Dept of Neurology
Emory University Woodruff Bldg
1689 Pierce Dr Suite 6000
Atlanta, GA 30322
404 727-5004
Length: 3 Year(s)  Total Positions: 32 (GY: 0)
Subspecialties: CNH
Program ID: 180-12-21-028

Augusta

Medical College of Georgia Program
Medical College of Georgia Hospitals and Clinics
Veterans Affairs Medical Center (Augusta)
Program Director:
Thomas R Swift, MD
Medical College of Georgia
Dept of Neurology
Bldg 340
Augusta, GA 30912-3900
706 721-4581
Length: 4 Year(s)  Total Positions: 6 (GY: 0)
Subspecialties: CNH
Program ID: 180-12-21-029

Illinois

Chicago

McGaw Medical Center of Northwestern University Program*
Northwestern University Medical School
Evanston Hospital
Northwestern Memorial Hospital
Veterans Affairs Lakeside Medical Center (Chicago)
Program Director:
Phyllis Zee, MD
Northwestern University Medical School
250 E Erie St #614
Chicago, IL 60611-3005
312 998-2826
Length: 3 Year(s)  Total Positions: 16 (GY: 1)
Subspecialties: CNH
Program ID: 180-16-21-022

* Updated information not provided.
Rush-Presbyterian-St Luke’s Medical Center Program*
Rush-Presbyterian-St Luke’s Medical Center
ERS: Christ Hospital and Medical Center
Program Director:
Judd N Jensen, MD
Harold L Klawans, MD
Rush-Presbyterian-St Luke’s Medical Center
Dept of Neurology
1653 N Congress Pkwy
Chicago, IL 60612
312-942-4000
Length: 3 Year(s) Total Positions: 12 (GY: 6)
Program ID: 180-16-11-1-038

University of Chicago Program
University of Chicago Hospitals
Program Director:
Richard F Kraig, PhD MD
University of Chicago Hospitals
5841 S Maryland Ave
MC2000
Chicago, IL 60637-1470
312-722-0161
Length: 3 Year(s) Total Positions: 17 (GY: 6)
Subspecialties: CHN
Program ID: 180-16-21-2-034

University of Illinois College of Medicine at Chicago Program*
University of Illinois College of Medicine at Chicago
University of Illinois Hospital and Clinics
Wearam Affairs Westside Medical Center (Chicago)
Program Director:
Daniel B Hier, MD
University of Illinois at Chicago
Dept of Neurology (MC-79C)
812 S Wood St
Chicago, IL 60612-7360
312-996-1757
Length: 3 Year(s) Total Positions: 8 (GY: 6)
Program ID: 180-16-21-1-038

Maywood
Loyola University Program
Foster G McGaw Hospital-Loyola University of Chicago
Edward J Hines Jr Veterans Affairs Hospital
Program Director:
Gastone E Colonnio, MD
Loyola University Stritch School of Medicine
2601 S First Ave
Maywood, IL 60153
312-216-8406
Length: 3 Year(s) Total Positions: 16 (GY: 6)
Subspecialties: CHN
Program ID: 180-16-21-2-034

North Chicago
Fitch University of Health Sciences/Chicago Medical School Program
Fitch University of Health Sciences/Chicago Medical School
Cook County Hospital
Veterans Affairs Medical Center (North Chicago)
Program Director:
Dragomir M Pekovich, MD
Chicago Medical School
Dept of Neurology
3333 Green Bay Rd
North Chicago, IL 60064
708-576-3300
Length: 3 Year(s) Total Positions: 3 (GY: 6)
Program ID: 180-16-21-1-030

Peoria
University of Illinois College of Medicine at Peoria Program
University of Illinois College of Medicine at Peoria
Methodist Medical Center of Illinois
St Francis Medical Center
Program Director:
John M McLean, MD
University of Illinois College of Medicine at Peoria
Dept of Neurology
PO Box 1548
Peoria, IL 61655-1549
309-652-7700
Length: 4 Year(s) Total Positions: 8 (GY: 2)
Program ID: 180-16-21-1-136

Springfield
Southern Illinois University Program
Southern Illinois University School of Medicine
Memorial Medical Center
St John’s Hospital
Program Director:
Bala V Manyam, MD
MU School of Medicine
Dept of Neurology Residency Program
PO Box 2620
Springfield, IL 62794-2230
217-785-1054
Length: 4 Year(s) Total Positions: 8 (GY: 5)
Program ID: 180-16-21-1-134

Indiana
Indianapolis
Indiana University Medical Center Program
Indiana University Medical Center
Richard L Roudebush Veterans Affairs Medical Center
William N Wishard Memorial Hospital
Program Director:
Jose Biller, MD
Dept of Neurology
Indiana University Medical Center
545 Rikurnill Dr
Indianapolis, IN 46202-5124
317-274-4455
Length: 3 Year(s) Total Positions: 10 (GY: 5)
Subspecialties: CHN
Program ID: 180-17-21-2-038

Iowa
Iowa City
University of Iowa Hospitals and Clinics Program
University of Iowa Hospitals and Clinics
Veterans Affairs Medical Center (Iowa City)
Program Director:
Antonio R Diaz-Rodriguez, MD
University of Iowa Hospitals and Clinics
Dept of Neurology
Iowa City, IA 52242-1000
319-356-4096
Length: 4 Year(s) Total Positions: 15 (GY: 1)
Subspecialties: CHN
Program ID: 180-16-21-1-039

Kansas
Kansas City
University of Kansas Medical Center Program
University of Kansas School of Medicine
University of Kansas Medical Center
Veterans Affairs Medical Center (Kansas City)
Program Director:
Richard M Dudisky, MD
University of Kansas Medical Center
5901 Rainbow Blvd
Kansas City, KS 66169-7314
913-588-6966
Length: 3 Year(s) Total Positions: 11 (GY: 6)
Subspecialties: CHN
Program ID: 180-19-23-040

Kentucky
Lexington
University of Kentucky Medical Center Program
University Health Hospital Albert B Chandler Medical Center
Veterans Affairs Medical Center (Lexington)
Program Director:
Kevin Nelson, MD
University of Kentucky Medical Center
Dept of Neurology
880 Rose St
Lexington, KY 40536-0084
606-323-8702
Length: 4 Year(s) Total Positions: 12 (GY: 3)
Subspecialties: CHN
Program ID: 180-20-21-1-041

Louisville
University of Louisville Program
University of Louisville School of Medicine
Norton Hospital (Alliance Health System)
University of Louisville Hospital
Veterans Affairs Medical Center (Louisville)
Program Director:
Walter L Olson, MD
University of Louisville Health Science Center
Dept of Neurology
Louisville, KY 40292-0001
502-852-7881
Length: 3 Year(s) Total Positions: 9 (GY: 9)
Program ID: 180-20-21-042

Louisiana
New Orleans
Louisiana State University Program
Louisiana State University School of Medicine
Medical Center of Louisiana at New Orleans-LSU Division
Medical Center of Louisiana University Hospital Campus
Program Director:
Austin J Sumner, MD
Dept of Neurology
LSU School of Medicine
1542 Tulane Ave
New Orleans, LA 70112-2822
504-685-0480
Length: 3 Year(s) Total Positions: 7 (GY: 0)
Subspecialties: CHN
Program ID: 180-31-21-043

* Updated information not provided.

Graduate Medical Education Directory 525
Tulane University Program
Tulane University School of Medicine
Alton Ochsner Medical Foundation
Medical Center of Louisiana at New Orleans-Tulane Division
Tulane University Hospital and Clinics
Veterans Affairs Medical Center-Tulane Service (New Orleans)
Program Director:
Loren A. Weinberg, MD
Tulane University School of Medicine
1430 Tulane Ave
New Orleans, LA 70112-2580
504-898-2241
Length: 4 Year(s) Total Positions: 16 (GY: 0)
Subspecialties: CHN
Program ID: 180-21-21-044

Maryland
Baltimore
Johns Hopkins University Program
Johns Hopkins University School of Medicine
Johns Hopkins Bayview Medical Center
Johns Hopkins Hospital
Program Director:
Daniel Hanley, MD
Johns Hopkins Hospital
600 N Wolfe St
Meyer 8-140
Baltimore, MD 21287-7829
410-955-7813
Length: 3 Year(s) Total Positions: 17 (GY: 0)
Subspecialties: CHN
Program ID: 180-23-21-046

University of Maryland Program
University of Maryland Medical System
Veterans Affairs Medical Center (Baltimore)
Program Director:
Kenneth J. Johnson, MD
Dept of Neurology
UMMS Bmn 14W46
22 S Greene St
Baltimore, MD 21201
410-252-4534
Length: 3 Year(s) Total Positions: 17 (GY: 2)
Program ID: 180-23-31-044

Bethesda
National Naval Medical Center (Bethesda) Program
National Naval Medical Center (Bethesda)
Program Director:
Andrew J. Dutka, MD
Department of Neurology
National Naval Medical Center
8801 Wisconsin Ave
Bethesda, MD 20889-5600
301-265-4760
Length: 3 Year(s) Total Positions: 10 (GY: 0)
Program ID: 180-23-31-003

Massachusetts
Boston
Boston City Hospital Program*
Boston City Hospital
Labey Clinic
St Elizabeth's Medical Center of Boston
Program Director:
Thomas D. Sahni, MD
Boston City Hospital
Neurological Unit
616 Harrington Ave
Boston, MA 02118
617-584-2120
Length: 3 Year(s) Total Positions: 6 (GY: 0)
Program ID: 180-24-11-047

Boston University Program
Boston University Medical Center-Boston University Hospital
Veterans Affairs Medical Center (Boston)
Program Director:
Robert G. Feldman, MD
Boston University School of Medicine
Dept of Neurology C314
800 Concord St
Boston, MA 02128-2104
617-353-5850
Length: 3 Year(s) Total Positions: 18 (GY: 0)
Program ID: 180-24-32-048

Harvard Medical School Program
Children's Hospital
Beth Israel Hospital
Brigham and Women's Hospital
Program Director:
Martin A. Samuels, MD
Brigham and Women's Hospital
75 Francis St
Boston, MA 02115
413-792-5365
Length: 3 Year(s) Total Positions: 24 (GY: 0)
Subspecialties: CHN
Program ID: 180-24-31-049

Massachusetts General Hospital Program*
Massachusetts General Hospital
Program Director:
Walter J. Koroloff, MD
Massachusetts General Hospital
Neurology Serv Kennedy 9
Boston, MA 02114
617-726-7413
Length: 3 Year(s) Total Positions: 18 (GY: 0)
Subspecialties: CHN
Program ID: 180-24-24-060

New England Medical Center Hospitals Program*
New England Medical Center Hospitals
Program Director:
Louis R. Caplan, MD
New England Medical Center Hospitals
760 Washington St
Boston, MA 02111
617-662-5400
Length: 3 Year(s) Total Positions: 9 (GY: 0)
Subspecialties: CHN
Program ID: 180-24-21-051

Worcester
University of Massachusetts Medical Center Program*
University of Massachusetts Medical Center
St Vincent Hospital
Program Director:
David A. Drachman, MD
University of Massachusetts Medical Center
66 Lake Ave N
Worcester, MA 01655-0318
508-856-4147
Length: 3 Year(s) Total Positions: 12 (GY: 0)
Subspecialties: CHN
Program ID: 180-24-21-131

Michigan
Ann Arbor
University of Michigan Program
University of Michigan Hospitals
Veterans Affairs Medical Center (Ann Arbor)
Program Director:
Sid Gilman, MD
University of Michigan Hospitals
1560 E Medical Center Dr
1914 Taubman Ctr Box 0316
Ann Arbor, MI 48109-0316
313-936-0050
Length: 3 Year(s) Total Positions: 16 (GY: 0)
Subspecialties: CHN
Program ID: 180-25-31-052

Detroit
Henry Ford Hospital Program
Henry Ford Hospital
Program Director:
Lori B. Schneider, MD
Henry Ford Hospital
2700 W Grand Blvd
Detroit, MI 48202
313-876-5648
Length: 3 Year(s) Total Positions: 18 (GY: 0)
Program ID: 180-25-21-129

Wayne State University/Detroit Medical Center Program
Wayne State University School of Medicine
Detroit Receiving Hospital and University Health Center
Harper Hospital
Program Director:
Robert P. Lisak, MD
4201 E. Grand Blvd
Detroit, MI 48201
313-577-1242
Length: 3 Year(s) Total Positions: 18 (GY: 0)
Subspecialties: CHN
Program ID: 180-25-31-054

*Updated information not provided.
Minneapolis

University of Minnesota Program*
University of Minnesota Medical School
Hennepin County Medical Center
St Paul-Ramsey Medical Center
University of Minnesota Hospital and Clinic
Veterans Affairs Medical Center (Minneapolis)

Program Director:
Garett J Parry, MD
University of Minnesota Hospital and Clinics
Dept of Neurology
912 Delaware St SE
Minneapolis, MN 55455
612-626-4107
Length: 3 Year(s)  Total Positions: 7  (GYI: 0)
Subspecialties: CBN
Program ID: 190-28-21-055

Columbia

University of Missouri-Columbia Program
University of Missouri-Columbia School of Medicine
Harry S Truman Memorial Veterans Hospital
University and Children's Hospital

Program Director:
Harry White, MD
University of Missouri-Columbia
Dept of Psychiatry and Neurology
641 Medical Sciences Bldg
Columbia, MO 65212
314-853-2204
Length: 3 Year(s)  Total Positions: 7  (GYI: 0)
Program ID: 190-28-21-059

St Louis

St Louis University Group of Hospitals Program
St Louis University School of Medicine
St Louis University Hospital
Veterans Affairs Medical Center (St Louis)

Program Director:
John H Seelhorst, MD
St Louis University School of Medicine
Dept of Neurology
3605 Vista at Grand
St Louis, MO 63110-0250
314-362-7039
Length: 4 Year(s)  Total Positions: 16  (GYI: 4)
Subspecialties: CBN
Program ID: 190-28-21-060

Washington University Program*
Barnes Hospital
St Louis Regional Medical Center

Program Director:
David B Clifford, MD
Washington University School of Medicine
Dept of Neurology
660 S Euclid Box #111
St Louis, MO 63110-1091
314-362-3396
Length: 3 Year(s)  Total Positions: 21  (GYI: 0)
Subspecialties: CBN
Program ID: 190-28-21-061

Mississippi

Jackson

University of Mississippi Medical Center Program
University of Mississippi School of Medicine
University Hospital
Veterans Affairs Medical Center (Jackson)

Program Director:
James J Corbett, MD
University of Mississippi Medical Center
2500 N State St
Jackson, MS 39216-4506
601-984-5500
Length: 4 Year(s)  Total Positions: 16  (GYI: 3)
Subspecialties: CBN
Program ID: 190-27-21-056

New Hampshire

Lebanon

Dartmouth-Hitchcock Medical Center Program
Mary Hitchcock Memorial Hospital
Veterans Affairs Medical Center (White River Junction)

Program Director:
Alexander G Beeva, MD
Dartmouth-Hitchcock Medical Center
Section of Neurology
One Medical Center Dr
Lebanon, NH 03756-0001
603-659-1014
Length: 3 Year(s)  Total Positions: 6  (GYI: 1)
Program ID: 190-35-21-063

New Jersey

Newark

UMDNJ-New Jersey Medical School Program
UMDNJ-New Jersey Medical School
Dept of Veterans Affairs Medical Center (East Orange)
Robert Wood Johnson University Hospital
UMDNJ-University Hospital

Program Director:
Stuart D Cook, MD
UMDNJ-New Jersey Medical School
185 S Orange Ave
Newark, NJ 07103
201-982-9285
Length: 3 Year(s)  Total Positions: 20  (GYI: 4)
Subspecialties: CBN
Program ID: 190-32-21-064

New Mexico

Albuquerque

University of New Mexico Program
University of New Mexico School of Medicine
University Hospital
Veterans Affairs Medical Center (Albuquerque)

Program Director:
Gary A Rosenberg, MD
Dept of Neurology
2211 Lomas Blvd NE
Ambulatory Care Ctr 2-East
Albuquerque, NM 87131-6281
505-272-2042
Length: 3 Year(s)  Total Positions: 9  (GYI: 1)
Subspecialties: CBN
Program ID: 190-34-21-065

New York

Albany

Albany Medical Center Program
Albany Medical Center Hospital
Veterans Affairs Medical Center (Albany)

Program Director:
Neil Lava, MD
Albany Medical Center Dept of Neurology A-70
47 New Scotland Ave
Albany, NY 12203
518-262-5311
Length: 3 Year(s)  Total Positions: 10  (GYI: 0)
Program ID: 190-30-21-066

* Updated information not provided.
<table>
<thead>
<tr>
<th>Program</th>
<th>Institution</th>
<th>Program Director</th>
<th>Program Description</th>
<th>Program Director</th>
<th>Length</th>
<th>Subspecialties</th>
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<tbody>
<tr>
<td>Bronx</td>
<td>Albert Einstein College of Medicine</td>
<td>Herbert H. Schaumburg, MD</td>
<td>Albert Einstein College of Medicine of Yeshiva University Bronx Medical Center Montefiore Medical Center-Henry and Lucy Moses Division</td>
<td>John Halperin, MD</td>
<td>3 years</td>
<td>CBN</td>
<td>180-35-21-070</td>
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<td>Brooklyn</td>
<td>SUNY Health Science Center at Brooklyn</td>
<td>Roger Q Orosa, MD</td>
<td>SUNY at Brooklyn College of Medicine Kings County Hospital Center University Hospital SUNY Health Science Center at Brooklyn</td>
<td>Ronald M Kaszer, MD</td>
<td>3 years</td>
<td>CBN</td>
<td>180-35-21-079</td>
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<td>Buffalo</td>
<td>SUNY at Buffalo Graduate Medical-Dental Education Consortium</td>
<td>Michael Cohen, MD</td>
<td>SUNY at Buffalo Grad Medical-Dental Education Consortium Buffalo General Hospital Children's Hospital of Buffalo Dent. Neurological Institutes of Millard Fillmore Hospital Erie County Medical Center Veterans Affairs Medical Center (Buffalo)</td>
<td>One Gustave L. Levy Place</td>
<td>4 years</td>
<td>CBN</td>
<td>180-35-21-067</td>
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<td>East Meadow</td>
<td>Nassau County Medical Center Program</td>
<td>Richard R. Carnahans, MD</td>
<td>Nassau County Medical Center</td>
<td>New York</td>
<td>3 years</td>
<td>CBN</td>
<td>180-35-21-089</td>
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<td>Manhattan</td>
<td>North Shore University Hospital Program</td>
<td>John Halperin, MD</td>
<td>North Shore University Hospital Memorial Sloan-Kettering Cancer Center</td>
<td>Stephen J. Fidler, MD</td>
<td>3 years</td>
<td>CBN</td>
<td>180-35-21-073</td>
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<td>New Hyde Park</td>
<td>Albert Einstein College of Medicine at Long Island Jewish Medical Center Program</td>
<td>Ronald M Kaszer, MD</td>
<td>Long Island Jewish Medical Center Bronx Municipal Hospital Center</td>
<td>One Gustave L. Levy Place</td>
<td>3 years</td>
<td>CBN</td>
<td>180-35-21-074</td>
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<td>New York</td>
<td>Mount Sinai School of Medicine Program</td>
<td>C. Warren Glazow, MD</td>
<td>Mount Sinai School of Medicine</td>
<td>New York</td>
<td>3 years</td>
<td>CBN</td>
<td>180-35-21-075</td>
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<td>C. Warren Glazow, MD</td>
<td>Mount Sinai School of Medicine</td>
<td>Mount Sinai Hospital</td>
<td>New York</td>
<td>4 years</td>
<td>CBN</td>
<td>180-35-21-076</td>
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<td>Fred Plum, MD</td>
<td>New York Hospital</td>
<td>Memorial Sloan-Kettering Cancer Center</td>
<td>New York</td>
<td>3 years</td>
<td>CBN</td>
<td>180-35-21-077</td>
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<td>Edwin H Kolodny, MD</td>
<td>New York University Medical Center</td>
<td>New York University Medical Center Bellevue Hospital Center</td>
<td>New York</td>
<td>3 years</td>
<td>CBN</td>
<td>180-35-21-078</td>
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<td>Joseph C Masdeu, MD</td>
<td>New York University Medical Center</td>
<td>St Vincent's Hospital and Medical Center of New York</td>
<td>New York</td>
<td>3 years</td>
<td>CBN</td>
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<td>Lewis P. Rowland, MD</td>
<td>Columbia Presbyterian Medical Center</td>
<td>Presbyterian Hospital in the City of New York</td>
<td>New York</td>
<td>3 years</td>
<td>CBN</td>
<td>180-35-21-080</td>
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</tbody>
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* Updated information not provided.
New York Medical College at Westchester County Medical Center Program
New York Medical College
Lincoln Medical and Mental Health Center
Metropolitan Hospital Center
Westchester County Medical Center
Program Director:
Alan J. Tuchman, MD
Dept of Neurology
Munger Pavilion 4th Fl
Valhalla, NY 10595
914 993-4203
Length: 3 Year(s)  Total Positions: 14 (GYI: 0)
Program ID: 180-38-21-076

North Carolina
Chapel Hill
University of North Carolina Hospitals Program
University of North Carolina Hospitals
Program Director:
James N Haywood, MD
UNC School of Medicine
Dept of Neurology
751 Burnett-Womack Bldg CB #7025
Chapel Hill, NC 27599-7025
919 966-3566
Length: 3 Year(s)  Total Positions: 1 (GYI: 0)
Subspecialties: CHN
Program ID: 180-36-11-084

Durham
Duke University Program
Duke University Medical Center
Veterans Affairs Medical Center (Durham)
Program Director:
Joel C Morgenlander, MD
Duke University Medical Center
MS2000
122 Baker House
Durham, NC 27710
919 844-6566
Length: 3 Year(s)  Total Positions: 12 (GYI: 0)
Subspecialties: CHN
Program ID: 180-36-21-085

Winston-Salem
Bowman Gray School of Medicine Program
North Carolina Baptist Hospital
Program Director:
Peter B Donofrio, MD
Bowman Gray School of Medicine
Medical Center Blvd
Winston-Salem, NC 27157-1078
336 716-2039
Length: 4 Year(s)  Total Positions: 12 (GYI: 3)
Subspecialties: CHN
Program ID: 180-36-21-086

Ohio
Cincinnati
University of Cincinnati Hospital Group Program
University of Cincinnati Hospital
Children's Hospital Medical Center
Veterans Affairs Medical Center (Cincinnati)
Program Director:
John G Quinlan, MD
University of Cincinnati Medical Center
231 Bethesda Ave Room 4010
PO Box 570525
Cincinnati, OH 45267-0525
513 588-2968
Length: 3 Year(s)  Total Positions: 15 (GYI: 0)
Subspecialties: CHN
Program ID: 180-38-21-088

Cleveland
Case Western Reserve University Program*
University Hospitals of Cleveland
MetroHealth Medical Center
Veterans Affairs Medical Center (Cleveland)
Program Director:
Robert B Daroff, MD
Jennifer S Kriegel, MD
Case Western Reserve University
Dept of Neurology
Cleveland, OH 44106
216 844-6163
Length: 3 Year(s)  Total Positions: 24 (GYI: 0)
Subspecialties: CHN
Program ID: 180-38-21-089

Cleveland Clinic Foundation Program
Cleveland Clinic Foundation
Program Director:
Patrick L Swenson, MD
Virginia D'Silva, MD
Cleveland Clinic Foundation
9600 Euclid Ave TT2
Dept of Neurology
Cleveland, OH 44195-5242
216 444-5900
Length: 3 Year(s)  Total Positions: 20 (GYI: 5)
Subspecialties: CHN
Program ID: 180-38-11-090

Columbus
Ohio State University Program
Ohio State University Medical Center
Children's Hospital
Riverside Methodist Hospitals
Program Director:
Herbert B Newton, MD
Ohio State University Hospital
1654 Upham Dr
Rm 421
Columbus, OH 43210
614 294-8930
Length: 3 Year(s)  Total Positions: 9 (GYI: 0)
Program ID: 180-38-21-092

Oklahoma
Oklahoma City
University of Oklahoma Health Sciences Center Program
University of Oklahoma College of Medicine-Oklahoma City
Children's Hospital of Oklahoma
University Hospital and Clinics
Veterans Affairs Medical Center (Oklahoma City)
Program Director:
James R Couch Jr, MD PhD
Oklahoma University Medical School
620 Stanton L Young Blvd
Oklahoma City, OK 73104-6020
405 351-4118
Length: 4 Year(s)  Total Positions: 10 (GYI: 3)
Program ID: 180-38-21-141

Oregon
Portland
Oregon Health Sciences University Program*
Oregon Health Sciences University Hospital
Good Samaritan Hospital and Medical Center
Veterans Affairs Medical Center (Portland)
Program Director:
Earl A Zimmerman, MD
Oregon Health Science University
Dept of Neurology - L226
3181 SW Sam Jackson Park Rd
Portland, OR 97201-3086
503 494-7121
Length: 3 Year(s)  Total Positions: 8 (GYI: 3)
Program ID: 180-40-81-095

Pennsylvania
Hershey
Milton S Hershey Medical Center of Pennsylvania State University Program
Penn State University Hospital-Milton S Hershey Med Ctr
Program Director:
Richard B Tenner, MD
Pennsylvania State University
College of Medicine
Joe Persky Neurology
Hershey, PA 17033
717 531-8502
Length: 3 Year(s)  Total Positions: 6 (GYI: 1)
Program ID: 180-41-11-098

Philadelphia
MCPHU/Hahnemann University Hospital Program
Hahnemann University Hospital
Program Director:
Elliott L Mancall, MD
Hahnemann Univ
Broad & Vine St
Mail Stop 423
Philadelphia, PA 19102-1192
215 763-9006
Length: 3 Year(s)  Total Positions: 7 (GYI: 0)
Program ID: 180-41-21-097

* Updated information not provided.

Graduate Medical Education Directory
Accredited Programs in Neurology

MCPhU/Medical College of Pennsylvania Hospital Program
Medical College of Pennsylvania Hospital
Veterans Affairs Medical Center (Philadelphia)
Program Director:
Nathan R. Black, MD
Medical College of Pennsylvania Dept of Neurology
3300 Henry Ave
Philadelphia, PA 19129
215 840 4747
Length: 4 Year(s) Total Positions: 13 (GYT: 2)
Program ID: 180-41-21-098

Pennsylvania Hospital Program
Pennsylvania Hospital
Program Director:
Thomas M. Roshey, MD
Pennsylvania Hospital
Eighth & Spruce Sts
Philadelphia, PA 19107
215 882-7550
Length: 3 Year(s) Total Positions: 9 (GYT: 0)
Program ID: 180-41-31-099

Temple University Program
Temple University Hospital
Albert Einstein Medical Center
Program Director:
Gerardo R. Torres, MD
Temple University Hospital
3401 N Broad St Ste 5 PP
Philadelphia, PA 19140-8110
215 221-8910
Length: 3 Year(s) Total Positions: 12 (GYT: 0)
Subspecialties: CHN
Program ID: 180-41-21-100

Thomas Jefferson University Program
Thomas Jefferson University Hospital
The Medical Center of Delaware
Veterans Affairs Medical Center (Wilmington)
Program Director:
Robert Jay Schwartzman, MD
Thomas Jefferson University Hospital
1025 Walnut St Ste 611
Philadelphia, PA 19107-6993
215 955-7310
Length: 2 Year(s) Total Positions: 15 (GYT: 5)
Subspecialties: CHN
Program ID: 180-41-21-101

University of Pennsylvania Program
Hospital of the University of Pennsylvania
Children’s Hospital of Philadelphia
Graduate Hospital
Program Director:
Arthur K. Asbury, MD
Hospital of The Univ of Pennsylvania Dept of Neurology
3400 Spruce St
Philadelphia, PA 19104-4283
215 603-3800
Length: 4 Year(s) Total Positions: 15 (GYT: 0)
Subspecialties: CHN
Program ID: 180-41-21-102

University Health Center of Pittsburgh Program
University Health Center of Pittsburgh
Veterans Affairs Medical Center (Pittsburgh)
Program Director:
Roger P. Simms, MD
University of Pittsburgh School of Medicine
332 Scaife Hall
Pittsburgh, PA 15261-3003
412 648-2022
Length: 3 Year(s) Total Positions: 25 (GYT: 0)
Subspecialties: CHN
Program ID: 180-41-21-103

Puerto Rico
San Juan
University of Puerto Rico Program
University of Puerto Rico School of Medicine
San Juan City Hospital
Veterans Hospital
Veterans Affairs Medical Center (San Juan)
Program Director:
Jesus B. Velez-Borras, MD
University of Puerto Rico Medical Sciences Campus
GPO Box 6057 Dept of Medicine
San Juan, PR 00936
809 751-3811
Length: 4 Year(s) Total Positions: 15 (GYT: 3)
Program ID: 180-42-21-104

Rhode Island
Providence
Brown University Program
Rhode Island Hospital
Program Director:
J. Donald Easton, MD
Rhode Island Hospital
Physicians Office Bldg Ste 324
563 Eddy St
Providence, RI 02903
401 444-8796
Length: 3 Year(s) Total Positions: 15 (GYT: 0)
Subspecialties: CHN
Program ID: 180-43-21-131

South Carolina
Charleston
Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
MUSC Medical Center
Veterans Affairs Medical Center (Charleston)
Program Director:
Edward L Hogan, MD
Medical University of South Carolina
171 Ashley Ave
Charleston, SC 29425-2232
803 792-3224
Length: 3 Year(s) Total Positions: 15 (GYT: 4)
Program ID: 180-48-21-105

Tennessee
Memphis
University of Tennessee Program
University of Tennessee College of Medicine
Baptist Memorial Hospital
Regional Medical Center at Memphis
Veterans Affairs Medical Center (Memphis)
Program Director:
Michael Jacowitz, MD
University of Tennessee Memphis
Dept of Neurology
855 Monroe Ave Bm 415
Memphis, TN 38163
901 448-8109
Length: 3 Year(s) Total Positions: 15 (GYT: 0)
Subspecialties: CHN
Program ID: 180-47-21-106

Nashville
Vanderbilt University Program
Vanderbilt University Medical Center
Metro Nashville General Hospital
Veterans Affairs Medical Center (Nashville)
Program Director:
Gerald M Fiechtner, MD
Vanderbilt University Medical Center
2100 Pierce Ave
Nashville, TN 37212
615 936-5609
Length: 3 Year(s) Total Positions: 9 (GYT: 0)
Subspecialties: CHN
Program ID: 180-47-21-107

Texas
Dallas
University of Texas Southwestern Medical School Program
University of Texas Southwestern Medical School
Dallas County Hospital District-Parkland Memorial Hospital
Veterans Affairs Medical Center (Dallas)
Program Director:
Wilson W Bryan, MD
University of Texas Southwestern Medical Center
Dept of Neurology
5233 Harry Hines Blvd
Dallas, TX 75390-9008
214 648-4775
Length: 3 Year(s) Total Positions: 16 (GYT: 0)
Subspecialties: CHN
Program ID: 180-48-21-108

Galveston
University of Texas Medical Branch Hospitals Program
University of Texas Medical Branch Hospitals
Program Director:
John R Galloway, MD
The University of Texas Medical Branch Hospital
Dept of Neurology
9123 John Sealy Hosp E89
Galveston, TX 77555-6030
409 772-5466
Length: 3 Year(s) Total Positions: 9 (GYT: 0)
Program ID: 180-48-11-109

* Updated information not provided.
Houston
Baylor College of Medicine Program*
Baylor College of Medicine
Harris County Hospital District-Ben Taub General Hospital
Methodist Hospital
Veterans Affairs Medical Center (Houston)
Program Director:
Tetsuo Ashizawa, MD
Baylor College of Medicine
Dept of Neurology N8302
One Baylor Plaza
Houston, TX 77030
713 798-2704
Length: 3 Years Total Positions: 18 (GYI: 0)
Subspecialties: CIB
Program ID: 180-48-21-110

University of Texas at Houston Program
University of Texas Medical School at Houston
Hermann Hospital
Lyndon B Johnson General Hospital
University of Texas M D Anderson Cancer Center
Program Director:
Frank M Yatsu, MD
University of Texas Medical School at Houston
Dept of Neurology
5451 Fannin 7.044
Houston, TX 77030
713 792-2771
Length: 3 Years Total Positions: 8 (GYI: 0)
Subspecialties: CIB
Program ID: 180-48-31-111

Lackland AFB
Wilford Hall USAF Medical Center Program
Wilford Hall USAF Medical Center (SG)
Program Director:
Michael L Rosenberg, MD
Wilford Hall Medical Center/PSMN
2200 Bergquist Dr, Ste 1
Lackland AFB TX
San Antonio, TX 78236-5800
210 573-2947
Length: 3 Years Total Positions: 10 (GYI: 3)
Program ID: 180-48-21-127

Lubbock
Texas Tech University (Lubbock) Program
Texas Tech University Health Sciences Center at Lubbock
University Medical Center
Veterans Affairs Medical Center (Amarillo)
Program Director:
Judith E Hogg, MD
Texas Tech University Health Sciences Center
5501 4th St
Lubbock, TX 79410
806 743-2725
Length: 4 Years Total Positions: 2 (GYI: 0)
Subspecialties: CIB
Program ID: 180-48-21-135

San Antonio
University of Texas Health Science Center at San Antonio Program
University of Texas Medical School at San Antonio
Audie L Murphy Memorial Veteran's Hospital (San Antonio)
University Hospital-South Texas Medical Center
Program Director:
David G Sherman, MD
University of Texas Health Science Center
Div of Neurology
7703 Floyd Curl Dr
San Antonio, TX 78284-7833
210 617-5161
Length: 3 Years Total Positions: 10 (GYI: 0)
Program ID: 180-49-21-112

Utah
Salt Lake City
University of Utah Program
University of Utah Medical Center
Veterans Affairs Medical Center (Salt Lake City)
Program Director:
J Richard Baringer, MD
University of Utah School of Medicine
Dept of Neurology
50 N Medical Dr
Salt Lake City, UT 84132
801 581-4290
Length: 3 Years Total Positions: 14 (GYI: 2)
Subspecialties: CIB
Program ID: 180-48-21-113

Vermont
Burlington
Medical Center Hospital of Vermont Program
Medical Center Hospital of Vermont
Program Director:
Robert W Dohill, MD
Medical Center Hospital of Vermont
Brown 313
Colchester Ave
Burlington, VT 05401
802 566-4586
Length: 2 Years Total Positions: 6 (GYI: 0)
Program ID: 180-50-11-114

Virginia
Charlottesville
University of Virginia Program
University of Virginia Medical Center
Program Director:
G Frederick Woolf, MD
Dept of Neurology
Box 394
University of Virginia Medical Ctr
Charlottesville, VA 22908
804 982-5260
Length: 3 Years Total Positions: 15 (GYI: 0)
Subspecialties: CIB
Program ID: 180-51-11-115

Norfolk
Eastern Virginia Graduate School of Medicine Program
Eastern Virginia Graduate School of Medicine
Sentara Norfolk General Hospital
Veterans Affairs Medical Center (Hampton)
Program Director:
Thomas R Pellegreno, MD
Eastern Virginia Medical School
825 Fairfax Ave
Norfolk, VA 23507
804 446-5940
Length: 3 Years Total Positions: 5 (GYI: 0)
Program ID: 180-51-21-137

Richmond
Medical College of Virginia/Virginia Commonwealth University Program*
Medical College of Virginia/Virginia Commonwealth University
Hunters Holmes McGuire VA Medical Center (Richmond)
Medical College of Virginia Hospitals
Program Director:
Robert J DeVore, MD PhD MPH
E C Myer MD
MC/Virginia Commonwealth Univ
PO Box 80509
Richmond, VA 23298-0509
804 786-9720
Length: 4 Years Total Positions: 31 (GYI: 5)
Subspecialties: CIB
Program ID: 180-51-21-116

Washington
Seattle
University of Washington Program
University of Washington School of Medicine
Children's Hospital and Medical Center
Harborview Medical Center
University of Washington Medical Center
Veterans Affairs Medical Center (Seattle)
Program Director:
Phillip D Swanson, MD PhD
University of Washington School of Medicine
Dept of Neurology RG-27
Seattle, WA 98195
206 543-2540
Length: 3 Years Total Positions: 17 (GYI: 3)
Subspecialties: CIB
Program ID: 180-54-21-117

Tacoma
Madigan Army Medical Center Program
Madigan Army Medical Center
Harborview Medical Center
Program Director:
Frederick G Flynn, DO
Madigan Army Medical Center Neurology Serv
Tacoma, WA 98431-0900
206 696-1365
Length: 4 Years Total Positions: 9 (GYI: 2)
Program ID: 180-64-21-138

* Updated information not provided.
West Virginia
Morgantown
West Virginia University Program
West Virginia University Hospitals
Program Director:
Ludwig Gutmann, MD
West Virginia University HSC
Dept of Neurology
PO Box 8180
Morgantown, WV 26506-8180
304-293-5257
Length: 3 Year(s) Total Positions: 6 (GY: 0)
Subspecialties: CHN
Program ID: 195-55-11-118

Neuropathology
(Pathology-Anatomic and Clinical)

Alabama
Birmingham
University of Alabama Medical Center Program
University of Alabama Hospital
Veterans Affairs Medical Center (Birmingham)
Program Director:
Richard E Powers, MD
University of Alabama Hospital
Dept of Pathology
618 S 19th St UAB Station
Birmingham, AL 35294
205 344-6938
Length: 2 Year(s) Total Positions: 2 (GY: 0)
Program ID: 315-05-21-961

California
Los Angeles
UCLA Medical Center Program*
UCLA School of Medicine
UCLA Medical Center
Program Director:
Harry V Vinters, MD
University of California Los Angeles School of Medicine
Div of Neuropathology
Room 15-170 CHS
Los Angeles, CA 90024-1732
310 825-6191
Length: 2 Year(s) Total Positions: 1
Program ID: 315-05-21-968

University of Southern California Program
Los Angeles County-USC Medical Center
Program Director:
Carol A Miller, MD
Los Angeles County-University of Southern California
Med Ctr
1200 N State St Box 150
Los Angeles, CA 90033
213 234-7213
Length: 2 Year(s) Total Positions: 2 (GY: 0)
Program ID: 315-06-11-003

San Diego
University of California (San Diego) Program*
University of California (San Diego) Medical Center
Veterans Affairs Medical Center (San Diego)
Program Director:
Henry C Powell, MD
University of California San Diego Dept of Pathology
School of Medicine
8500 Gilman Dr
La Jolla, CA 92036-0612
858 534-3717
Length: 2 Year(s) Total Positions: 1
Subspecialties: NP
Program ID: 315-05-21-905

San Francisco
University of California (San Francisco) Program
University of California (San Francisco) School of Medicine
San Francisco General Hospital Medical Center
University of California (San Francisco) Medical Center
Veterans Affairs Medical Center (San Francisco)
Program Director:
Richard L Davis, MD
University of California (San Francisco)
3rd & Parnassus Ave
San Francisco, CA 94143-0596
415 476-5236
Length: 2 Year(s) Total Positions: 2 (GY: 0)
Program ID: 315-05-21-966

Stanford
Stanford University Program
Stanford University Hospital
Veterans Affairs Medical Center (Palo Alto)
Program Director:
Dickran S Horoupian, MD
Stanford University Medical Center
Pathology/Neuropathology
Rm 3-241
Stanford, CA 94305-5524
415 723-8041
Length: 2 Year(s) Total Positions: 2 (GY: 0)
Program ID: 315-05-21-907

Connecticut
New Haven
Yale-New Haven Medical Center Program
Yale New Haven Hospital
Program Director:
Laura Marquart, MD
Yale University School of Medicine
333 Cedar St
New Haven, CT 06510
203 737-4442
Length: 2 Year(s) Total Positions: 2
Program ID: 315-08-21-978

District of Columbia
Washington
Armed Forces Institute of Pathology Program
Armed Forces Institute of Pathology
Program Director:
Hernando Morea, MD
Armed Forces Institute of Pathology
Dept of Neuropathology G 061
5652 16th St NW
Washington, DC 20036-6000
202 676-2928
Length: 2 Year(s) Total Positions: 4 (GY: 0)
Program ID: 315-10-12-001

* Updated information not provided.
Florida

Gainesville

University of Florida Program
University of Florida College of Medicine
Shands Hospital at the University of Florida
Veterans Affairs Medical Center (Gainesville)
Program Director:
Thomas A. Radke, MD
University of Florida Dept of Pathology
Section of Neuropathology
PO Box 100276
Gainesville, FL 32610-0276
904 355-6238
Length: 2 Year(s)  Total Positions: 1 (GYI: 0)
Program ID: 315-11-21-010

Georgia

Atlanta

Emory University Program
Emory University School of Medicine
Emory University Hospital
Grady Memorial Hospital
Veterans Affairs Medical Center (Atlanta)
Program Director:
Stephen B. Hunter, MD
B-173 Emory University Hospital
Dept of Pathology
1364 Clifton Rd NE
Atlanta, GA 30322-0110
404 712-2423
Length: 2 Year(s)  Total Positions: 1 (GYI: 0)
Program ID: 315-13-21-012

Illinois

Chicago

Cook County Hospital Program*
Cook County Hospital
Program Director:
Marc O. Reyes, MD
Cook County Hospital
Div of Pathology
627 S Wood St 407
Chicago, IL 60612-9965
312 696-7175
Length: 2 Year(s)  Total Positions: 2
Program ID: 315-15-21-074

University of Chicago Program
University of Chicago Hospitals
Program Director:
Robert L. Wollmann, MD
University of Chicago Hospitals
5841 S Maryland Ave
MC8483
Chicago, IL 60637-1470
312 702-6166
Length: 2 Year(s)  Total Positions: 3 (GYI: 0)
Program ID: 315-16-21-078

Maywood

Loyola University Program
Foster G McCall Hospital-Loyola University of Chicago
Program Director:
Chinasauna Thomas, MD
Loyola University Medical Center
Dept of Pathology (Neuropathology)
2163 S First Ave
Maywood, IL 60153
708 216-6502
Length: 2 Year(s)  Total Positions: 2 (GYI: 0)
Program ID: 315-16-21-014

Massachusetts

Massachusetts General Hospital Program
Massachusetts General Hospital
Program Director:
K Tessa Hadley-Whitey, MD
Massachusetts General Hospital
Dept of Pathology-Neuropathology
14 Fruit St
Boston, MA 02114-3695
617 726-5154
Length: 2 Year(s)  Total Positions: 2
Program ID: 315-24-21-052

Michigan

Ann Arbor

University of Michigan Program
University of Michigan Hospitals
Program Director:
Paul E McKeever, MD PhD
University of Michigan Medical Center
N&B1 Medical Sciences
1551 Catherine Rd Box 0662
Ann Arbor, MI 48109-0662
313 888-1868
Length: 2 Year(s)  Total Positions: 2 (GYI: 0)
Program ID: 315-25-21-084

Minnesota

Rochester

Mayo Graduate School of Medicine Program
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Rochester)
Program Director:
Joseph R Prall, MD
Mayo Graduate School of Medicine Application
Processing Ctr
Mayo Graduate School of Medicine
200 First St SW
Rochester, MN 55905
507 284-3855
Length: 2 Year(s)  Total Positions: 2 (GYI: 0)
Program ID: 315-26-21-081

Missouri

St Louis

St Louis University Group of Hospitals Program
St Louis University School of Medicine
Cardinal Glennon Children's Hospital
St Louis University Hospital
Veterans Affairs Medical Center (St Louis)
Program Director:
Hyung D Chung, MD
Gregg K Edwards, Human Resources Director
St Louis University Hospital
PO Box 10261, 3026 Vista at Grand
St Louis, MO 63110-0260
314 577-8782
Length: 2 Year(s)  Total Positions: 1 (GYI: 0)
Program ID: 315-25-21-079

Iowa

Iowa City

University of Iowa Hospitals and Clinics Program
University of Iowa Hospitals and Clinics
Veterans Affairs Medical Center (Iowa City)
Program Director:
Michael N Hart, MD
University of Iowa Hospitals and Clinics
Dept of Pathology
105 ML
Iowa City, IA 52242-1009
319 353-8542
Length: 2 Year(s)  Total Positions: 9 (GYI: 3)
Program ID: 315-16-21-018

Maryland

Baltimore

Johns Hopkins University Program
Johns Hopkins University School of Medicine
Johns Hopkins Hospital
Program Director:
Donald L Price, MD
The Johns Hopkins University School of Medicine Rose 566
720 Rutland Ave
Baltimore, MD 21205-2186
410 614-5632
Length: 2 Year(s)  Total Positions: 3 (GYI: 0)
Program ID: 315-23-11-020

Massachusetts

Boston

Brigham and Women's Hospital Program
Brigham and Women's Hospital
Children's Hospital
Program Director:
William C Schoene, MD
William J Krupsky, MD
Brigham and Women's Hospital
Dept of Pathology
76 Francis St
Boston, MA 02115
617 732-7632
Length: 2 Year(s) (GYI: 0)
Program ID: 315-24-12-024

* Updated information not provided.
Washington University Program
Barnes Hospital
Program Director: Robert E. Schmidt, MD PhD
Neuropathology
Barnes Hospital Box 8116
One Barnes Hospital Plaza
St Louis, MO 63110
314-935-7429
Length: 2 Year(s) Total Positions: 2 (GYI: 0)
Program ID: 815-29-11026

New York

Bronx
Albert Einstein College of Medicine Program
Albert Einstein College of Medicine of Yeshiva University
Bronx Municipal Hospital Center
Montefiore Medical Center-Allen and Lois Moses Division
Montefiore Medical Center-White Hospital
Program Director:
Denis W. Krickus, MD
Asso Hirano, MD
Albert Einstein College of Medicine
1300 Morris Park Ave
Bronx, NY 10461-1002
718 430-2461
Length: 2 Year(s) Total Positions: 3 (GYI: 0)
Program ID: 815-35-21-0528

Brooklyn
SUNY Health Science Center at Brooklyn Program
SUNY HSC at Brooklyn College of Medicine
Kings County Hospital Center
University Hospital-SUNY Health Science Center at Rochester
Program Director:
Archisco P. Anzul, MD
Chandrakant Rao, MD
State University of New York Health Sciences at Brooklyn
Box 35 450 Clarkson Ave
Brooklyn, NY 11203
718 270-1419
Length: 2 Year(s) Total Positions: 2 (GYI: 0)
Program ID: 815-35-21-0522

Buffalo
SUNY at Buffalo Graduate Medical-Dental Education Consortium Program
SUNY at Buffalo School of Medicine
SUNY at Buffalo General Hospital
Erie County Medical Center
Program Director:
Reid B. Neff Jr, MD
Erie County Medical Center
462 Grider St
Buffalo, NY 14215
716 858-3114
Length: 2 Year(s)
Program ID: 815-35-21-0545

New York
Mount Sinai School of Medicine Program
Mount Sinai School of Medicine
Mount Sinai Medical Center
Program Director:
Daniel F. Perl, MD
Mount Sinai Medical Center
Neuropathology Div
5272 10101
New York, NY 10029
212 941-7371
Length: 2 Year(s) (GYI: 0)
Program ID: 815-35-31-0566

New York University Medical Center Program
New York University Medical Center
Bellevue Hospital Center
Program Director:
John Fearn, MD
New York University Medical Center
Div of Neuropathology
5272 10101
New York, NY 10029
212 941-7371
Length: 2 Year(s) Total Positions: 2 (GYI: 0)
Program ID: 815-35-21-0511

Presbyterian Hospital in the City of New York Program
Presbyterian Hospital in the City of New York
Program Director:
James E. Goldman, MD PhD
Columbia University College of Physicians and Surgeons
Div of Neuropathology
630 W 166 St
New York, NY 10027
212 305-4521
Length: 2 Year(s) Total Positions: 2 (GYI: 0)
Program ID: 815-35-21-0527

Rochester
University of Rochester Program
Syracuse University Hospital of the University of Rochester
Program Director:
James M. Powers, MD
Dept of Pathology & Neurology
Univ of Rochester Medical Center
600 Elmwood Ave
Rochester, NY 14642
716 275-3002
Length: 2 Year(s)
Program ID: 815-35-11-057

Stony Brook
SUNY at Stony Brook Program
SUNY at Stony Brook School of Medicine
SUNY at Stony Brook Hospital
State University of New York at Stony Brook
University Hospital
Dept of Pathology
5272 10101
New York, NY 10029
212 941-7371
Length: 2 Year(s) Total Positions: 2 (GYI: 0)
Program ID: 815-35-21-0585

Syracuse
SUNY Health Science Center at Syracuse Program
University Hospital-SUNY Health Science Center at Syracuse
Program Director:
George H. Collins, MD
State University of New York Health Science Center
Dept of Pathology
Syracuse, NY 13210
315 464-5170
Length: 2 Year(s) Total Positions: 1 (GYI: 0)
Program ID: 815-35-11-0585

North Carolina

Chapel Hill
University of North Carolina Hospitals Program
University of North Carolina Hospitals
Program Director:
Thomas W. Bouldin, MD
Kinko I. Suzuki, MD
Department of Pathology
Chapel Hill, NC 12598-7502
919 962-6535
Length: 2 Year(s) Total Positions: 2
Program ID: 815-35-21-0585

Durham
Duke University Program
Duke University Medical Center
Program Director:
Boyle S. Graham, MD PhD
Duke University Medical Center
Dept of Pathology
Rm 3B25
Durham, NC 27710
919 684-6425
Length: 2 Year(s) Total Positions: 4 (GYI: 0)
Program ID: 815-35-11-0585

Ohio

Cincinnati
University of Cincinnati Hospital Group Program
University of Cincinnati Hospital
Program Director:
Gabrielle M. DeCori-Gray, MD
University of Cincinnati Medical Center
Mail Location #533
Cincinnati, OH 45267-0533
513 588-7109
Length: 2 Year(s) Total Positions: 1 (GYI: 0)
Program ID: 815-35-21-0585

*Updated information not provided.*

Graduate Medical Education Directory
534
<table>
<thead>
<tr>
<th>Location</th>
<th>Program Name</th>
<th>Address Details</th>
<th>Program Director</th>
<th>Phone Number</th>
<th>Length: Year(s) Total Positions:</th>
<th>Program ID:</th>
<th>Notes</th>
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<tbody>
<tr>
<td>Cleveland</td>
<td>Case Western Reserve University Program*</td>
<td>University Hospitals of Cleveland</td>
<td>Pier Luigi Gambetti, MD</td>
<td>216-844-1808</td>
<td>2 (GY: 0)</td>
<td>815-98-11087</td>
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<td>Columbus</td>
<td>Ohio State University Program</td>
<td>Ohio State University Medical Center</td>
<td>Carl P Boesel, MD</td>
<td>614 292-5884</td>
<td>2 (GY: 0)</td>
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<td>Oklahoma</td>
<td>University of Oklahoma Health Sciences Center Program</td>
<td>University of Oklahoma College of Medicine-Oklahoma City</td>
<td>Roger A Brumback, MD</td>
<td>405 371-3492</td>
<td>2 (GY: 0)</td>
<td>815-31-21480</td>
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<td>Pittsburgh</td>
<td>University Health Center of Pittsburgh Program</td>
<td>University Health Center of Pittsburgh</td>
<td>Clayton A Wiley, MD</td>
<td>412 947-3745</td>
<td>2 (GY: 0)</td>
<td>315-41-21-042</td>
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<td>Providence</td>
<td>Brown University Program</td>
<td>Rhode Island Hospital</td>
<td>Edward G Stoops, MD</td>
<td>401 444-5155</td>
<td>2 (GY: 0)</td>
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<td>Tennessee</td>
<td>Vanderbilt University Program</td>
<td>Vanderbilt University Medical Center</td>
<td>William O Whetzel Jr, MD</td>
<td>615 323-3966</td>
<td>2 (GY: 0)</td>
<td>315-47-21-073</td>
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<td>Texas</td>
<td>University of Texas Southwestern Medical School Program</td>
<td>University of Texas Southwestern Medical Center</td>
<td>Charles L White III, MD</td>
<td>214 946-2148</td>
<td>3 (GY: 0)</td>
<td>815-48-21-083</td>
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<td>Utah</td>
<td>Salt Lake City Program</td>
<td>University of Utah Medical Center</td>
<td>Jeannette J Townsend, MD</td>
<td>801-581-5907</td>
<td>2 (GY: 0)</td>
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<tr>
<td>Virginia</td>
<td>University of Virginia Program</td>
<td>University of Virginia Medical Center</td>
<td>Scott &amp; Vandenberg, MD</td>
<td>804 904-9176</td>
<td>2 (GY: 0)</td>
<td>815-51-21-063</td>
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<td>Richmond</td>
<td>Medical College of Virginia/Virginia Commonwealth University Program</td>
<td>Medical College of Virginia/Virginia Commonwealth University</td>
<td>William I Rosenblum, MD</td>
<td>804 828-9763</td>
<td>2 (GY: 0)</td>
<td>815-51-11-461</td>
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</table>

*Updated information not provided.*
Accredited Programs in Neuropathology (Pathology-Anatomic and Clinical)

Washington
Seattle
University of Washington Program
University of Washington School of Medicine
University of Washington Medical Center
Program Director:
Ellsworth C Ahlward Jr, MD
University of Washington Medical School
Div of Neuropathology B2-05
1950 NE Pacific St
Seattle, WA 98195
206-548-1010
Length: 2 Year(s)  Total Positions: 2  (GYI: 0)
Program ID: 315-54-11-022

West Virginia
Morgantown
West Virginia University Program
West Virginia University Hospitals
Program Director:
Sydney S Schachter Jr, MD
West Virginia University
Robert C Byrd Health Science Center
Dept of Pathology PO Box 9503
Morgantown, WV 26506-9503
304-293-3502
Length: 2 Year(s)  Total Positions: 1  (GYI: 0)
Program ID: 315-55-21-082

Neuroradiology
(Radiology-Diagnostic)

Alabama
Birmingham
University of Alabama Medical Center Program
University of Alabama Hospital
Children's Hospital of Alabama
Veterans Affairs Medical Center (Birmingham)
Program Director:
Tuber E Gammel, MD
University of Alabama Hospital
619 S 18th St
Birmingham, AL 35233-6830
205-996-3840
Length: 1 Year(s)  Total Positions: 2
Program ID: 423-01-21-001

Arkansas
Little Rock
University of Arkansas for Medical Sciences Program
University of Arkansas College of Medicine
Arkansas Children's Hospital
John L McClellan Memorial Veterans Hospital
University Hospital of Arkansas
Program Director:
Edgardo Anguiano, MD
University Hospital for Medical Sciences
4101 W Markham #595
Little Rock, AR 72205
501-686-6929
Length: 1 Year(s)  Total Positions: 1
Program ID: 423-04-21-043

Arizona
Phoenix
St Joseph's Hospital and Medical Center Program
St Joseph's Hospital and Medical Center
Program Director:
John A Hodak, MD
Barrow Neurological Institute
350 W Thomas Rd PO Box 2071
Phoenix, AZ 85001-2071
602-465-3430
Length: 1 Year(s)  Total Positions: 8
Program ID: 423-03-21-002

California
Loma Linda
Loma Linda University Program
Loma Linda University Medical Center
Program Director:
Anton N Rasso, MD
Loma Linda University Medical Center
Neuroradiology B623
11254 Anderson St
Loma Linda, CA 92354-2970
909-824-4394
Length: 1 Year(s)  Total Positions: 1
Program ID: 423-05-21-085

Los Angeles
UCLA Medical Center Program
UCLA School of Medicine
UCLA Medical Center
Program Director:
Gary B Duckworth, MD
UCLA School of Medicine
B2-198 CHS
10833 Le Conte Ave
Los Angeles, CA 90024
213-206-8867
Length: 1 Year(s)  Total Positions: 4
Program ID: 423-05-21-081

University of Southern California Program
Los Angeles County-USC Medical Center
Childrens Hospital of Los Angeles
Program Director:
Hervey D Segall, MD
Los Angeles County-USC Medical Center
1200 N State St
Box 762
Los Angeles, CA 90033
213-232-7425
Length: 1 Year(s)  Total Positions: 5
Program ID: 423-05-21-024

* Updated information not provided.
San Diego
University of California (San Diego) Program
University of California (San Diego) Medical Center
Program Director: John E. Hesselink, MD
UCSD Medical Center
Dept of Radiology 8756
200 W Arbor Dr
San Diego, CA 92103-8756
619 543-3608
Length: 1 Year(s)  Total Positions: 1
Program ID: 423-05-21-074

San Francisco
University of California (San Francisco) Program
University of California (San Francisco) School of Medicine
San Francisco General Hospital Medical Center
San Francisco Magnetic Resonance Center
University of California (San Francisco) Medical Center Veterans Affairs Medical Center (San Francisco)
Program Director: William P. Dillon, MD
UCSF Department of Radiology
505 Parnassus Ave 1-318
San Francisco, CA 94143-0628
415 476-6565
Length: 1 Year(s)  Total Positions: 1
Program ID: 423-05-21-044

Stanford
Stanford University Program*
Stanford University Hospital
Program Director: Barbara Lane, MD
Stanford University Medical Center
S-072
Stanford, CA 94305
415 206-7405
Length: 1 Year(s)
Program ID: 423-05-21-075

Torrance
Los Angeles County-Harbor-UCLA Medical Center Program
Los Angeles County-Harbor-UCLA Medical Center
Program Director: C. Mark Mehdri, MD
Los Angeles-Harbor-UCLA Medical Center
1000 W Carson St
PO Box 2010
Torrance, CA 90050-2010
310 516-2000
Length: 1 Year(s)  Total Positions: 2
Program ID: 423-05-21-003

Colorado
Denver
University of Colorado Program*
University of Colorado Health Sciences Center
Program Director: John C. Stears, MD
University of Colorado Health Sciences Center
Dept of Radiology
1200 E 22nd Ave Box A 034
Denver, CO 80262-0034
303 275-8874
Length: 1 Year(s)  Total Positions: 2
Program ID: 423-07-21-094

Connecticut
New Haven
Yale-New Haven Medical Center Program*
Yale-New Haven Hospital
Program Director: Gordon Sze, MD
Yale University School of Medicine
333 Cedar St.
New Haven, CT 06510
203 362-5102
Length: 1 Year(s)  Total Positions: 4
Program ID: 423-05-21-025

District of Columbia
Washington
George Washington University Program
George Washington University School of Medicine
Children's National Medical Center
George Washington University Hospital
Program Director: William O. Bank, MD
George Washington University Hospital
Dept of Radiology
901 23rd St NW
Washington, DC 20037
202 951-5571
Length: 1 Year(s)  Total Positions: 3
Program ID: 423-10-21-045

Georgetown University Program*
Georgetown University Hospital
Children's National Medical Center
Children's Warren Grant Magnuson Clinical Center
Program Director: Victor Schullinger, MD
Georgetown University Hospital
3800 Reservoir Rd NW
Washington, DC 20007
202 784-9400
Length: 1 Year(s)  Total Positions: 2
Program ID: 423-10-21-026

Florida
Gainesville
University of Florida Program*
University of Florida College of Medicine
Shands Hospital at the University of Florida
Veterans Affairs Medical Center (Gainesville)
Program Director: Ronald G. Quinlan, MD
University of Florida
Box 3-374
J. Hillis Miller Health Center
Gainesville, FL 32610-0374
904 642-2291
Length: 1 Year(s)  Total Positions: 2
Program ID: 423-11-21-046

Jacksonville
University of Florida Health Science Center/Jacksonville Program
University Medical Center (UFHSCJ)
Program Director: David A. Clayman, MD
Dept of Neuroradiology
University Medical Center
655 Eighth St
Jacksonville, FL 32209
904 648-4225
Length: 1 Year(s)  Total Positions: 1
Program ID: 423-11-21-092

Miami
University of Miami-Jackson Memorial Medical Center Program*
University of Miami-Jackson Memorial Medical Center
Program Director: M. Judith D. Post, MD
University of Miami-Jackson Memorial Medical Center
PO Box 016660
Miami, FL 33101
305 605-6447
Length: 1 Year(s)
Program ID: 423-11-21-076

Tampa
University of South Florida Program
University of South Florida College of Medicine
James A. Haley Veterans Hospital
Tampa General Healthcare
Program Director: Paul F. McCarthy, MD
University of South Florida
12801 N Bruce B Downs Blvd
Box 17
Tampa, FL 33612-013
813 974-2530
Length: 1 Year(s)  Total Positions: 3
Program ID: 423-11-21-227

*Updated information not provided.
## Georgia
### Atlanta
#### Emory University Program
*Emory University School of Medicine*
*Grady Memorial Hospital*
**Program Director:** James C. Hoffman, MD
**Dept of Radiology Emory University School of Medicine**
1364 Clifton Rd NE
Atlanta, GA 30322
404 727-4838
Length: 1 Year(s)  Total Positions: 7
Program ID: 429-13-21-006

## Virginia
### Richmond
#### VCU Program
*Virginia Commonwealth University*
**Program Director:** Gary K. Long, MD
**School of Medicine**
1201 East Broad St
Richmond, VA 23284
804 828-8829
Length: 1 Year(s)  Total Positions: 3
Program ID: 429-23-21-075

## Arizona
### Phoenix
#### Arizona Program
*University of Arizona*
**Program Director:** William R. Boss, MD
**College of Medicine**
1501 N Campbell Ave
Tucson, AZ 85724
520 626-7156
Length: 1 Year(s)  Total Positions: 4
Program ID: 429-23-21-003

## Florida
### Miami
#### Miami Program
*University of Miami*
**Program Director:** Michael J. Zirkin, MD
**Graduate Medical Education**
4200 Firth St
Miami, FL 33133
305 243-6782
Length: 1 Year(s)  Total Positions: 4
Program ID: 429-23-21-004

## Iowa
### Iowa City
#### University of Iowa Program
*University of Iowa*
**Program Director:** Thomas A. Young, MD
200 Hawkins Dr
Iowa City, IA 52242-1069
319 356-1986
Length: 1 Year(s)  Total Positions: 4
Program ID: 429-13-21-011

# Maryland
### Baltimore
#### Johns Hopkins University Program
*Johns Hopkins University*
**Program Director:** A. Michelle Smith, MD
50 S. Broadway
Baltimore, MD 21205
410 955-8800
Length: 1 Year(s)  Total Positions: 3
Program ID: 429-23-21-007

#### University of Maryland Program
*University of Maryland School of Medicine*
**Program Director:** Yuliy Novitski, MD
1401 Calvert St
Baltimore, MD 21201
410 706-3030
Length: 1 Year(s)  Total Positions: 2
Program ID: 429-23-21-030

## Massachusetts
### Boston
#### Brigham and Women's Hospital/Harvard Medical School Program
*Brigham and Women's Hospital*
**Program Director:** Richard S. Smith, MD
200 Longwood Ave
Boston, MA 02115
617 632-2350
Length: 1 Year(s)  Total Positions: 6
Program ID: 429-24-21-065

#### Massachusetts General Hospital/Harvard Medical School Program
*Massachusetts General Hospital*
**Program Director:** Juan M. Turrentine, MD
55 Fruit St
Boston, MA 02114
617 726-3344
Length: 1 Year(s)  Total Positions: 8
Program ID: 429-24-21-047

#### Tufts University Program
*Tufts University School of Medicine*
**Program Director:** Mark E. Tarlovsky, MD
70 Washington St
Boston, MA 02111
617 632-2350
Length: 1 Year(s)  Total Positions: 3 (GYT: 0)
Program ID: 429-24-21-077

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* Updated information not provided.
Burlington  
Lahey Clinic Program  
Lahey Clinic  
Program Director:  
Carl A Geyer, MD  
Lahey Clinic Medical Center  
41 Mall Rd  
Burlington, MA 01805  
617-273-8170  
Length: 1 Year(s)  
Total Positions: 1  
Program ID: 423-24-51-088

Royal Oak  
William Beaumont Hospital Program  
William Beaumont Hospital  
Program Director:  
David Wesolowski, MD  
William Beaumont Hospital  
3601 W 13 Mile Rd  
Royal Oak, MI 48073  
810-551-2198  
Length: 1 Year(s)  
Total Positions: 2  
Program ID: 423-25-21-050

Washington University Program*  
Barnes Hospital  
Mallinckrodt Institute of Radiology  
Program Director:  
Moktar Gado, MD  
Mallinckrodt Institute of Radiology  
Dept of Radiology  
516 S Kingshighway  
St Louis, MO 63110  
314-362-5600  
Length: 1 Year(s)  
Program ID: 423-25-21-079

Worcester  
University of Massachusetts Medical Center Program*  
University of Massachusetts Medical Center  
Program Director:  
Ronald L Ragland, MD  
University of Massachusetts Hospital  
55 Lake Ave N  
Worcester, MA 01655  
508-856-5965  
Length: 1 Year(s)  
Total Positions: 2  
Program ID: 423-24-51-048

Michigan  
Ann Arbor  
University of Michigan Program  
University of Michigan Hospitals  
Veterans Affairs Medical Center (Ann Arbor)  
Program Director:  
James A Brunberg, MD  
University of Michigan Hospitals  
1500 E Medical Center Dr  
Room B32811  
Ann Arbor, MI 48109-0630  
313-936-8072  
Length: 1 Year(s)  
Total Positions: 4  
Program ID: 423-25-21-012

Detroit  
Henry Ford Hospital Program  
Henry Ford Hospital  
Program Director:  
Suresh C Patel, MD  
Henry Ford Hospital  
Dept of Radiology  
2799 W Grand Blvd  
Detroit, MI 48202  
313-876-1367  
Length: 1 Year(s)  
Total Positions: 4  
Program ID: 423-25-21-067

Wayne State University/Detroit Medical Center Program  
Wayne State University School of Medicine  
Children's Hospital of Michigan  
Harper Hospital  
Program Director:  
Harvey L Wilner, MD  
Harper Hospital  
3980 John  
Detroit, MI 48201  
313-745-8411  
Length: 1 Year(s)  
Total Positions: 2  (GYI: 0)  
Program ID: 423-25-21-066

Minnesota  
Minneapolis  
University of Minnesota Program  
University of Minnesota Medical School  
Hennepin County Medical Center  
University of Minnesota Hospital and Clinic  
Veterans Affairs Medical Center (Minneapolis)  
Program Director:  
Kenn B Romley, MD  
University of Minnesota Hospital and Clinics  
Dept of Radiology  
230 Delaware St SE Box 282  
Minneapolis, MN 55455  
612-626-1963  
Length: 1 Year(s)  
Total Positions: 2  
Program ID: 423-26-21-090

Rochester  
Mayo Graduate School of Medicine Program  
Mayo Graduate School of Medicine-Mayo Foundation  
Mayo Clinic (Rochester)  
Rochester Methodist Hospital  
St Mary's Hospital of Rochester  
Program Director:  
Patrick E Loetmer, MD  
MGSM Application Processing Center  
Mayo Graduate School of Medicine  
200 First St SW  
Rochester, MN 55905  
507-284-4243  
Length: 1 Year(s)  
Total Positions: 4  
Program ID: 423-26-21-019

New Mexico  
Albuquerque  
University of New Mexico Program  
University of New Mexico School of Medicine  
University Hospital  
Veterans Affairs Medical Center (Albuquerque)  
Program Director:  
Blaine L Hart, MD  
University of New Mexico Health Sciences Center  
Dept of Radiology  
915 Camino de Salud NE  
Albuquerque, NM 87131-5336  
505-272-0602  
Length: 1 Year(s)  
Total Positions: 2  
Program ID: 423-34-21-049

New York  
Albany  
Albany Medical Center Program  
Albany Medical Center Hospital  
Program Director:  
William A Wade, MD  
Albany Medical Center  
Dept of Radiology  
45 New Scotland Ave A-113  
Albany, NY 12208  
518-262-3388  
Length: 1 Year(s)  
Total Positions: 2  
Program ID: 423-34-21-014

Bronx  
Albert Einstein College of Medicine Program*  
Albert Einstein College of Medicine of Yeshiva University  
Montefiore Medical Center-larry and Lucy Moses Division  
Program Director:  
Jacqueline A Bello, MD  
Montefiore Medical Center  
Dept of Radiology  
111 E 210th St  
Bronx, NY 10467  
718-928-4030  
Length: 1 Year(s)  
Total Positions: 3  
Program ID: 423-36-21-051

* Updated information not provided.
Accredited Programs in Neuroradiology (Radiology-Diagnostic)

Manhasset
North Shore University Hospital Program
North Shore University Hospital
Program Director: Roger A Hymans, MD
North Shore University Hospital
360 Community Dr
Manhasset, NY 11030
516 662-4900
Length: 1 year(s) Total Positions: 2
Program ID: 423-05-21-015

New Hyde Park
Albert Einstein College of Medicine at Long Island Jewish Medical Center Program
Long Island Jewish Medical Center
Queens Hospital Center
Program Director: Mahendra Patel, MD
Long Island Jewish Medical Center
Dept of Radiology
New Hyde Park, NY 11040
718 470-7175
Length: 1 year(s) Total Positions: 1
Program ID: 423-95-21-099

New York
Albert Einstein College of Medicine at Beth Israel Medical Center Program
Beth Israel Medical Center
Program Director: Wen C Yang, MD
Beth Israel Medical Center
16th St at First Ave
New York, NY 10003
212 420-5044
Length: 1 year(s) Total Positions: 1
Program ID: 423-95-21-094

Mount Sinai School of Medicine Program
Mount Sinai School of Medicine
Mount Sinai Medical Center
Program Director: Michael Sacher, MD
Mount Sinai Med Ctr Box 1234
Dept of Radiology
One Gustave L Levy Pl
New York, NY 10029
212 241-4615
Length: 1 year(s) Total Positions: 1
Program ID: 423-95-21-094

New York Hospital/Cornell Medical Center Program
New York Hospital
Memorial Sloan-Kettering Cancer Center
Program Director: Robert D Zimmerman, MD
New York Hospital/Cornell Medical Center
525 E 68th St
New York, NY 10021
212 746-3574
Length: 1 year(s) Total Positions: 5
Program ID: 423-95-21-052

New York University Medical Center Program
New York University Medical Center
Bellevue Hospital Center
Veterans Affairs Medical Center (Manhattan)
Program Director: Irvin I Kirnoff, MD
New York University Medical Center
550 First Ave
New York, NY 10016
212 263-6210
Length: 1 year(s) Total Positions: 6
Program ID: 423-35-21-016

Presbyterian Hospital in the City of New York Program
Presbyterian Hospital in the City of New York
Program Director: Alexander G Khandji, MD
Columbia Presbyterian Medical Center
Dept of Radiology Neuroradiology
177 Fort Washington Ave MHB 4-156
New York, NY 10032
212 305-7690
Length: 1 year(s) Total Positions: 4
Program ID: 423-35-21-046

Rochester
University of Rochester Program
Strong Memorial Hospital of the University of Rochester
Program Director: Leona M Kotonev, MD, PhD
Strong Memorial Hospital Box 648
601 Elmwood Ave
Rochester, NY 14642-8648
716 276-6200
Length: 1 year(s) Total Positions: 1
Program ID: 423-35-21-091

Stony Brook
SUNY at Stony Brook Program
University Hospital-SUNY at Stony Brook
Program Director: Clemente T Roque, MD
University Hospital-SUNY Stony Brook Health Science Center
Level 4 Rm 602
Health Sci Ctr
Stony Brook, NY 11794-8460
516 444-3494
Length: 1 year(s) Total Positions: 2
Program ID: 423-35-21-093

Syracuse
SUNY Health Science Center at Syracuse Program
University Hospital-SUNY Health Science Center at Syracuse
Veterans Affairs Medical Center (Syracuse)
Program Director: John J Wasko, MD
SUNY Health Science at Syracuse
750 E Adams St
Syracuse, NY 13210
315 464-7437
Length: 1 year(s) Total Positions: 2
Program ID: 423-35-21-032

Valhalla
New York Medical College at Westchester County Medical Center Program
New York Medical College
Westchester County Medical Center
Program Director: Michael S Tenner, MD
Westchester County Medical Center
Dept of Radiology
Valhalla, NY 10595
914 258-5546
Length: 1 year(s) Total Positions: 1
Program ID: 423-35-21-045

North Carolina
Chapel Hill
University of North Carolina Hospitals Program
University of North Carolina Hospitals
Program Director: Mauricio Castro, MD
University of North Carolina Hospital
Dept of Radiology
3324 Old Infirmary
Chapel Hill, NC 27599-7510
919 843-3094
Length: 1 year(s)
Program ID: 423-36-21-068

Durham
Duke University Program
Duke University Medical Center
Program Director: Robert D'Torre, MD, MPH
Duke University Medical Center
PO Box 8088
Durham, NC 27710
119 681-2911
Length: 1 year(s) Total Positions: 5
Program ID: 423-36-21-070

Winston-Salem
Bowman Gray School of Medicine Program
North Carolina Baptist Hospital
Program Director: Dixon M Hoots, MD
Bowman Gray School of Medicine
Dept of Radiology
Medical Center Blvd
Winston-Salem, NC 27157-1088
919 716-6025
Length: 1 year(s) Total Positions: 4
Program ID: 423-36-21-060

Ohio
Cincinnati
University of Cincinnati Hospital Group Program
University of Cincinnati Hospital
Program Director: Thomas A Tunstall, MD
University of Cincinnati Hospital
234 Goodman St
Cincinnati, OH 45267-0742
513 558-7044
Length: 1 year(s) Total Positions: 2
Program ID: 423-36-21-042

* Updated information not provided.
Cleveland
Case Western Reserve University Program
University Hospitals of Cleveland Veterans Affairs Medical Center (Cleveland)
Program Director:
Charles F Lanteri, MD
University Hospitals of Cleveland
Dep't of Radiology
11100 Euclid Ave
Cleveland, OH 44106-5000
216 844-5721
Length: 1 Year(s) Total Positions: 1
Program ID: 423-36-21-017

Cleveland Clinic Foundation Program
Cleveland Clinic Foundation
Program Director:
Pawl M Bugliere, MD
Cleveland Clinic Foundation
9500 Euclid Ave L10
Cleveland, OH 44195-5383
216 444-7095
Length: 1 Year(s) Total Positions: 4
Program ID: 423-36-21-054

Columbus
Ohio State University Program
Ohio State University Medical Center
Program Director:
Douglas W Chakravarthy, MD
The Ohio State University
Dept of Radiology RH-S 209
60 W Tenth Ave
Columbus, OH 43210
614 293-3315
Length: 1 Year(s) Total Positions: 2
Program ID: 423-36-21-018

Philadelphia
MCPH/Hahnemann University Hospital Program
Hahnemann University Hospital
Program Director:
Beverly L Henshey, MD
Hahnemann University
Broad & Vine Sts
Mail Stop 206
Philadelphia, PA 19102
215 732-8702
Length: 1 Year(s) Total Positions: 1
Program ID: 423-41-21-036

Temple University Program
Temple University Hospital
Program Director:
Orest B Boyko, MD
Temple University Hospital
Broad & Ontario Sts
Philadelphia, PA 19140
215 707-4200
Length: 1 Year(s) Total Positions: 2
Program ID: 423-41-21-056

Thomas Jefferson University Program
Thomas Jefferson University Hospital Children's Hospital of Philadelphia
Program Director:
Carlos F Gonzalez, MD
Thomas Jefferson University Hospital
132 S Twelfth St Ste 1072
Main Bldg 10th Fl
Philadelphia, PA 19107
215 655-5447
Length: 1 Year(s) Total Positions: 6
Program ID: 423-41-21-068

University of Pennsylvania Program
Hospital of the University of Pennsylvania Children's Hospital of Philadelphia Veterans Affairs Medical Center (Philadelphia)
Program Director:
Robert J Grossman, MD
3400 Spruce St
Dept of Radiology
Hosp of the Univ of Pennsylvania
Philadelphia, PA 19104-4283
215 662-8885
Length: 1 Year(s) Total Positions: 8
Program ID: 423-41-21-087

Pittsburgh
MCPH/Allegeny General Hospital Program
Allegeny General Hospital
Program Director:
Ziad E Derb, MD
Dept of Radiology
Allegeny General Hospital
330 E North Ave
Pittsburgh, PA 15212-5886
412 355-4122
Length: 1 Year(s) Total Positions: 1
Program ID: 423-41-21-019

University Health Center of Pittsburgh Program
University Health Center of Pittsburgh Presbyterian University Hospital/UPMC Veterans Affairs Medical Center (Pittsburgh)
Program Director:
Charles A Jungreis, MD
University of Pittsburgh Medical Center
Dept of Radiology
290 Lothrop St
Pittsburgh, PA 15213
412 647-3530
Length: 1 Year(s) Total Positions: 2
Program ID: 423-41-21-067

South Carolina
Charleston
Medical University of South Carolina Program
Medical University of South Carolina College of Medicine MUSC Medical Center
Program Director:
Joseph A Horton, MD
MUSC Med Ctr
171 Ashley Ave
Charleston, SC 29425-2286
803 792-1524
Length: 1 Year(s) Total Positions: 1
Program ID: 423-45-21-093

Tennessee
Nashville
Vanderbilt University Program
Vanderbilt University Medical Center
Program Director:
Thomas S Dina, MD
Vanderbilt University Medical Center
Dep't of Radiology
1161 21st Ave S Rm B 4151 MCN
Nashville, TN 37232-2675
615 343-3572
Length: 1 Year(s) Total Positions: 2
Program ID: 423-47-21-058

Texas
Dallas
University of Texas Southwestern Medical School Program
University of Texas Southwestern Medical School Dallas County Hospital District- Parkland Memorial Hospital
Zale-Lipshy University Hospital
Program Director:
Phillip Parry, MD
University of Texas Southwestern Medical Center Radiology Dept
5223 Harry Hines Blvd
Dallas, TX 75390-8896
214 648-3928
Length: 1 Year(s) Total Positions: 4
Program ID: 423-48-21-059

Galveston
University of Texas Medical Branch Hospitals Program
University of Texas Medical Branch Hospitals
Program Director:
Pastrino C Cintron Jr, MD
University ofTexas Medical Branch
Dept of Radiology G-09
Galveston, TX 77555-0709
409 761-2330
Length: 1 Year(s) Total Positions: 2
Program ID: 423-48-21-020

Houston
Baylor College of Medicine Program
Baylor College of Medicine Methodist Hospital
Program Director:
Michel E Mawad, MD
Baylor College of Medicine
5500 Fannin MS 033
Houston, TX 77030
713 798-4696
Length: 1 Year(s) Total Positions: 2
Program ID: 423-48-21-060

* Updated information not provided.
Accredited Programs in Neuroradiology (Radiology-Diagnostic)

University of Texas at Houston Program
University of Texas Medical School at Houston
Hermann Hospital
Lyndon B. Johnson General Hospital
University of Texas M. D. Anderson Cancer Center
Program Director:
Joel W. Youkley, MD
University of Texas Houston Health Science Center
6441 Fannin 2.100 MSB
Houston, TX 77030
713 704-1776
Length: 1 Year(s) Total Positions: 2
Program ID: 423-48-21-041

San Antonio
University of Texas Health Science Center at San Antonio Program
University of Texas Medical School at San Antonio
Audie L. Murphy Memorial Veterans Hospital (San Antonio)
University Hospital South Texas Medical Center
Program Director:
J Randy Jenkins, MD
University of Texas Health Science Center
7700 Floyd Curl Dr
Radiology-Neuroradiology
San Antonio, TX 78284-7900
210 657-6488
Length: 1 Year(s) Total Positions: 2
Program ID: 423-49-21-061

Utah
Salt Lake City
University of Utah Program
University of Utah Medical Center
Veterans Affairs Medical Center (Salt Lake City)
Program Director:
J Derick Barnesberger, MD
Dept of Radiology
50 N Medical Dr
Salt Lake City, UT 84132
801-581-7553
Length: 1 Year(s) Total Positions: 6
Program ID: 423-48-21-062

Virginia
Charlottesville
University of Virginia Program
University of Virginia Medical Center
Program Director:
Wayne S. Cali, MD
University of Virginia Hospital
Dept of Radiology Box 170
Div of Neuroradiology
Charlottesville, VA 22908
804 924-9399
Length: 1 Year(s) Total Positions: 2
Program ID: 423-61-21-063

Richmond
Medical College of Virginia/Virginia Commonwealth University Program*
Medical College of Virginia/Virginia Commonwealth University
Hunter Holmes McGuire VA Medical Center (Richmond)
Medical College of Virginia Hospitals
Program Director:
Wendy K. Smoker, MD
MCW/Virginia Commonwealth Univ
PO Box 800616
Richmond, VA 23298-0615
804 786-8631
Length: 1 Year(s) Total Positions: 4
Program ID: 423-61-21-021

Washington
Seattle
University of Washington Program
University of Washington School of Medicine
Harborview Medical Center
University of Washington Medical Center
Veterans Affairs Medical Center (Seattle)
Program Director:
Kenneth R. MacLennan, MD
University of Washington
Dept of Radiology SH-05
Seattle, WA 98195
206 543-2729
Length: 1 Year(s) Total Positions: 6
Program ID: 423-54-21-038

Wisconsin
Madison
University of Wisconsin Program
University of Wisconsin Hospital and Clinics
Program Director:
Patrick A. Teras, MD
University of Wisconsin Hospital and Clinics
600 Highland Ave
Madison, WI 53792-3323
608 263-6179
Length: 1 Year(s) Total Positions: 2
Program ID: 423-56-21-222

Milwaukee
Medical College of Wisconsin Program
Medical College of Wisconsin Affiliated Hospitals Inc
Principia Memorial Lutheran Hospital
Program Director:
David L. Daniels, MD
Medical College of Wisconsin-Coney Clinic
5700 W Wisconsin Ave
Milwaukee, WI 53226
414 258-3122
Length: 1 Year(s) Total Positions: 1
Program ID: 423-56-21-039

Nuclear Medicine

Alabama
Birmingham
University of Alabama Medical Program
University of Alabama Hospital
Veterans Affairs Medical Center (Birmingham)
Program Director:
Eva V Dukovsky, MD PhD
Div of Nuclear Medicine
University of Alabama Hospital
601 18th Ave S
Birmingham, AL 35233-6855
205 694-2140
Length: 2 Year(s) Total Positions: 4
Program ID: 290-01-21-047

Arizona
Tucson
University of Arizona Program
University of Arizona College of Medicine
University Medical Center
Veterans Affairs Medical Center (Tucson)
Program Director:
James M. Woolfenden, MD
University of Arizona Health Sciences Center
Div of Nuclear Medicine
1501 N Campbell Ave
Tucson, AZ 85724-0041
520 232-7840
Length: 2 Year(s) Total Positions: 2
Program ID: 290-03-21-008

Arkansas
Little Rock
University of Arkansas for Medical Sciences Program
University of Arkansas College of Medicine
John L. McLellan Memorial Veterans Hospital
University Hospital of Arkansas
Program Director:
Teressa L. Angstadt, MD
501-581 UAMS
4301 W Markham Dr
Little Rock, AR 72205-7109
501 501-6052
Length: 2 Year(s) Total Positions: 2
Program ID: 200-04-21-009

* Updated information not provided.
California

Long Beach
Veterans Affairs Medical Center (Long Beach) Program

Veterans Affairs Medical Center (Long Beach)
University of California (Irvine) Medical Center

Program Director:
Kenneth P. Lyons, MD
601 E. Seventh St
Long Beach, CA 90822
818-647-5696
Length: 2 years (Total Positions: 2)
Program ID: 200-65-31-012

Los Angeles

Cedars-Sinai Medical Center Program

Cedars-Sinai Medical Center

Program Director:
Daniel S. Berman, MD
8700 Beverly Blvd
Los Angeles, CA 90048
310-853-3267
Length: 2 years (Total Positions: 2)
Program ID: 200-65-21-069

UCLA Medical Center Program

UCLA School of Medicine

Program Director:
Carlin K. Hoh, MD
72-300 UCLA Med Med Bldg
Los Angeles, CA 90095
Length: 2 years (Total Positions: 2)
Program ID: 200-65-11-013

University of Southern California Program

Los Angeles County-USC Medical Center

Program Director:
Michael E. Siegel, MD
200 N. State St
Los Angeles, CA 90033
213-265-7069
Length: 2 years (Total Positions: 3)
Program ID: 200-65-21-065

Veterans Affairs Medical Center (West Los Angeles) Program

Veterans Affairs Medical Center (West Los Angeles)

Program Director:
William H. Blalock, MD
11551 Wilshire Blvd
Los Angeles, CA 90073
310-854-5100
Length: 2 years (Total Positions: 2)
Program ID: 200-65-31-014

Los Angeles (Sepulveda)
Veterans Affairs Medical Center (Sepulveda) Program

Veterans Affairs Medical Center (Sepulveda)

Program Director:
Marvin B. Cohen, MD
Roger Stevin, MD
Veterans Administration Medical Center
16111 Plummer St
Sepulveda, CA 91344-2036
Program: 518-896-0292
Length: 2 years (Total Positions: 2)
Program ID: 200-65-31-017

Sacramento

University of California (Davis) Program

University of California (Davis) Medical Center

Program Director:
David K. Sheler, MD
University of California (Davis) Medical Center
Sacramento, CA 95819
Program: 516-734-0244
Length: 2 years (Total Positions: 2)
Program ID: 200-65-21-010

San Diego

University of California (San Diego) Program

University of California (San Diego) Medical Center
Veterans Affairs Medical Center (San Diego)

Program Director:
David W. Young, MB BS
UCSD Nuclear Medicine 8736
96 W Arbor Dr
San Diego, CA 92109-8736
Program: 619-543-6802
Length: 2 years (Total Positions: 22)
Program ID: 200-65-01-016

San Francisco

University of California (San Francisco) Program

University of California (San Francisco) School of Medicine

Program Director:
David H. Price, MD
University of California (San Francisco)
Nuclear Medicine Department 1-050
22nd & Pine St
San Francisco, CA 94143-0500
Program: 415-476-1031
Length: 2 years (Total Positions: 3)
Program ID: 200-65-21-016

University of California (San Francisco)/San Francisco General Program

University of California (San Francisco) School of Medicine
San Francisco General Medical Center

Program Director:
Robert J. Lull, MD
San Francisco General Hospital Medical Center
San Francisco, CA 94110
Program: 415-476-8580
Length: 2 years (Total Positions: 2)
Program ID: 200-65-21-086

Stanford

Stanford University Program*

Stanford University Hospital
Veterans Affairs Medical Center (Palo Alto)

Program Director:
1 Ross M. Donaldson, MD
Stanford University Hospital
1500 Welch Rd
Stanford, CA 94305-6883
415-725-2105
Length: 2 years (Total Positions: 3)
Program ID: 200-65-21-018

Colorado

Aurora

Fitzsimmons Army Medical Center Program

Fitzsimmons Army Medical Center

Program Director:
Dr. Michael R. Good, MD
Fitzsimmons Army Medical Center
Aurora, CO 80045-6001
Program: 303-281-8700
Length: 2 years (Total Positions: 1)
Program ID: 200-65-21-110

Denver

University of Colorado Program

University of Colorado Health Sciences Center
Veterans Affairs Medical Center (Denver)

Program Director:
James L. Lash, MD
University of Colorado Health Sciences Center
1200 E. Ninth Ave
Denver, CO 80203
Program: 303-270-7800
Length: 2 years (Total Positions: 2)
Program ID: 200-65-21-08

Connecticut

Farmington

University of Connecticut (Danbury) Program*

University of Connecticut School of Medicine
Danbury Hospital

Program Director:
Stevan M. Gupta, MD
Danbury Hospital
23 Hospital Ave
Danbury, CT 06810
Program: 203-797-7222
Length: 2 years (Total Positions: 2)
Program ID: 200-65-21-108

* Updated information not provided.
Accredited Programs in Nuclear Medicine

University of Connecticut Program
University of Connecticut School of Medicine
Hartford Hospital
St Francis Hospital and Medical Center
Univ of Connecticut Health Center/John Dempsey Hospital
Veterans Affairs Medical Center (Newington)
Program Director:
Richard P. Spencer, MD
University of Connecticut Health Center
Farmington Ave
Farmington, CT 06030-3804
203-679-3120
Length: 2 Year(s) Total Positions: 4
Program ID: 200-04-21-020

New Haven
Yale-New Haven Medical Center Program*
Yale-New Haven Hospital
Veterans Affairs Medical Center (West Haven)
Program Director:
Paul B. Hoffer, MD
Yale University School of Medicine
Dept of Nuclear Medicine
435 Cedar in TH-2
New Haven, CT 06510
203-785-2384
Length: 2 Year(s) Total Positions: 3
Program ID: 200-08-11-021

District of Columbia
Washington
George Washington University Program
George Washington University School of Medicine
George Washington University Hospital
Program Director:
Vijay M. Varm, MD
George Washington University Hospital
411 23rd St NW
Washington, DC 20037
202-995-3334
Length: 2 Year(s) Total Positions: 2
Program ID: 200-10-02-024

Georgetown University Program
Georgetown University Hospital
Program Director:
Harvey A. Koizumi, MD
Div of Nuclear Medicine
Georgetown University Hospital
3800 Reservoir Rd NW #2005 Gorman
Washington, DC 20007
202-784-3690
Length: 2 Year(s) Total Positions: 2
Program ID: 200-10-02-023

Walter Reed Army Medical Center Program
Walter Reed Army Medical Center
Program Director:
Ana A. Rodriguez, MD
Nuclear Medicine Serv
Walter Reed Army Medical Center
6825 16th St NW
Washington, DC 2007-5001
202-579-0175
Length: 2 Year(s) Total Positions: 4
Program ID: 200-10-12-002

Florida
Gainesville
University of Florida Program
University of Florida College of Medicine
Shands Hospital at the University of Florida
Veterans Affairs Medical Center (Gainesville)
Program Director:
Barry G. Deane, MD
University of Florida
207A First Mart Health Science Bldg
Gainesville, FL 32610
604-865-2021
Length: 2 Year(s) Total Positions: 1
Program ID: 200-11-11-027

Miami
University of Miami-Jackson Memorial Medical Center Program*
University of Miami-Jackson Memorial Medical Center
Program Director:
George N. Stefanakos, MD
Jackson Memorial Hospital Div of Nuclear Medicine
1611 NW 12th Ave
Miami, FL 33101
305-444-8830
Length: 2 Year(s) Total Positions: 8
Program ID: 200-11-21-047

Georgia
Atlanta
Emory University Program
Emory University School of Medicine
Crawford Young Hospital of Emory University
Emory University Hospital
Grady Memorial Hospital
Program Director:
John P. Vazquez, MD
Andrew Taylor Jr, MD
Emory University School of Medicine
Div of Nuclear Medicine
1684 Clifton Rd NE
Atlanta, GA 30322
404-712-4443
Length: 2 Year(s) Total Positions: 5
Program ID: 200-11-21-043

Illinois
Chicago
McGaw Medical Center of Northwestern University Program
Northwestern University Medical School
Northwestern Memorial Hospital
Program Director:
William G. Spies, MD
Northwestern Memorial Hosp Nuclear Med W-484
559 E Superior St
Chicago, IL 60611
312-926-6154
Length: 2 Year(s) Total Positions: 3
Program ID: 200-11-12-012

Rush-Presbyterian-St Luke's Medical Center Program*
Rush-Presbyterian-St Luke's Medical Center
Program Director:
Ernest W. Nordman, MD
Rush-Presbyterian-St Luke's Medical Center
1553 W Congress Pkwy
Chicago, IL 60612
312-943-5757
Length: 2 Year(s) Total Positions: 1
Program ID: 200-11-11-021

University of Illinois College of Medicine at Chicago/Michael Reese Hospital Program
University of Illinois College of Medicine at Chicago
Michael Reese Hospital and Medical Center
Program Director:
Carles Bekerman, MD
Michael Reese Hospital
Division of Nuclear Medicine MB-2
2939 S Ellis Ave
Chicago, IL 60616
312-731-3525
Length: 2 Year(s) Total Positions: 2
Program ID: 200-11-11-025

Maywood
Loyola University Program
Foster G. McGaw Hospital-Loyola University of Chicago
Edward J. Illinois Veterans Affairs Hospital
Program Director:
Robert K. Henkin, MD
Foster G. McGaw Hospital
Loyola University of Chicago
2100 S First Ave
Maywood, IL 60153
708-261-5775
Length: 2 Year(s) Total Positions: 7
Program ID: 200-16-21-011

Indiana
Indianapolis
Indiana University Medical Center Program
Indiana University Medical Center
Richard L. Roudebush Veterans Affairs Medical Center
William N. Wishard Memorial Hospital
Program Director:
Henry N. Willman, MD
Indiana University Medical UH 0663
550 N University Blvd
Indianapolis, IN 46202-5235
317-274-8832
Length: 2 Year(s) Total Positions: 4
Program ID: 200-11-12-013

* Updated information not provided.
Iowa

Iowa City
University of Iowa Hospitals and Clinics Program
University of Iowa Hospitals and Clinics Veterans Affairs Medical Center (Iowa City) Program
Director: Peter J Kirchner, MD University of Iowa Hospitals and Clinics Dept of Radiology 302 Hawkins Dr Iowa City, IA 52242-1609 319 558-4802 Length: 2 Year(s) Total Positions: 3 Program ID: 200-18-21-030

Kansas

Kansas City
University of Kansas Medical Center Program
University of Kansas School of Medicine University of Kansas Medical Center Program Director: Kirkman G Baxter, MD University of Kansas Medical Center Div of Nuclear Medicine 3901 Rainbow Blvd Kansas City, KS 66160-7234 913 588-6610 Length: 2 Year(s) Total Positions: 2 Program ID: 200-19-11-081

Kentucky

Lexington
University of Kentucky Medical Center Program
University of Kentucky Medical Center Veterans Affairs Medical Center (Lexington) Program Director: Gary B Conard, MD Univ of Kentucky Chandler Medical Center Dept of Diagnostic Radiology 800 Rose St Lexington, KY 40536-0084 606 323-6585 Length: 2 Year(s) Total Positions: 1 Program ID: 200-80-21-033

Maryland

Baltimore
Johns Hopkins University Program* Johns Hopkins University School of Medicine Johns Hopkins Hospital Program Director: Samuel Sostre, MD Johns Hopkins Medical Institutions 300 North Wolfe Street Baltimore, MD 21287 410 955-8448 Length: 2 Year(s) Total Positions: 5 Program ID: 200-23-11-035

Bethesda
National Naval Medical Center (Bethesda) Program
National Naval Medical Center (Bethesda) Program Director: Eugene B Silverman, MD National Naval Medical Center Dept of Nuclear Medicine 8901 Wisconsin Ave Bethesda, MD 20889-5011 301 279-4981 Length: 2 Year(s) Total Positions: 2 Program ID: 200-23-21-004

Massachusetts

Boston
Harvard Medical School Program Brigham and Women's Hospital Beth Israel Hospital Brigham-West Roxbury Veterans Affairs Medical Center Children's Hospital Dana-Farber Cancer Institute Program Director: S James Ackermann, MD PhD Harvard Medical School PACE 1 First Place 25 Shattuck St Boston, MA 02115 617 432-1358 Length: 2 Year(s) Total Positions: 7 Program ID: 200-24-21-036

Massachusetts General Hospital Program*
Massachusetts General Hospital Program Director: Alan J Fishman, MD Massachusetts General Hospital Fruit St Boston, MA 02114 617 739-8768 Length: 2 Year(s) Total Positions: 4 Program ID: 200-24-21-091

Michigan

Ann Arbor
University of Michigan Program* University of Michigan Hospitals Veterans Affairs Medical Center (Ann Arbor) Program Director: David E Kuhl, MD University of Michigan Hospitals B11 G 412 Box 8025 1556 E Medical Center Dr Ann Arbor, MI 48109-2628 313 936-5298 Length: 2 Year(s) Total Positions: 5 Program ID: 200-25-11-099

Detroit
Henry Ford Hospital Program
Henry Ford Hospital Program Director: Kastriyi C Karvelis, MD Henry Ford Hospital Nuclear Medicine 2790 W Grand Blvd Detroit, MI 48202 313 876-9286 Length: 2 Year(s) Total Positions: 2 Program ID: 200-25-21-106

Royal Oak
William Beaumont Hospital Program
William Beaumont Hospital Program Director: Howard J Dworjan, MD William Beaumont Hospital Dept of Nuclear Med 3668 W Thirteen Mile Rd Royal Oak, MI 48073-6766 810 551-4128 Length: 2 Year(s) Total Positions: 4 Program ID: 200-25-11-040

Minnesota

Minneapolis
University of Minnesota Program* University of Minnesota Medical School University of Minnesota Hospital and Clinic Veterans Affairs Medical Center (Minneapolis) Program Director: Robert J Boudreau, MD PhD University of Minnesota Div of Nuclear Medicine Box 389 UMCU Minneapolis, MN 55455 612 628-5912 Length: 2 Year(s) Total Positions: 2 Program ID: 200-36-31-041

Missouri

Columbia
University of Missouri-Columbia Program University of Missouri-Columbia School of Medicine Harry S Truman Memorial Veterans Hospital University of Missouri Children's Hospital Program Director: Anolai Singh, MD University Hospital and Clinics One Hospital Drive Radiology UCMC Columbia, MO 65212 314 882-7605 Length: 2 Year(s) Total Positions: 2 Program ID: 200-36-21-094

*Updated information not provided.
Accredited Programs in Nuclear Medicine

St Louis
St Louis University Group of Hospitals Program
St Louis University School of Medicine
St Louis University Hospital
Veterans Affairs Medical Center (St Louis)
Program Director:
James L Littlefield, MD
St Louis VA Hospital
Nuclear Medicine Service - 115
915 N Grand Blvd
St Louis, MO 63106-1697
314 289-8935
Length: 2 Year(s) Total Positions: 2
Program ID: 200-28-21-042

Washington University Program
 Barnes Hospital
Program Director:
Barry A Siegel, MD
Div of Nuclear Med
Mallinckrodt Institute of Radiology
510 S Kingshighway
St Louis, MO 63110-1075
314 362-5809
Length: 2 Year(s) Total Positions: 5
Program ID: 200-28-11-413

Nebraska
Omaha
University of Nebraska Program
University of Nebraska Medical Center
Veterans Affairs Medical Center (Omaha)
Program Director:
Katherine A Harrison, MD
Dept of Radiology Section of Nuclear Medicine
Univ of Nebraska Medical Center
600 S 42nd St
Omaha, NE 68109-0415
402 559-6188
Length: 2 Year(s) Total Positions: 3
Program ID: 200-30-11-044

New York
Bronx
Albert Einstein College of Medicine Program*
Albert Einstein College of Medicine of Yeshiva University
Bronx Municipal Hospital Center
Montefiore Medical Center-Henry and Lucy Moses Division
Montefiore Medical Center-Weiler Hospital
Program Director:
David M Milstein, MD
Albert Einstein College of Medicine
1300 Morris Park Ave
Bronx, NY 10461
718 946-4041
Length: 2 Year(s) Total Positions: 6
Program ID: 200-35-21-047

Brooklyn
Veterans Affairs Medical Center (Brooklyn) Program*
Veterans Affairs Medical Center (Brooklyn)
Program Director:
Morley L Mascan, MD PhD
Veterans Administration Medical Center
600 Polyclinic Pl
Brooklyn, NY 11209
718 630-3575
Length: 2 Year(s) Total Positions: 2
Program ID: 200-35-01-055

Buffalo
SUNY at Buffalo Graduate Medical-Dental Education Consortium Program*
SUNY at Buffalo Grad Medical-Dental Education Consortium
Buffalo General Hospital
Mercy Hospital of Buffalo
Roswell Park Cancer Institute
Veterans Affairs Medical Center (Buffalo)
Program Director:
Joseph A Presto, MD
105 Parker Hall
3455 Main St
Buffalo, NY 14214
716 636-6868
Length: 2 Year(s) Total Positions: 6
Program ID: 200-35-21-046

Manhasset
North Shore University Hospital Program
North Shore University Hospital
Program Director:
Donald Margossian, MD
North Shore University Hospital
300 Community Dr
Manhasset, NY 11030
516 662-4000
Length: 2 Year(s) Total Positions: 2
Program ID: 200-35-21-162

New Hyde Park
Albert Einstein College of Medicine at Long Island Jewish Medical Center Program
Long Island Jewish Medical Center
Program Director:
Christopher J Palestro, MD
Long Island Jewish Medical Center
Div of Nuclear Medicine
New Hyde Park, NY 11042
718 678-7800
Length: 2 Year(s) Total Positions: 3
Program ID: 200-35-11-049

New York
Memorial Sloan-Kettering Cancer Center Program
Memorial Sloan-Kettering Cancer Center
Program Director:
Stanley J Goldsmith, MD
Memorial Sloan-Kettering Cancer Center
Nuclear Medicine Ser
1275 York Ave
New York, NY 10021
212 639-7073
Length: 2 Year(s) Total Positions: 5
Program ID: 200-35-11-040

Mount Sinai School of Medicine Program
Mount Sinai School of Medicine
Mount Sinai Medical Center
Veterans Affairs Medical Center (Bronx)
Program Director:
Josef Machac, MD
Mount Sinai Medical Center
One Gustave L Levy Pl
Box 1141
New York, NY 10029-6574
212 241-7888
Length: 2 Year(s) Total Positions: 3
Program ID: 200-35-21-051

New York Hospital/Cornell Medical Center Program
New York Hospital
Program Director:
Barbara L Binkert, MD
Div of Nuclear Medicine Rm 6A15A
New York Hospital
525 E 68th St
New York, NY 10021
212 746-4506
Length: 2 Year(s) Total Positions: 2
Program ID: 200-35-11-052

Presbyterian Hospital in the City of New York Program
Presbyterian Hospital in the City of New York
Program Director:
Ronald J Van Heerdt, MD
Presbyterian Hospital in the City of New York
Moffit Hospital Bldg 2-131
177 Fort Washington Ave
New York, NY 10032
212 365-7133
Length: 2 Year(s) Total Positions: 2
Program ID: 200-35-21-099

St Luke's-Roosevelt Hospital Center Program
St Luke's-Roosevelt Hospital Center
St Luke's-Roosevelt Hospital Center-Roosevelt Division
St Luke's-Roosevelt Hospital Center-St Luke's Division
Program Director:
Gordon Depuey, MD
St Luke's-Roosevelt Hospital Center
Amsterdam Ave at 114th St
New York, NY 10025
212 523-3398
Length: 2 Year(s) Total Positions: 2
Program ID: 200-35-11-084

Northport
Veterans Affairs Medical Center (Northport) Program*
Veterans Affairs Medical Center (Northport)
South Nassau Communities Hospital
University Hospital-SUNY at Stony Brook
Program Director:
Mohamed A Antar, MD
Veterans Affairs Medical Center
Middletown Rd
Northport, NY 11768
516 281-4400
Length: 2 Year(s) Total Positions: 4
Program ID: 200-35-21-056

* Updated information not provided.
Accredited Programs in Nuclear Medicine

Rochester
University of Rochester Program
Strong Memorial Hospital of the University of Rochester
Program Director:
Robert E O'Mara, MD
Strong Memorial Hospital
750 Edgemont Rd
Rochester, NY 14620
614-632-4681
Length: 2 Year(s) Total Positions: 2
Program ID: 200-35-11-057

Winston-Salem
Bowman Gray School of Medicine Program
North Carolina Baptist Hospital
Program Director:
Robert J Cowan, MD
North Carolina Baptist Hospital
Dept of Nuclear Medicine
Medical Center Blvd
Winston-Salem, NC 27157-1086
(336) 353-8802
Length: 2 Year(s)
Program ID: 200-36-11-061

Syracuse
SUNY Health Science Center at Syracuse Program
University Hospital-SUNY Health Science Center at Syracuse
Program Director:
Herbert Thomas, MD
SUNY Hlth Sci Ctr at Syracuse
University Hosp
750 E Adams St
Syracuse, NY 13210
315-464-7021
Length: 2 Year(s) Total Positions: 4
Program ID: 200-35-11-058

Valhalla
New York Medical College at St Vincent’s Hospital and Medical Center of New York Program
New York Medical College
St Vincent’s Hospital and Medical Center of New York
Program Director:
Russel A Abdel-Dayem, MD
St Vincent’s Hospital and Med Ctr of New York
Dept of Nuclear Medicine
155 W 11th St
New York, NY 10011
212-691-8762
Length: 2 Year(s) Total Positions: 3
Program ID: 200-35-12-054

Ohio
Cincinnati
Christ Hospital Program*
Chrric Hospital
Program Director:
Paul Ragsdale, MD
Dept of Nuclear Medicine
2100 Auburn Ave
Cincinnati, OH 45219
513-589-1126
Length: 2 Year(s)
Program ID: 200-38-21-112

University of Cincinnati Hospital Group Program
University of Cincinnati Hospital: Children’s Hospital Medical Center, Jewish Hospital of Cincinnati
Program Director:
Edward N Silberstein, MD
University of Cincinnati Hospital
University of Cincinnati Hospital Group
PO Box 67057
Cincinnati, OH 45207-6577
513-585-9530
Length: 2 Year(s)
Program ID: 200-38-21-062

North Carolina
Chapel Hill
University of North Carolina Hospitals Program
University of North Carolina Hospitals
Program Director:
William H McCollum, MD
NC Translational Science Ctr
350 E University Ave
Chapel Hill, NC 27599-7150
919-843-4554
Length: 2 Year(s) Total Positions: 1
Program ID: 200-39-21-114

Durham
Duke University Program
Duke University Medical Center
Veterans Affairs Medical Center (Durham)
Program Director:
R Edward Coleman, MD
Duke Univ Med Ctr and Dept of Nuclear Medicine
Div Imaging Med Dept of Radiology
Box 3708
Durham, NC 27710
919-668-2714
Length: 2 Year(s) Total Positions: 4
Program ID: 200-36-21-060

Oklahoma
Oklahoma City
University of Oklahoma Health Sciences Center Program
University of Oklahoma College of Medicine-Oklahoma City
Children’s Hospital of Oklahoma
University Hospital and Clinics
Veterans Affairs Medical Center (Oklahoma City)
Program Director:
Dr William Allen, MD
University Hospital
Nuclear Medicine Ser
PO Box 3238
Oklahoma City, OK 73126
405-390-2241
Length: 2 Year(s) Total Positions: 3
Program ID: 200-39-21-064

Oregon
Portland
Oregon Health Sciences University Program
Oregon Health Sciences University Hospital
Veterans Affairs Medical Center (Portland)
Program Director:
Jerry Y Gowanick, MD
Veterans Affairs Medical Center (115)
PO Box 1074
3710 SW 6th St
Portland, OR 97207
503-275-5094
Length: 2 Year(s) Total Positions: 3
Program ID: 200-40-21-065

Pennsylvania
Philadelphia
MCBH/Hahnemann University Hospital Program
Hahnemann University Hospital
Program Director:
Simon Najjar, MD
Hahnemann University Division of Nuclear Medicine
Broad & Vine Sts
Philadelphia, PA 19102-1102
215-756-7575
Length: 2 Year(s) Total Positions: 1
Program ID: 200-41-11-066

Temple University Program
Temple University Hospital
Program Director:
Alan H Mauer, MD
Temple University Hospital
3601 N Broad St
Philadelphia, PA 19140
215-707-8599
Length: 2 Year(s) Total Positions: 2
Program ID: 200-41-11-088

Thomas Jefferson University Program
Thomas Jefferson University Hospital
Program Director:
Cham P. Park, MD
Thomas Jefferson University Hospital
111 11th St, Ste 100
8100 Girard Blvd
Philadelphia, PA 19107
517-865-1911
Length: 2 Year(s) Total Positions: 2
Program ID: 200-41-21-100

University of Pennsylvania Program
Hospital of the University of Pennsylvania
Children’s Hospital of Philadelphia
Graduate Hospital
Veterans Affairs Medical Center (Philadelphia)
Program Director:
Abbas Alavi, MD
Div of Nuclear Medicine
Hosp of the Univ of Pennsylvania
3400 Spruce St
Philadelphia, PA 19104
215-866-2669
Length: 2 Year(s) Total Positions: 6
Program ID: 200-41-21-067

* Updated information not provided.

Graduate Medical Education Directory
Accredited Programs in Nuclear Medicine

Pittsburgh
University Health Center of Pittsburgh Program
University Health Center of Pittsburgh Presbyterian University Hospital/UPMC
Program Director: Ajit N Shah, MD Nuclear Med Presbyterian University Hospital Desoto at O'Hara Sts Pittsburgh, PA 15213 412 647-7231 Length: 2 Year(s) Total Positions: 4 Program ID: 200-41-21-104

Puerto Rico
San Juan
University of Puerto Rico Program
University of Puerto Rico School of Medicine University Hospital Veterans Affairs Medical Center (San Juan)
Program Director: Freda Sierra De Roldan, MD University of Puerto Rico Medical Sciences Campus GPS Box 6057 San Juan, PR 00936 800 767-3082 Length: 2 Year(s) Total Positions: 2 Program ID: 200-41-21-060

South Carolina
Charleston
Medical University of South Carolina Program
Medical University of South Carolina College of Medicine MUSC Medical Center Veterans Affairs Medical Center (Charleston)
Program Director: Kenneth M Spencer, MD PhD Medical University of South Carolina Div of Nuclear Medicine 171 Ashley Ave Charleston, SC 29425 803 792-7179 Length: 2 Year(s) Program ID: 200-45-21-076

Tennessee
Knoxville
University of Tennessee Medical Center at Knoxville Program
University of Tennessee Graduate School of Medicine University of Tennessee Memorial Hospital
Program Director: Karl P Huber, MD The University of Tennessee Grad School of Medicine 1084 Alcoa Hwy Knoxville, TN 37998-6999 615 544-9662 Length: 2 Year(s) Total Positions: 4 Program ID: 200-47-21-100

Texas
Dallas
University of Texas Southwestern Medical School Program
University of Texas Southwestern Medical School Dallas County Hospital District Parkland Memorial Hospital Veterans Affairs Medical Center (Dallas)
Program Director: William A Ersham, MD University of Texas Southwestern Medical School Div of Radiology 5325 Harry Hines Blvd Dallas, TX 75390-8071 214 590-6307 Length: 2 Year(s) Total Positions: 2 Program ID: 200-48-21-073

El Paso
William Beaumont Army Medical Center Program
William Beaumont Army Medical Center
Program Director: LTC Albert J Moreno, MD William Beaumont Army Medical Center Nuclear Medicine Service El Paso, TX 79902-5001 515 659-8256 Length: 2 Year(s) Total Positions: 2 Program ID: 200-48-12-003

Galveston
University of Texas Medical Branch Hospitals Program
University of Texas Medical Branch Hospitals
Program Director: Javier Villafane-Meyer, MD University of Texas Medical Branch Hospitals Section of Nuclear Medicine 351 University Blvd Galveston, TX 77555-0783 409 772-3821 Length: 2 Year(s) Program ID: 200-48-11-076

Houston
Baylor College of Medicine Program
Baylor College of Medicine Harris County Hospital District-Ben Taub General Hospital St Luke's Episcopal Hospital Texas Children's Hospital Veterans Affairs Medical Center (Houston)
Program Director: Warren H Moore, MD Baylor College of Medicine Dept of Radiology Nuclear Medicine One Baylor Plaza Houston, TX 77030 713 791-3126 Length: 2 Year(s) Total Positions: 4 Program ID: 200-48-21-074

San Antonio
University of Texas Health Science Center at San Antonio Program
University of Texas Medical School at San Antonio University Hospital-South Texas Medical Center Wilford Hall USAF Medical Center (SH)
Program Director: Ralph Blumhardt, MD Fred L Weissman, MD University of Texas Health Science Center Nuclear Medicine 7703 Floyd Curl Dr San Antonio, TX 78229-7800 210 567-5900 Length: 2 Year(s) Total Positions: 6 Program ID: 200-48-51-006

Utah
Salt Lake City
University of Utah Program
University of Utah Medical Center Veterans Affairs Medical Center (Salt Lake City)
Program Director: Frederick L Hada, MD University of Utah Medical Center 50 N Medical Dr Salt Lake City, UT 84132 801 581-2716 Length: 2 Year(s) Total Positions: 2 Program ID: 200-49-21-107

Virginia
Charlottesville
University of Virginia Program
University of Virginia Medical Center
Program Director: Charles D Teates, MD University of Virginia Health Science Center Box 486 Charlottesville, VA 22908 434 924-5001 Length: 2 Year(s) Total Positions: 1 Program ID: 200-51-21-111

* Updated information not provided.
Richmond
Medical College of Virginia/Virginia Commonwealth University Program
Medical College of Virginia/Virginia Commonwealth University
Hunter Holmes McGuire VA Medical Center (Richmond)
Medical College of Virginia Hospitals
Program Director:
Timothy S Burke, MD
MCV/Virginia Commonwealth Univ
PO Box 980001
Richmond, VA 23298-0001
804-848-8363
Length: 2 Year(s)  Total Positions: 1
Program ID: 200-61-21-077

St Luke’s Medical Center Program
St Luke’s Medical Center
Program Director:
David L Yaille, MD
St Luke’s Medical Center
2000 W Oklahoma Ave
Milwaukee, WI 53215
414-648-6418
Length: 2 Year(s)  Total Positions: 4
Program ID: 200-66-12-081

Nuclear Radiology
(Radiology-Diagnostic)

Arizona
Tucson
University of Arizona Program
University of Arizona College of Medicine
University Medical Center
Program Director:
James M Woollen, MD
Univ of Arizona Health Sciences Center Div of Nuclear Med
1501 N Campbell Ave
Tucson, AZ 85724
602-626-7709
Length: 1 Year(s)  Total Positions: 1 (FYI: 0)
Program ID: 425-65-21-011

Connecticut
New Haven
Yale-New Haven Medical Center Program*
Yale-New Haven Hospital
Program Director:
Paul B Heffter MD
Yale University School of Medicine B3-2
333 Cedar St
New Haven, CT 06510
203-784-2884
Length: 1 Year(s)  Total Positions: 1
Program ID: 425-68-11-002

Florida
Gainesville
University of Florida Program
University of Florida College of Medicine
Shands Hospital at the University of Florida
Veterans Affairs Medical Center (Gainesville)
Program Director:
Walter F Drake, MD
University of Florida
Dept of Radiology
PO Box 100374
Gainesville, FL 32610-0374
352-392-0281
Length: 1 Year(s)  Total Positions: 2
Program ID: 425-11-21-068

Washington
Seattle
University of Washington Program
University of Washington School of Medicine
Harborview Medical Center
University of Washington Medical Center
Veterans Affairs Medical Center (Seattle)
Program Director:
WJ B Nelp, MD
University of Washington
Div of Nuclear Medicine BR-70
Seattle, WA 98109
206-548-4308
Length: 2 Year(s)  Total Positions: 5
Program ID: 200-64-21-078

Wisconsin
Madison
University of Wisconsin Program
University of Wisconsin Hospital and Clinics
William S Middleton Veterans Hospital
Program Director:
Scott B Perlmar, MD
Univ of Wisconsin Hospital and Clinics
Dept of Nuclear Medicine
600 Highland Ave
Madison, WI 53792-3252
608-263-5966
Length: 2 Year(s)  Total Positions: 2
Program ID: 200-66-12-079

Milwaukee
Medical College of Wisconsin Program
Medical College of Wisconsin Affiliated Hospitals Inc
Clement J Zablocki Veterans Affairs Medical Center
Profeiert Memorial Lutheran Hospital
John L Doyne Hospital
Program Director:
Arthur Z Krawos, MD
Milwaukee Gyn Med Complex Div of Nuclear Med
8700 W Wisconsin Ave
Box 104
Milwaukee, WI 53226
414-777-3774
Length: 2 Year(s)  Total Positions: 2
Program ID: 200-66-21-080

* Updated information not provided.

Graduate Medical Education Directory 549
Georgia

Atlanta
Emory University Program
Emory University School of Medicine
Emory University Hospital
Grady Memorial Hospital
Program Director:
Johnathan P. Vannett, MD
Andrew Taylor, MD
Emory University School of Medicine
Div of Nuclear Medicine
1364 Clifton Rd NE
Atlanta, GA 30322
404 727-8483
Length: 1 Year(s)  Total Positions: 5
Program ID: 425-12-21-056

Illinois

Chicago
McGaw Medical Center of Northwestern University Program
Northwestern University Medical School
Northwestern Memorial Hospital
Program Director:
William G. Spies, MD
Northwestern Memorial Hospital
Dept of Nuclear Medicine
250 E Superior
Chicago, IL 60611
312 695-2414
Length: 1 Year(s)  Total Positions: 3  (GY: 0)
Program ID: 425-16-21-062

Rush-Presbyterian-St Luke's Medical Center Program*
Rush-Presbyterian-St Luke's Medical Center
Program Director:
Ernest W. Fordham, MD
Rush-Presbyterian-St Luke's Medical Center
1653 W Congress Plwy
Chicago, IL 60612
312 942-5767
Length: 1 Year(s)  Total Positions: 2
Program ID: 425-16-21-049

University of Illinois College of Medicine at Chicago/Michael Reese Hospital Program
University of Illinois College of Medicine at Chicago
Michael Reese Hospital and Medical Center
Program Director:
Carlos Bekerian, MD
Michael Reese Hospital
Div of Nuclear Medicine
2255 S Ellis
Chicago, IL 60616
312 781-2525
Length: 1 Year(s)  (GY: 0)
Program ID: 425-16-12-003

Iowa

Iowa City
University of Iowa Hospitals and Clinics Program
University of Iowa Hospitals and Clinics
Veterans Affairs Medical Center (Iowa City)
Program Director:
Peter T. Kirchner, MD
Yutaka Sato, MD
University of Iowa Hospitals and Clinics
Training in Nuclear Radiology
200 Hawkins Dr
Iowa City, IA 52242-1009
319 356-6302
Length: 1 Year(s)  Total Positions: 1
Program ID: 425-18-21-050

Kansas

Kansas City
University of Kansas Medical Center Program
University of Kansas School of Medicine
University of Kansas Medical Center
Program Director:
Kirkman G. Baxter, MD
University of Kansas Medical Center
Div of Nuclear Medicine
3901 Rainbow Blvd
Kansas City, KS 66108-7234
913 588-6810
Length: 1 Year(s)  Total Positions: 1  (GY: 0)
Program ID: 425-19-11-015

Maryland

Baltimore
Johns Hopkins University Program*
Johns Hopkins University School of Medicine
Johns Hopkins Hospital
Program Director:
Samuel Centre, MD
Johns Hopkins Hospital
Div of Nuclear Radiology
601 N Broadway
Baltimore, MD 21205
901 955-3550
Length: 1 Year(s)  Total Positions: 1
Program ID: 425-23-21-004

Massachusetts

Boston
Brigham and Women's Hospital/Harvard Medical School Program*
Brigham and Women's Hospital
Children's Hospital
Program Director:
James S. Nagel, MD
Dept of Radiology
Brigham and Women's Hospital
75 Francis St
Boston, MA 02115
617 732-0200
Length: 1 Year(s)  Total Positions: 3  (GY: 0)
Program ID: 425-24-21-036

New England Deaconess Hospital/Harvard Medical School Program
New England Deaconess Hospital
Program Director:
Thomas C. Hill, MD
Deaconess Hospital
One Deaconess Rd
Boston, MA 02215
617 632-8460
Length: 1 Year(s)  Total Positions: 1
Program ID: 425-24-21-045

Michigan

Detroit
Wayne State University/Detroit Medical Center Program
Wayne State University School of Medicine
Detroit Receiving Hospital and University Health Center
Harper Hospital
Program Director:
Lawrence P. Davis, MD
Dept of Radiology
Detroit Receiving Hospital 3L-8
4201 St Antoine
Detroit, MI 48201
313 745-5839
Length: 1 Year(s)  Total Positions: 1  (GY: 0)
Program ID: 425-25-21-041

Royal Oak
William Beaumont Hospital Program
William Beaumont Hospital
Program Director:
Howard J. Dworkin, MD
Jail Farah, MD
William Beaumont Hospital
3601 W 13 Mile Rd
Royal Oak, MI 48073-6769
810 651-4128
Length: 1 Year(s)  Total Positions: 1  (GY: 0)
Program ID: 425-25-21-018

Minnesota

Rochester
Mayo Graduate School of Medicine Program
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Rochester)
Program Director:
Lee A. Fastrom, MD PhD
MGSM Application Processing Center
Mayo Graduate School of Medicine
200 First St SW
Rochester, MN 55905
507 284-4104
Total Positions: 1  (GY: 0)
Program ID: 425-26-21-019

* Updated information not provided.
Missouri

Columbia
University of Missouri-Columbia Program
University of Missouri-Columbia School of Medicine
Harry S Truman Memorial Veterans Hospital
University and Children's Hospital
Program Director:
Asmalak Sehag, MD
University Hospital & Clinics
Radiology DC042.10
One Hospital Dr
Columbia, MO 65212
314 856-7965
Length: 1 Year(s)  Total Positions: 2  (GYI: 0)
Program ID: 425-28-21-020

New Hyde Park
Albert Einstein College of Medicine at Long Island Jewish Medical Center Program
Long Island Jewish Medical Center
Program Director:
Peter G Herman, MD
Long Island Jewish Medical Center
Dept of Radiology
New Hyde Park, NY 11042
718 470-7275
Length: 1 Year(s)  Total Positions: 2  (GYI: 0)
Program ID: 425-35-21-065

St Louis
Washington University Program
Barnes Hospital
 Mallinckrodt Institute of Radiology
Program Director:
Ivor A Siegel, MD
Mallinckrodt Institute of Radiology
519 S Kingshighway
St Louis, MO 63110-1076
314 362-2899
Length: 1 Year(s)  Total Positions: 4  (GYI: 0)
Program ID: 425-28-21-021

New Jersey
Livingston
St Barnabas Medical Center Program
St Barnabas Medical Center
Program Director:
Leticia Grutzmegger, MD
St Barnabas Medical Center Dept of Radiology
Old Short Hills Rd
Livingston, NJ 07039
201 999-5607
Length: 1 Year(s)  Total Positions: 1
Program ID: 425-33-21-037

New York
Brooklyn
New York Methodist Hospital Program
New York Methodist Hospital
Program Director:
David Chang-Sung Yang, MD
New York Methodist Hospital
506 Sixth St
Brooklyn, NY 11216-3645
718 780-3884
Length: 1 Year(s)  Total Positions: 2
Program ID: 425-35-21-047

Stony Brook
SUNY at Stony Brook Program
University Hospital-SUNY at Stony Brook
Program Director:
Mohamed A Azar, MD PhD
SUNY at Stony Brook Health Sciences Center
Level 4 Rm 6002
Stony Brook, NY 11794-4460
631 444-4031
Length: 1 Year(s)  Total Positions: 1  (GYI: 0)
Program ID: 425-35-21-044

Syracuse
SUNY Health Science Center at Syracuse Program
University Hospital-SUNY Health Science Center at Syracuse
Program Director:
P Duane Thomas, MD
SUNY Health Science Center at Syracuse
750 E Adams St
Syracuse, NY 13210
315 464-7031
Length: 1 Year(s)  Total Positions: 2  (GYI: 0)
Program ID: 425-35-21-008

Valhalla
New York Medical College at St Vincent's Hospital and Medical Center of New York Program
New York Medical College
St Vincent's Hospital and Medical Center of New York
Program Director:
Hussain M Abdel-Daim, MD
St Vincent's Hospital & Medical Center of New York
152 W 11th St
Downtown
New York, NY 10011
212 694-8782
Length: 1 Year(s)  Total Positions: 1  (GYI: 0)
Program ID: 425-35-13-023

North Carolina
Durham
Duke University Program
Duke University Medical Center
Program Director:
E Edward Coleman, MD
Duke University Medical Center Dept of Nuclear Med
Division of Imaging Dept of Radiology
Durham, NC 27710
919 668-2171
Length: 1 Year(s)  Total Positions: 1
Program ID: 425-35-21-024

Winston-Salem
Bowman Gray School of Medicine Program
North Carolina Baptist Hospital
Program Director:
Robert J Cowan, MD
North Carolina Baptist Hospital
Dept of Radiology
Medical Center Blvd
Winston-Salem, NC 27107-1788
334 776-4922
Length: 1 Year(s)  Total Positions: 5  (GYI: 0)
Program ID: 425-36-21-025

Pennsylvania
Philadelphia
Temple University Program
Temple University Hospital
Program Director:
Alan H Maurer, MD
Temple University Hospital
Broad & Ontario Sts
Philadelphia, PA 19140
215 707-8560
Length: 1 Year(s)  Total Positions: 1
Program ID: 425-41-21-064

* Updated information not provided.
Wisconsin
Milwaukee
Medicine College of Wisconsin Program
Medical College of Wisconsin Affiliated Hospitals, Inc.
John L. Doane Hospital
Program Director:
Arthur E. Krasnow, MD
Milwaukee County Medical Complex
8700 W Wisconsin Ave
Box 104
Milwaukee, WI 53226
414-777-3974
Length: 1 Year(s) Total Positions: 2 (GYI: 0)
Program ID: 425-58-21-851

Obstetrics and Gynecology

Alabama
Birmingham
Carraway Methodist Medical Center Program
Carraway Methodist Medical Center
University of Alabama Hospital
Program Director:
Charles M. Syredal, MD
Carraway Methodist Medical Center
1600 Carraway Blvd
Birmingham, AL 35234
205-225-6286
Length: 4 Year(s) Total Positions: 8 (GYI: 2)
Program ID: 209-14-31-017

University of Alabama Medical Center Program
University of Alabama Hospital
Cooper Green Hospital
Program Director:
Benjamin Younger, MD
University of Alabama Dept of OB/GYN
Old Hillman Bldg, 5th Floor
615 S 20th St
Birmingham, AL 35233
205-345-5631
Length: 4 Year(s) Total Positions: 28 (GYI: 7)
Program ID: 220-01-11-018

Mobile
University of South Alabama Program
University of South Alabama Medical Center
Program Director:
Ian Z. Thorneycroft, MD
University of South Alabama
Dept of OB/GYN
2401 Fillinig St
Mobile, AL 36617
205-471-7043
Length: 4 Year(s) Total Positions: 13 (GYI: 4)
Program ID: 220-01-21-020

Arizona
Phoenix
Good Samaritan Regional Medical Center Program
Good Samaritan Regional Medical Center
Program Director:
John A. Mattson, MD
Good Samaritan Regional Medical Center
Dept of Obstetrics and Gynecology
1111 E McDowell Rd
Phoenix, AZ 85006-2889
602-238-4344
Length: 4 Year(s) Total Positions: 20 (GYI: 5)
Program ID: 220-03-21-024

* Updated information not provided.
Phoenix Hospitals Program
Maricopa Medical Center
St. Joseph's Hospital and Medical Center
Program Director: John V. Kelly, MD
Maricopa Medical Center Dept. of Obstetrics/Gynecology
2601 E Roosevelt St
Phoenix, AZ 85008
602-297-5245
Length: 4 year(s) Total Positions: 30 (GYT: 9)
Program ID: 220-06-31-328

Tucson
University of Arizona Program
University of Arizona College of Medicine
University Medical Center
Program Director: M. Wayne Hoyt, MD
University of Arizona Health Sciences Center
Dept. of Obstetrics/Gynecology
1501 N Campbell Ave
Tucson, AZ 85724
602-626-6043
Length: 4 year(s) Total Positions: 18 (GYT: 4)
Program ID: 220-06-31-025

Arkansas
Little Rock
University of Arkansas for Medical Sciences Program
University of Arkansas College of Medicine
University Hospital of Arkansas
Program Director: Tim H. Parham, MD
University of Arkansas for Medical Sciences Campus
4301 W Markham Slot #518
Little Rock, AR 72205
501-859-6119
Length: 4 year(s) Total Positions: 16 (GYT: 4)
Program ID: 220-04-11-026

California
Bakersfield
Kern Medical Center Program
Kern Medical Center
Program Director: Ramchandra R. Appagari, MD
Kern Medical Center
Dept. of OB/GYN 4th Fl
1520 Flower St
Bakersfield, CA 93305-4197
661-258-2336
Length: 4 year(s) Total Positions: 12 (GYT: 3)
Program ID: 220-06-31-027

Fresno
University of California (San Francisco)/Fresno Program
UCSF Fresno Medical Education Program
Valley Medical Center of Fresno
Program Director: J. Kenneth Cockey, MD
Valley Medical Center of Fresno
Dept of OB/GYN
445 S Cedar Ave
Fresno, CA 93702
209-433-6720
Length: 4 year(s) Total Positions: 13 (GYT: 3)
Program ID: 220-06-31-029

* Updated information not provided.

Glendale
Glendale Adventist Medical Center Program
Glendale Adventist Medical Center
Loma Linda University Medical Center
Program Director: Hugo R. Ruffo, MD
Glendale Adventist Medical Center
OB/GYN Residency Program
1509 Wilson Terrace
Glendale, CA 91206
818-299-0395
Length: 4 year(s) Total Positions: 8 (GYT: 2)
Program ID: 220-06-31-020

Loma Linda
Loma Linda University Program
Loma Linda University Medical Center
Riverside General Hospital-University Medical Center
San Bernardino County Medical Center
Program Director: Robert J. Wagner, MD
Loma Linda University Medical Center
Dept. of Obstetrics/Gynecology
PO Box 20001
Loma Linda, CA 92354
909-824-4763
Length: 4 year(s) Total Positions: 24 (GYT: 6)
Program ID: 220-06-21-323

Los Angeles
Cedars-Sinai Medical Center Program
Cedars-Sinai Medical Center
Program Director: Lawrence D. Platt, MD
Cedars-Sinai Medical Center Dept. of OB/GYN
8700 Beverly Blvd
Bn 1738
Los Angeles, CA 90048-1889
310-657-1120
Length: 4 year(s) Total Positions: 23 (GYT: 6)
Program ID: 220-06-31-034

Charles R. Drew University Program
Charles R. Drew University of Medicine and Science
LAC-King/Drew Medical Center
Program Director: Wilburn Durouette, MD
Martin Luther King Jr.-Drew Medical Center
1201 W Wilshire Ave
Los Angeles, CA 90059
310-639-4554
Length: 4 year(s) Total Positions: 20 (GYT: 8)
Program ID: 220-06-21-037

UCLA Medical Center Program
UCLA School of Medicine
LAC-Olive View Medical Center
Program Director: Roy M. Pitkin, MD
UCLA School of Medicine Dept. of OB/GYN
21-130 CHS
Los Angeles, CA 90024-1740
310-266-2066
Length: 4 year(s) Total Positions: 30 (GYT: 11)
Program ID: 220-06-31-035

University of Southern California Program
Los Angeles County-USC Medical Center
Program Director: Daniel E. Mishell Jr., MD
Women's and Children's Hospital
Res. L1099
1240 N Mission Rd
Los Angeles, CA 90033
213-232-3146
Length: 4 year(s) Total Positions: 56 (GYT: 14)
Program ID: 220-06-11-036

White Memorial Medical Center Program
White Memorial Medical Center
Program Director: Ronald M. Nelson, MD
White Memorial Medical Center
1720 Cesar E Chavez Ave
Los Angeles, CA 90033
213-260-5510
Length: 4 year(s) Total Positions: 12 (GYT: 3)
Program ID: 220-06-31-029

Oakland
Kaiser Permanente Medical Group (Northern California) Program
Kaiser Permanente Medical Group (Northern California)
Kaiser Permanente Medical Center (Oakland)
Program Director: Lesley R. Levin, MD
Dept. of OB/GYN
Kaiser Permanente Medical Center
280 W MacArthur Blvd
Oakland, CA 94611
510-896-6126
Length: 4 year(s) Total Positions: 12 (GYT: 3)
Program ID: 220-06-12-040

Kaiser Permanente Medical Group (Northern California) Program
Kaiser Permanente Medical Group (Northern California)
Kaiser Permanente Medical Center (San Francisco)
Program Director: Ira Golditch, MD
Dept. of Obstetrics/Gynecology
2200 O’Farrell St
San Francisco, CA 94115
415-292-4163
Length: 4 year(s) Total Positions: 16 (GYT: 4)
Program ID: 220-06-12-045

Kaiser Permanente Medical Group (Northern California) Program
Kaiser Permanente Medical Group (Northern California)
Kaiser Permanente Medical Center (Santa Clara)
Kaiser Permanente Medical Center (Oakland)
Program Director: David R. Levin, MD
Kaiser Permanente Medical Center
House Staff Office Trailer J #3
900 Kivel Blvd
San Jose, CA 95051-5989
408-236-4921
Length: 4 year(s) Total Positions: 12 (GYT: 3)
Program ID: 220-06-12-311
Accredited Programs in Obstetrics and Gynecology

Orange
University of California (Irvine) Program
University of California (Irvine) Medical Center
Long Beach Memorial Medical Center
Program Director:
K.K. A Koong Jr, MD
Univ of California (Irvine) Medical Center Dept of OB/GYN
101 The City Dr
Orange, CA 92868
714 456-6707
Length: 4 Year(s)  Total Positions: 28  (GYI: T)
Program Id: 220-06-21-001

Pasadena
Southern California Kaiser Permanente Medical Care (Los Angeles) Program
Southern California Kaiser Permanente Medical Group
Kaiser Foundation Hospital (Los Angeles)
Program Director:
Reva Winkler, MD
Kaiser Foundation Hospital
Dept of OB/GYN
4400 Sunset Blvd Sch Pi
Los Angeles, CA 90027
323 647-7045
Length: 4 Year(s)  Total Positions: 20  (GYI: 6)
Program Id: 220-05-12-035

Sacramento
University of California (Davis) Program
University of California (Davis) Medical Center
Kaiser Foundation Hospital (Sacramento)
Program Director:
R Jeffrey Chang, MD
Dept of OB/GYN
1621 Alhambra Blvd
Ste 2500
Sacramento, CA 95816-7051
916 734-6939
Length: 4 Year(s)  Total Positions: 20  (GYI: 5)
Program Id: 220-05-11-028

San Diego
Naval Medical Center (San Diego) Program*
Naval Medical Center (San Diego)
Program Director:
Manuel E Riva-Istria, MD
Dept of Obstetrics and Gynecology
Naval Medical Center
San Diego, CA 92134-5000
619 532-7004
Length: 3 Year(s)  Total Positions: 21  (GYI: 5)
Program Id: 220-05-11-012

University of California (San Diego) Program
University of California (San Diego) Medical Center
Kaiser Foundation Hospital (San Diego)
Program Director:
Robert Remik, MD
UCSD Medical Center
200 W Arbor Dr #5454
San Diego, CA 92161-8434
619 544-6923
Length: 4 Year(s)  Total Positions: 20  (GYI: 5)
Program Id: 220-06-21-044

San Francisco
University of California (San Francisco) Program
University of California (San Francisco) School of Medicine
California Pacific Medical Center (Pacific Campus)
San Francisco General Hospital Medical Center
University of California (San Francisco) Medical Center
Program Director:
James Goldberg, MD
Dept of OB/GYN Box 0132
Rm M-183
Univ of California San Francisco
San Francisco, CA 94143-0132
415 476-5180
Length: 4 Year(s)  Total Positions: 32  (GYI: 8)
Program Id: 220-06-21-047

San Jose
Santa Clara Valley Medical Center Program
Santa Clara Valley Medical Center
Program Director:
Roger Spencer, MD
Santa Clara Valley Medical Center
751 S Bascom Ave
San Jose, CA 95128
408 885-5659
Length: 4 Year(s)  Total Positions: 12  (GYI: 3)
Program Id: 220-05-21-333

Stanford
Stanford University Program
Stanford University Hospital
Program Director:
Mary Lake Poitai, MD
Stanford University School of Medicine
Dept of OB/GYN
Stanford, CA 94305-5017
415 514-5973
Length: 4 Year(s)  Total Positions: 16  (GYI: 4)
Program Id: 220-06-21-048

Torrance
Los Angeles County-Harbor-UCLA Medical Center Program
Los Angeles County-Harbor-UCLA Medical Center
Program Director:
Charles R Brinkman III, MD
Harbor-UCLA Medical Center
Dept of Obstetrics-Gynecology Box 2
1000 W Carson St Box 2910
Torrance, CA 90609-2910
310 222-3561
Length: 4 Year(s)  Total Positions: 24  (GYI: 6)
Program Id: 220-06-21-050

Travis AFB
David Grant USAF Medical Center Program
David Grant Medical Center
Program Director:
Col Raymond L Graham, MD
60 Medical Group
161 Bodie Circle
Dept of OB/GYN (SGHC)
Travis, CA 94555-1800
707 459-5331
Length: 4 Year(s)  Total Positions: 12  (GYI: 3)
Program Id: 220-06-21-091

Colorado
Denver
St Joseph Hospital Program
St Joseph Hospital
Program Director:
Richard Alzen, MD
Saint Joseph Hospital Dept of OB/GYN
1555 Franklin St
Denver, CO 80218-1191
303 897-7505
Length: 4 Year(s)  Total Positions: 17  (GYI: 8)
Program Id: 220-07-21-361

University of Colorado Program*
University of Colorado Health Sciences Center
Denver Health and Hospitals
Rose Medical Center
Program Director:
Ronald S Gibbs, MD
University of Colorado Health Sciences Center
4200 E Ninth Ave B-118
Denver, CO 80220
303 270-7616
Length: 4 Year(s)  Total Positions: 26  (GYI: 9)
Program Id: 220-07-31-052

Connecticut
Bridgeport
Bridgeport Hospital Program
Bridgeport Hospital
Program Director:
John C Wetherhahn, MD
Bridgeport Hospital
267 Grant St
Bridgeport, CT 06610-3701
203 384-3042
Length: 4 Year(s)  Total Positions: 8  (GYI: 2)
Program Id: 220-08-11-054

Danbury
Danbury Hospital Program
Danbury Hospital
Program Director:
Lester Silverman, MD
Danbury Hospital
24 Hospital Ave
Danbury, CT 06810
203 797-4465
Length: 4 Year(s)  Total Positions: 3  (GYI: 3)
Program Id: 220-08-21-045

Farmington
University of Connecticut Program
University of Connecticut School of Medicine
New Britain General Hospital
Univ of Connecticut Health Center/John Dempsey Hospital
Program Director:
John F Rodin, MD
University of Connecticut Health Center
Dept of Obstetrics/Gynecology
263 Farmington Ave
Farmington, CT 06030-1280
203 679-2853
Length: 4 Year(s)  Total Positions: 17  (GYI: 4)
Program Id: 220-08-31-056

* Updated information not provided.

554 Graduate Medical Education Directory
Accredited Programs in Obstetrics and Gynecology

Hartford
Hartford Hospital Program
Hartford Hospital
Program Director:
Stephen L. Curry, MD
Hartford Hospital Dept of OB/GYN
80 Seymour St
PO Box 5007
Hartford, CT 06102-5007
203 545-3786
Length: 4 Year(s) Total Positions: 20 (OYI: 5)
Program ID: 220-08-124-067

Mount Sinai Hospital Program
Mount Sinai Hospital
Program Director:
Richard J. Scott, MD
Mount Sinai Hospital
500 Blue Hill Ave
Hartford, CT 06112
203 285-4344
Length: 4 Year(s) Total Positions: 8 (OYI: 3)
Program ID: 220-08-11-638

St Francis Hospital and Medical Center Program
St Francis Hospital and Medical Center
Program Director:
John M. Gibbons Jr, MD
Salute Francis Hospital and Medical Center
114 Woodland St
Hartford, CT 06106-1299
203 565-4456
Length: 4 Year(s) Total Positions: 12 (OYI: 3)
Program ID: 220-08-11-1459

New Haven
Yale-New Haven Medical Center Program
Yale-New Haven Hospital
Waterbury Hospital Health Center
Program Director:
Frederick Haftian, MD
Yale University School of Medicine
Dept of Obstetrics-Gynecology
333 Cedar St
PO Box 208063 Pm Rm 335
New Haven, CT 06520-8063
203 785-4003
Length: 4 Year(s) Total Positions: 24 (OYI: 6)
Program ID: 220-08-21-000

Delaware
Wilmington
The Medical Center of Delaware Program
The Medical Center of Delaware
Program Director:
Charles W. Whitney, MD
4750 Stanton Ogletown Rd
Newark, DE 19713
202 215-3530
Length: 4 Year(s) Total Positions: 16 (OYI: 4)
Program ID: 220-09-11-602

District of Columbia
Washington
George Washington University Program
George Washington University School of Medicine
Fairfax Hospital
George Washington University Hospital
Holy Cross Hospital of Silver Spring
Program Director:
John W. Larson Jr, MD
George Washington University Hospital Dept of OB/GYN
2150 Pennsylvania Ave NW
Washington, DC 20037
202 994-3410
Length: 4 Year(s) Total Positions: 27 (OYI: 0)
Program ID: 220-10-21-064

Georgetown University Program
Georgetown University Hospital
Arlington Hospital
District of Columbia General Hospital
Program Director:
Anthony S. Sciulli, MD
Georgetown University Hospital
Dept of OB/GYN
3940 Reservoir Rd NW 3 FNC
Washington, DC 20007-2197
202 687-6653
Length: 4 Year(s) Total Positions: 24 (OYI: 6)
Program ID: 220-10-21-065

Howard University Program
Howard University Hospital
District of Columbia General Hospital
Program Director:
Newton G. Osborne, MD PhD
Howard University Hospital
Dept of OB/GYN
2041 Georgia Ave NW
Washington, DC 20001
202 583-4162
Length: 4 Year(s) Total Positions: 24 (OYI: 6)
Program ID: 220-10-21-065

Walter Reed Army Medical Center Program
Walter Reed Army Medical Center
Program Director:
John R. Coughran, MD
Walter Reed Army Medical Center
Dept of OB/GYN
8625 Georgia Ave NW
Washington, DC 20057-5001
202 597-1129
Length: 4 Year(s) Total Positions: 14 (OYI: 3)
Program ID: 220-10-21-006

Washington Hospital Center Program
Washington Hospital Center
Program Director:
Phillip J. Goldstein, MD
Washington Hospital Center
110 Irving St NW Ste 5 B-63
Washington, DC 20010-2975
202 877-6004
Length: 4 Year(s) Total Positions: 16 (OYI: 4)
Program ID: 220-10-31-007

Florida
Gainesville
University of Florida College of Medicine (Pensacola) Program
University of Florida College of Medicine
Sacred Heart Hospital of Pensacola
Sand Lake Hospital at the University of Florida
Program Director:
B L Stalnaker, MD
University of Florida College of Medicine
Dept of OB/GYN
1004 Garpenter Creek Dr
Pensacola, FL 32506-3531
904 484-6100
Length: 4 Year(s) Total Positions: 12 (OYI: 3)
Program ID: 220-11-21-077

University of Florida Program
University of Florida College of Medicine
Shands Hospital at the University of Florida
Program Director:
W Patrick Duff, MD
University of Florida College of Medicine Dept of OB/GYN
PO Box 100384
1600 SW Archer Rd
Gainesville, FL 32610-0384
904 392-8222
Length: 4 Year(s) Total Positions: 20 (OYI: 5)
Program ID: 220-11-11-068

Jacksonville
University of Florida Health Science Center/Jacksonville Program
University Medical Center (UFHSC/J)
Program Director:
Robert J. Thompson, MD
University of Florida Health Science Center Jacksonville
6511 W Big Shus St
Jacksonville, Fl 32209
904 549-3100
Length: 4 Year(s) Total Positions: 23 (OYI: 6)
Program ID: 220-11-21-089

Miami
University of Miami-Jackson Memorial Medical Center Program
University of Miami-Jackson Memorial Medical Center
Program Director:
William A. Little, MD
Jackson Memorial Medical Center
1611 NW 12th Ave
East Tower Rm 503
Miami, FL 33136-306
305 586-6694
Length: 4 Year(s) Total Positions: 17 (OYI: 9)
Program ID: 220-11-21-070

Orlando
Orlando Regional HealthCare System Program
Orlando Regional Medical Center
Program Director:
Thomas W Castro, MD
Orlando Regional Healthcare System
165 W Miller St
Orlando, FL 32806-2083
407 841-5287
Length: 4 Year(s) Total Positions: 16 (OYI: 4)
Program ID: 220-11-12-072

* Updated information not provided.
Accredited Programs in Obstetrics and Gynecology

St Petersburg
Bayfront Medical Center Program
Bayfront Medical Center
Program Director:
James LaPolla, MD
Bayfront Medical Center Inc
560 Seventh St S
St Petersburg, FL 33701
813-883-6860
Length: 4 Year(s) Total Positions: 12 (GYI: 3)
Program ID: 220-11-11-074

Georgia

Atlanta
Emory University Program
Emory University School of Medicine
Crawford Long Hospital of Emory University
Emory University Hospital
Grady Memorial Hospital
Program Director:
John A. Rock, MD
Dept of OB/GYN
68 Butler St SE
Atlanta, GA 30303
404-616-2740
Length: 4 Year(s) Total Positions: 49 (GYI: 13)
Program ID: 220-12-12-1678

Georgia Baptist Medical Center Program
Georgia Baptist Medical Center
Program Director:
Steven Lloyd Saltzman, MD
Georgia Baptist Medical Center
Dept of OB/GYN
383 Parkway Dr NE Box 423
Atlanta, GA 30312
404-266-8654
Length: 4 Year(s) Total Positions: 12 (GYI: 3)
Program ID: 220-12-23-077

Augusta
Medical College of Georgia Program
Medical College of Georgia Hospital and Clinics
University Hospital
Program Director:
Robert C. Maier, MD
Medical College of Georgia Hospital and Clinics
Dept of OB/GYN
Augusta, GA 30913-3305
706-721-3991
Length: 4 Year(s) Total Positions: 21 (GYI: 6)
Program ID: 220-12-21-078

Macon
Mercer University School of Medicine Program
Medical Center of Central Georgia
Program Director:
Louis W. Gooby, MD
792 Fine St
Macon, GA 31201
(912) 633-1066
Length: 4 Year(s) Total Positions: 12 (GYI: 3)
Program ID: 220-12-11-079

Savannah
Memorial Medical Center Program
Memorial Medical Center
Program Director:
John W. Goldkamp, MD
Memorial Medical Center Inc
PO Box 20009
Savannah, GA 31403-3089
912-350-5975
Length: 4 Year(s) Total Positions: 8 (GYI: 2)
Program ID: 220-12-11-080

Illinois

Hawaii
Honolulu
University of Hawaii Program
University of Hawaii John A Burns School of Medicine
Kapiolani Medical Center for Women and Children
Queen's Medical Center
Program Director:
Roy T. Nakaogama, MD
University of Hawaii
Dept of OB/GYN
1515 Punahou St Rm 824
Honolulu, HI 96826
808-856-7407
Length: 4 Year(s) Total Positions: 21 (GYI: 6)
Program ID: 220-14-31-081

Ilinois
Chicago
Columbus Hospital Program
Columbus Hospital
Gabriella Hospital
Program Director:
Piato Rezai, MD
Columbus Hospital Dept of OB/GYN
2300 N Lakeview
Chicago, IL 60614
312-883-7233
Length: 4 Year(s) Total Positions: 12 (GYI: 3)
Program ID: 220-16-21-083

Cook County Hospital/Chicago Medical School Program
Cook County Hospital
Program Director:
E.L. Swift, MD
Cook County Hospital
325 W Harrison St
Chicago, IL 60612
312-252-9038
Length: 4 Year(s) Total Positions: 34 (GYI: 10)
Program ID: 220-16-31-084

Illinois Masonic Medical Center Program
Illinois Masonic Medical Center
Program Director:
John J. Barton, MD
Dept of OB/GYN
Illinois Masonic Medical Center
836 Wellington Ave
Chicago, IL 60667-5180
312-295-8485
Length: 4 Year(s) Total Positions: 12 (GYI: 3)
Program ID: 220-16-21-085

McGaw Medical Center of Northwestern University Program
Northwestern University Medical School
Evanson Hospital
Program Director:
Sharon L. Dooley, MD
Northwestern University
Graduate Med Educ
303 E Chicago Ave #4-332
Chicago, IL 60611-9008
312-503-7975
Length: 4 Year(s) Total Positions: 32 (GYI: 8)
Program ID: 220-16-31-089

Mercy Hospital and Medical Center Program
Mercy Hospital and Medical Center
Program Director:
John E. Patterson III, MD
Mercy Hospital and Medical Center
Stevenson Esplanade at King Dr
Chicago, IL 60616-2477
312-567-3400
Length: 4 Year(s) Total Positions: 12 (GYI: 3)
Program ID: 220-16-11-060

Mount Sinai Hospital Medical Center of Chicago Program
Mount Sinai Hospital Medical Center of Chicago
Program Director:
Joseph Blankstein, MD
Mount Sinai Hospital Medical Center of Chicago
California Ave. at 15th St
Room F-208
Chicago, IL 60608
312-257-6459
Length: 4 Year(s) Total Positions: 13 (GYI: 3)
Program ID: 220-16-11-088

Rush Medical College Program
Rush Presbyterian-St Luke's Medical Center
EHS Chris Hospital and Medical Center
Rush North Shore Medical Center
Program Director:
Dee E. Pennington, MD
Rush Presbyterian-St Luke's Medical Center
1553 W Congress Pkwy
Chicago, IL 60612
312-444-6654
Length: 4 Year(s) Total Positions: 30 (GYI: 5)
Program ID: 220-16-21-090

* Updated information not provided.

Graduate Medical Education Directory
Accredited Programs in Obstetrics and Gynecology

St Joseph Hospital and Health Care Center Program
St Joseph Health Care Centers and Hospital
Program Director:
Abdul H Hosseini, MD
St Joseph Hospital & Health Care Center
2900 N Lake Shore Dr
Chicago, IL 60657
312-665-3132
Length: 4 Year(s) Total Positions: 8 (GYI: 2)
Program ID: 220-16-11-991

University of Chicago Program
University of Chicago Hospitals
Program Director:
Arthur L Herbst, MD
University of Chicago Hospitals
644 S Maryland Ave
MC2050
Chicago, IL 60637-1470
312-720-8117
Length: 4 Year(s) Total Positions: 24 (GYI: 6)
Program ID: 220-10-11-892

University of Illinois College of Medicine at Chicago Program
University of Illinois College of Medicine at Chicago
BHS Christ Hospital and Medical Center
Michael Reese Hospital and Medical Center
University of Illinois Hospital and Clinics
Program Director:
Antonio Socasnegra, MD
University of Illinois Hospital
Dept of OB/GYN (MC 306)
820 S Wood St
Chicago, IL 60612
312-926-7430
Length: 4 Year(s) Total Positions: 34 (GYI: 10)
Program ID: 220-16-11-893

Evanston
St Francis Hospital of Evanston Program
St Francis Hospital of Evanston
Evanston Hospital
Program Director:
John V Kassab, DO
St Francis Hospital Dept of OB/GYN
355 N Ridge Ave
Evanston, IL 60202
708-484-6623
Length: 4 Year(s) Total Positions: 8 (GYI: 2)
Program ID: 220-16-21-094

Maywood
Loyola University Program
Foster G McGaw Hospital-Loyola University of Chicago
MacNeal Memorial Hospital
Resurrection Medical Center
Program Director:
Gregorio Delgado, MD
Loyola University Medical Center
Dept of Obstetrics & Gynecology
2156 S First Ave
Maywood, IL 60153
708 216-3323
Length: 4 Year(s) Total Positions: 24 (GYI: 5)
Program ID: 220-16-21-089

Park Ridge
Lutheran General Hospital Program
Lutheran General Hospital
Program Director:
James D Keller MD
Dept of OB/GYN
Lutheran General Hospital
1775 Dempster St
Park Ridge, IL 60068
708-666-0604
Length: 4 Year(s) Total Positions: 12 (GYI: 3)
Program ID: 220-16-21-325

Peoria
University of Illinois College of Medicine at Peoria Program
University of Illinois College of Medicine at Peoria
St Francis Medical Center
Program Director:
Rodney A McLaren, MD
St Francis Medical Center
600 N Glen Oak
Peoria, IL 61657
309-650-4153
Length: 4 Year(s) Total Positions: 8 (GYI: 3)
Program ID: 220-16-11-896

Springfield
Southern Illinois University Program
Southern Illinois University School of Medicine
Memorial Medical Center
St John’s Hospital
Program Director:
Robert Prentice, MD
Southern Illinois University Dept of OB/GYN
PO Box 19280
Springfield, IL 62794-9280
217-792-3247
Length: 4 Year(s) Total Positions: 16 (GYI: 4)
Program ID: 220-16-21-097

Indiana
Indianapolis
Indiana University Medical Center Program
Indiana University Medical Center
William S Feherty Memorial Hospital
Program Director:
Richard S Hansell, MD
Feherty Memorial Hospital
Dept of OB/GYN P-5
Indianapolis, IN 46222-3370
317-630-6594
Length: 4 Year(s) Total Positions: 28 (GYI: 7)
Program ID: 220-17-21-099

Methodist Hospital of Indiana Program
Methodist Hospital of Indiana
Program Director:
J Thomas Benson, MD
Methodist Hospital of Indiana
1633 N Capitol Ave Ste #436
Indianapolis, IN 46202
317-299-6600
Length: 4 Year(s) Total Positions: 4 (GYI: 4)
Program ID: 220-17-11-100

St Vincent Hospital and Health Care Center Program*
St Vincent Hospital and Health Care Center
Program Director:
Philip N Ekenow Jr, MD
Raymond D Rice, MD
St Vincent Hospital and Health Care Center
Dept of OB/GYN
8220 Naab Rd #3000
Indianapolis, IN 46250
317-338-7540
Length: 4 Year(s) Total Positions: 11 (GYI: 3)
Program ID: 220-17-11-101

Iowa
Iowa City
University of Iowa Hospitals and Clinics Program
University of Iowa Hospitals and Clinics
Program Director:
Frank J Zielinski, MD
University of Iowa Hospitals and Clinics
Dept of Obstetrics/Gynecology
Iowa City, IA 52242-1009
319-355-7717
Length: 4 Year(s) Total Positions: 24 (GYI: 6)
Program ID: 220-18-21-102

Kansas
Kansas City
University of Kansas Medical Center Program
University of Kansas School of Medicine
University of Kansas Medical Center
Program Director:
Sebastian Fure, MD PhD
University of Kansas Medical Center
3901 Rainbow Blvd
Kansas City, KS 66160-7116
913-586-6200
Length: 4 Year(s) Total Positions: 12 (GYI: 3)
Program ID: 220-19-11-103

Wichita
University of Kansas (Wichita) Program
University of Kansas School of Medicine (Wichita)
Wichita Medical Center
Program Director:
Douglas V Herbel, MD
Wichita Medical Center
560 N Hillside
Wichita, KS 67214
316-688-3100
Length: 4 Year(s) Total Positions: 20 (GYI: 5)
Program ID: 220-19-11-104

* Updated information not provided.

Graduate Medical Education Directory
Kentucky

Lexington

University of Kentucky Medical Center Program
University Hospital-Albert B Chandler Medical Center
Central Baptist Hospital
Program Director:
Frank C Millar, MD
University of Kentucky Medical Center
800 Ross St Rm 15N318
Dept of OB/GYN
Lexington, KY 40536-0084
606.258.0455
Length: 4 Year(s) Total Positions: 20 (GYI: 5)
Program ID: 220-29-11-105

Louisville

University of Louisville Program
University of Louisville School of Medicine
Kosair Children's Hospital (Alliant Health System)
Norton Hospital (Alliant Health System)
University of Louisville Hospital
Program Director:
Stanley A Gall, MD
Dept of OB/GYN
University of Louisville Louisville, KY 40202
502.852.0811
Length: 4 Year(s) Total Positions: 24 (GYI: 6)
Program ID: 220-29-21-106

Louisiana

New Orleans

Alton Ochsner Medical Foundation Program
Alton Ochsner Medical Foundation
Leonard J Chabert Medical Center
Program Director:
Gerald F Joseph Jr, MD
Alton Ochsner Medical Foundation
Dept of Graduate Med Educ
1516 Jefferson Hwy
New Orleans, LA 70121
504.842.4145
Length: 4 Year(s) Total Positions: 16 (GYI: 4)
Program ID: 220-29-23-109

Louisiana State University Program
Louisiana State University School of Medicine
Earl K Long Medical Center
Medical Center of Louisiana at New Orleans-LSU Division
University Medical Center (Lafayette)
Program Director:
Thomas E Elkins, MD
Dept of OB/GYN Rm 550
1540 Tulane Ave
New Orleans, LA 70112-2822
504.568.4590
Length: 4 Year(s) Total Positions: 44 (GYI: 11)
Program ID: 220-31-11-107

Tulane University Program
Tulane University School of Medicine
 Huey P Long Regional Medical Center
Medical Center of Louisiana at New Orleans-Tulane Division
Tulane University Hospital and Clinics
Program Director:
April G O'Quin, MD
Dept of Obstetrics-Gynecology
1430 Tulane Ave Box SL-11
New Orleans, LA 70112-2899
504.866.2145
Length: 4 Year(s) Total Positions: 37 (GYI: 9)
Program ID: 220-31-21-108

Shreveport

Louisiana State University (Shreveport) Program
Louisiana State University Medical Center-Shreveport
E A Conway Medical Center
Program Director:
G G Brooks, MD
Louisiana State University Medical Center Hospital
Medical Education (OB/GYN)
1501 Kings Hwy FO Box 33936
Shreveport, LA 71130-3502
318.675.5079
Length: 4 Year(s) Total Positions: 24 (GYI: 6)
Program ID: 220-31-11-110

Maine

Portland

Maine Medical Center Program
Maine Medical Center
Program Director:
Phillip G Stubblefield, MD
Maine Medical Center
23 Bramhall St
Portland, ME 04102
207.871.2149
Length: 4 Year(s) Total Positions: 6 (GYI: 3)
Program ID: 220-33-11-111

Maryland

Baltimore

Franklin Square Hospital Center Program
Franklin Square Hospital Center
Program Director:
Gerald A Glowacki, MD MBA
Franklin Square Hospital Center
Dept of OB/GYN
9000 Franklin Sq Dr
Baltimore, MD 21227
410.682.7061
Length: 4 Year(s) Total Positions: 13 (GYI: 5)
Program ID: 220-29-23-112

Greater Baltimore Medical Center Program
Greater Baltimore Medical Center
University of Maryland School of Medicine
Program Director:
Alfred E Bent, MD
Greater Baltimore Medical Center
6669 N Charles St.
Ste 307
Baltimore, MD 21204
410.225.2704
Length: 4 Year(s) Total Positions: 13 (GYI: 3)
Program ID: 220-23-31-118

Harbor Hospital Center Program
Harbor Hospital Center
Program Director:
Pedro Arrabal, MD
Harbor Hosp Center
3001 S Hanover
Baltimore, MD 21225
410.547.3629
Length: 4 Year(s) Total Positions: 9 (GYI: 2)
Program ID: 220-29-11-110

Johns Hopkins University Program
Johns Hopkins University School of Medicine
Johns Hopkins Bayview Medical Center
Johns Hopkins Hospital
Program Director:
David C Foster, MD
The Johns Hopkins Hospital
400 N Wolfe St
Harvey 330
Baltimore, MD 21287-8302
410.614.0569
Length: 4 Year(s) Total Positions: 28 (GYI: 7)
Program ID: 220-29-23-114

Maryland General Hospital Program
Maryland General Hospital
Program Director:
Leonnard Herbst, MD
Maryland General Hospital
517 Linden Ave
Baltimore, MD 21201
410.225.5475
Length: 4 Year(s) Total Positions: 8 (GYI: 2)
Program ID: 220-23-11-115

Sinai Hospital of Baltimore Program
Sinai Hospital of Baltimore
Program Director:
Samuel Smith, MD
Sinai Hospital of Baltimore
Medical Staff/Education Office
2401 W Belvedere Ave
Baltimore, MD 21215-5271
410.578.8252
Length: 4 Year(s) Total Positions: 16 (GYI: 4)
Program ID: 220-24-12-118

Union Memorial Hospital Program
Union Memorial Hospital
Program Director:
Clifford B Wheelock Jr, MD
Union Memorial Hospital
201 E University Pkwy
Baltimore, MD 21208-2683
410.554.3524
Length: 4 Year(s) Total Positions: 8 (GYI: 2)
Program ID: 220-29-12-120

University of Maryland Program*
University of Maryland Medical System
Mercy Medical Center
Program Director:
Marion C Ounshaw Jr, MD
University of Maryland Medical System
22 S Greene St
Baltimore, MD 21201
410.328.5956
Length: 4 Year(s) Total Positions: 24 (GYI: 6)
Program ID: 220-23-31-121

* Updated information not provided.
Accredited Programs in Obstetrics and Gynecology

Bethesda
National Naval Medical Center (Bethesda) Program*
National Naval Medical Center (Bethesda)
Program Director:
Cynthia J Macri, MD
Dept of OB/GYN
National Naval Medical Center
801 Wisconsin Ave
Bethesda, MD 20889-5600
301 295-4372
Length: 3 Year(s) Total Positions: 17 (GYT: 5)
Program ID: 220-23-21013

Massachusetts
Boston
Beth Israel Hospital Program
Beth Israel Hospital
Program Director:
Henry Khabbazi, MD
Beth Israel Hospital
Harvard Medical School
330 Brookline Ave
Boston, MA 02215
617 735-2100
Length: 4 Year(s) Total Positions: 17 (GYT: 4)
Program ID: 220-24-1203

Boston City Hospital Program*
Boston City Hospital
Malden Hospital
Program Director:
Kwabena Kyei-Aboagye, MD
Boston City Hospital
181 Harrison Ave
Boston, MA 02118
617 344-5158
Length: 4 Year(s) Total Positions: 21 (GYT: 6)
Program ID: 220-24-21-124

Brigham and Women’s Hospital Program
Brigham and Women’s Hospital
Massachusetts General Hospital
Program Director:
Robert Barbieri, MD
Brigham and Women’s Hospital
Department of OB/GYN
75 Francis St, IASBL, 0970
Boston, MA 02115
617 732-5444
Length: 4 Year(s) Total Positions: 36 (GYT: 9)
Program ID: 220-24-11-125

Tufts University Program
New England Medical Center Hospitals
St Elizabeth’s Medical Center of Boston
Program Director:
Charles Y Kawada, MD
New England Medical Center
750 Washington St
NEMC Box 022
Boston, MA 02111
617 638-0285
Length: 4 Year(s) Total Positions: 31 (GYT: 5)
Program ID: 220-24-21-128

Springfield
Baystate Medical Center Program
Baystate Medical Center
Program Director:
Martin L Gimpovsky, MD
Baystate Medical Center
Dept of OB/GYN
315 Chestnut St
Springfield, MA 01190
413 794-6331
Length: 4 Year(s) Total Positions: 24 (GYT: 6)
Program ID: 220-24-12-229

Worcester
University of Massachusetts Medical Center Program*
University of Massachusetts Medical Center
Medical Center of Central Massachusetts
Program Director:
Jeffrey Riley, MD
University of Massachusetts Medical Center
55 Lake Ave N
Worcester, MA 01655
508 856-3108
Length: 4 Year(s) Total Positions: 16 (GYT: 4)
Program ID: 220-24-21-130

Michigan
Ann Arbor
St Joseph Mercy Hospital Program
St Joseph Mercy Hospital (Catherine McAuley Health System)
University of Michigan Hospitals
Program Director:
Jonathan W T Ayers, MD
Catherine McAuley Health Center
5000 S Medical Dr Ste E-2112
Ann Arbor, MI 48109
313 716-3908
Length: 4 Year(s) Total Positions: 12 (GYT: 3)
Program ID: 220-25-31-131

University of Michigan Program
University of Michigan Hospitals
Program Director:
Timothy B Johnson, MD
University of Michigan Medical School
1500 E Medical Center Dr
Dept of OB/GYN
Ann Arbor, MI 48109-0718
313 764-3120
Length: 4 Year(s) Total Positions: 20 (GYT: 5)
Program ID: 220-25-31-132

Dearborn
Oakwood Hospital Program
Oakwood Hospital
Program Director:
Charles T Cash, Jr, MD
Oakwood Hosp
18101 Oakwood Blvd
PO Box 2509
Dearborn, MI 48123-2500
313 503-7819
Length: 4 Year(s) Total Positions: 16 (GYT: 4)
Program ID: 220-26-31-133

Detroit
Henry Ford Hospital Program
Henry Ford Hospital
Program Director:
Ronald T Barkman, MD
Henry Ford Hospital
5791 W Grand Blvd
Detroit, MI 48202
313 876-3464
Length: 4 Year(s) Total Positions: 13 (GYT: 4)
Program ID: 220-25-11-139

Sinai Hospital Program
Sinai Hospital
Program Director:
David B Schwartz, MD
Sinai Hospital
6767 W Outer Dr
Detroit, MI 48206-3899
313 463-5230
Length: 4 Year(s) Total Positions: 17 (GYT: 4)
Program ID: 220-25-11-138

St John Hospital and Medical Center Program
St John Hospital and Medical Center
Program Director:
Minahcherl Kasthoor, MD
St John Hospital and Medical Center
Dept of Medical Educ
22103 Moross Rd
Detroit, MI 48238-2172
313 343-3970
Length: 4 Year(s) Total Positions: 12 (GYT: 3)
Program ID: 220-25-11-137

Wayne State University/Detroit Medical Center Program
Wayne State University School of Medicine
Grace Hospital
Hutzel Hospital
Program Director:
David B Cotter, MD
William B Blessed, MD
Wayne State University School of Medicine
Dept of OB/GYN
4707 St Antoine
Detroit, MI 48201
313 745-7290
Length: 4 Year(s) Total Positions: 49 (GYT: 13)
Program ID: 220-25-21-139

Flint
Hurley Medical Center/Michigan State University Program
Hurley Medical Center
Program Director:
Clintan H Dowd, MD
One Hurley Plaza
Flint, MI 48503-6883
810 25-3044
Length: 4 Year(s) Total Positions: 8 (GYT: 2)
Program ID: 220-25-31-140

* Updated information not provided.
Grand Rapids
Blodgett Memorial Medical Center/St Mary's Health Services Program
Blodgett Memorial Medical Center
St Mary's Health Services
Program Director:
Charles W Newton III, MD
Blodgett Memorial Medical Center
Med Educ Office
1840 Wealthy SE
Grand Rapids, MI 49506
616 774-7732
Length: 4 Year(s) Total Positions: 17 (GYN: 4)
Program ID: 220-25-21-141

Butterworth Hospital Program
Butterworth Hospital
Program Director:
Donney Ligon, MD
Butterworth Hospital #41
100 Michigan St NE
A822
Grand Rapids, MI 49503
616 776-1829
Length: 4 Year(s) Total Positions: 16 (GYN: 4)
Program ID: 220-25-11-145

Lansing
Sparrow Hospital/Michigan State University Program*
Sparrow Hospital
Program Director:
Bruce H Drucker, MD
Sparrow Hospital
OB/GYN Residency Office
1215 E Michigan Ave
Lansing, MI 48906-7880
517 483-3577
Length: 4 Year(s) Total Positions: 12 (GYN: 3)
Program ID: 220-25-31-143

Pontiac
North Oakland Medical Center Program
North Oakland Medical Centers
Program Director:
Leonard Dorey, MD
North Oakland Medical Centers
461 W Huron
Pontiac, MI 48341
810 857-7210
Length: 4 Year(s) Total Positions: 8 (GYN: 2)
Program ID: 220-25-11-144

Royal Oak
William Beaumont Hospital Program
William Beaumont Hospital
Program Director:
John B Mushch, MD
William Beaumont Hospital
3601 W 13 Mile Rd
Royal Oak, MI 48073
810 561-0047
Length: 4 Year(s) Total Positions: 24 (GYN: 6)
Program ID: 220-25-11-146

Saginaw
Saginaw Cooperative Hospitals Program
Saginaw Cooperative Hospitals Inc
Saginaw General Hospital
Program Director:
Joseph P Marshall, MD
Saginaw Cooperative Hospitals
1000 Houghton Ave
Saginaw, MI 48602
517 771-8828
Length: 4 Year(s) Total Positions: 13 (GYN: 3)
Program ID: 220-25-21-147

Southfield
Providence Hospital Program
Providence Hospital
Program Director:
Federico G Mariona, MD
Providence Hospital
Med Educ
16001 W 9 Mile Rd
Southfield, MI 48075
810 434-3068
Length: 4 Year(s) Total Positions: 16 (GYN: 4)
Program ID: 220-25-21-148

Minnesota
Minneapolis
University of Minnesota Program
University of Minnesota Medical School
Hennepin County Medical Center
University of Minnesota Hospital and Clinic
Program Director:
Lee B Twigg, MD
University of Minnesota Department of OB/GYN
420 Delaware St SE
Box 305
Minneapolis, MN 55455
612 626-3111
Length: 4 Year(s) Total Positions: 28 (GYN: 6)
Program ID: 220-25-21-149

Rochester
Mayo Graduate School of Medicine Program
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Rochester)
Rochester Methodist Hospital
St Mary's Hospital of Rochester
Program Director:
Timothy O Wilson, MD
MGM Application Processing Center
Mayo Graduate School of Medicine
200 First St SW
Rochester, MN 55905
507 266-8701
Length: 4 Year(s) Total Positions: 16 (GYN: 4)
Program ID: 220-25-21-150

St Paul
St Paul-Ramsey Medical Center Program
St Paul-Ramsey Medical Center
United Hospital
Program Director:
Peter T D'Ascoli, MD
St Paul-Ramsey Medical Center
640 Jackson St
St Paul, MN 55101-2566
612 221-3476
Length: 4 Year(s) Total Positions: 12 (GYN: 3)
Program ID: 220-25-21-154

Mississippi
Jackson
University of Mississippi Medical Center Program
University of Mississippi School of Medicine
University Hospital
Program Director:
John C Morrison, MD
University of Mississippi School of Medicine
Dept of OB/GYN
2500 N State St
Jackson, MS 39216
662 984-5543
Length: 4 Year(s) Total Positions: 28 (GYN: 6)
Program ID: 220-27-11-151

Keesler AFB
Keesler Medical Center Program
Keesler Medical Center
Program Director:
Lt Col Paul R Zaya, MD
81st Medical Group/SGHSO
361 Fisher St Ste 107
Keesler AFB, MS 39534-2576
662 377-5396
Length: 4 Year(s) Total Positions: 14 (GYN: 3)
Program ID: 220-27-21-002

Missouri
Columbia
University of Missouri-Columbia Program
University of Missouri-Columbia School of Medicine
University and Children's Hospital
Program Director:
James W Daly, MD
University of Missouri-Columbia
Dept of OB/GYN 3067 IHC
One Hospital Dr
Columbia, MO 65212
314 882-6361
Length: 4 Year(s) Total Positions: 12 (GYN: 3)
Program ID: 220-25-11-162

Kansas City
University of Missouri at Kansas City Program
University of Missouri-Kansas City School of Medicine
St Luke's Hospital
Truman Medical Center-West
Program Director:
James P Youngblood, MD
Truman Medical Center
2301 Holmes
Kansas City, MO 64108
816 556-3464
Length: 4 Year(s) Total Positions: 32 (GYN: 8)
Program ID: 220-25-21-154

* Updated information not provided.
St Louis
St John's Mercy Medical Center Program
St John's Mercy Medical Center
Program Director:
James G Byrde, MD
St John's Mercy Medical Center
615 S New Ballas Rd
Ste 400G Tower B
St Louis, MO 63141
314-569-6826
Length: 4 Year(s) Total Positions: 16 (GYI: 4)
Program ID: 220-29-22-157

St Louis University Group of Hospitals Program
St Louis University School of Medicine
Deaconess Hospital
St Mary's Health Center
Program Director:
Roy H Petrie, MD ScD
Dept of OB/GYN
1051 Belleview Ste 410
St Louis, MO 63117
314-516-4415
Length: 4 Year(s) Total Positions: 20 (GYI: 5)
Program ID: 220-29-22-158

Washington University Program
Barnes Hospital
Jewish Hospital of St Louis
St Louis Regional Medical Center
Program Director:
James R Schrizer, MD
Washington University School of Medicine
Box 8904
4011 Barnes Hospital Plaza
St Louis, MO 63110
314-362-7138
Length: 4 Year(s) Total Positions: 36 (GYI: 9)
Program ID: 220-29-21-156

Nevada
Reno
University of Nevada Program
University of Nevada School of Medicine
University Medical Center of Southern Nevada
Womens Hospital
Program Director:
Joseph A Raja, MD
University Medical Center of Southern Nevada
3040 W Charleston Blvd #390
Las Vegas, NV 89102
702-383-2271
Length: 4 Year(s) Total Positions: 12 (GYI: 3)
Program ID: 220-31-51-318

New Jersey
Camden
UMDNJ-Robert Wood Johnson Medical School (Camden) Program
Cooper Hospital-University Medical Center
Program Director:
Ronald M Jaffe, MD
Cooper Hospital-University Medical Center
Dept of OB/GYN
Three Cooper Plaza Ste 211
Camden, NJ 08103
609-342-3605
Length: 4 Year(s) Total Positions: 16 (GYI: 4)
Program ID: 220-33-11-162

Livingston
St Barnabas Medical Center Program
St Barnabas Medical Center
Program Director:
David M Wallace, MD
St Barnabas Medical Center
94 Old Short Hills Rd
Livingston, NJ 07039
973-513-5292
Length: 4 Year(s) Total Positions: 20 (GYI: 5)
Program ID: 220-33-13-163

Long Branch
Monmouth Medical Center Program
Monmouth Medical Center
Program Director:
Paul G Stupnegg, MD
Monmouth Medical Center
300 Second Ave
Rm 231 Stanley Wing
Long Branch, NJ 07740
973-870-5179
Length: 4 Year(s) Total Positions: 8 (GYI: 3)
Program ID: 220-33-11-164

Neptune
Jersey Shore Medical Center Program
Jersey Shore Medical Center
Program Director:
Paul G Stupnegg, MD
Jersey Shore Medical Center Dept of OB/GYN
1845 Corlies Ave
Neptune, NJ 07753
732-776-4128
Length: 4 Year(s) Total Positions: 8 (GYI: 2)
Program ID: 220-33-12-155

Newark
Newark Beth Israel Medical Center Program
Newark Beth Israel Medical Center
Hackensack Medical Center
Program Director:
Kenneth A Kappy, MD
Newark Beth Israel Medical Center
201 Lyons Ave
Newark, NJ 07112
201-926-7342
Length: 4 Year(s) Total Positions: 4 (GYI: 2)
Program ID: 220-33-21-321

UMDNJ-New Jersey Medical School Program
UMDNJ-New Jersey Medical School
Hockenkass Medical Center
UMDNJ-University Hospital
Program Director:
Gerson Weiss, MD
UMDNJ-New Jersey Medical School Dept of Ob-Gyn
168 S Orange Ave Rm E906
Newark, NJ 07103-3757
201-885-3596
Length: 4 Year(s) Total Positions: 8 (GYI: 4)
Program ID: 220-33-31-106

Piscataway
UMDNJ-Robert Wood Johnson Medical School (New Brunswick) Program
UMDNJ-Robert Wood Johnson Medical School
Muhlenberg Regional Medical Center
St Peter's Medical Center
Program Director:
Robert A Knoppel, MD MPH
UMDNJ-New Jersey University of the Health Sciences
Robert Wood Johnson Medical School
Department of OB/GYN 1 RWJ Place
New Brunswick, NJ 08903-0019
908-219-7282
Length: 4 Year(s) Total Positions: 24 (GYI: 5)
Program ID: 220-33-21-167

South Orange
Seton Hall University School of Graduate Medical Education (Jersey City) Program
Seton Hall University School of Graduate Medical Education
Jersey City Medical Center
Englewood Hospital
Program Director:
Hyungkoo Yum, MD
Jersey City Medical Center
Dept of OB/GYN
60 Baldwin Ave
Jersey City, NJ 07304
201-916-2200
Length: 4 Year(s) Total Positions: 13 (GYI: 3)
Program ID: 220-33-21-324

Seton Hall University School of Graduate Medical Education (Patterson) Program
Seton Hall University School of Graduate Medical Education
St Joseph's Hospital and Medical Center
Program Director:
Peter A Reagard, MD
St Joseph's Hospital and Medical Center
700 Main St
Paterson, NJ 07503
201-977-3004
Length: 4 Year(s) Total Positions: 9 (GYI: 3)
Program ID: 220-33-21-233
Seton Hall University School of Graduate Medical Education Program
Seton Hall University School of Graduate Medical Education
St. Michael's Medical Center (Cathedral Health Services Inc)
St. James Hospital of Newark (Cathedral Health Services Inc)
Program Director:
Hambert L. Rice, MD
St. Michael's Medical Center
268 Martin Luther King Jr Blvd
MS 9
Newark, NJ 07102
201-877-5050
Length: 4 Year(s) Total Positions: 9 (GYI: 3)
Program ID: 220-33-21-822

New Mexico
Albuquerque
University of New Mexico Program
University of New Mexico School of Medicine
University Hospital
USAF Hospital (Kirtland)
Program Director:
Gloria E Sarto, MD PhD
University of New Mexico School of Medicine
Dept of OB/GYN ACC-4
2211 Lomas Blvd NE
Albuquerque, NM 87131-5286
505-272-6683
Length: 4 Year(s) Total Positions: 24 (GYI: 6)
Program ID: 220-34-21-169

New York
Albany
Albany Medical Center Program
Albany Medical Center Hospital
St. Peter's Hospital
Program Director:
Dana C Kedersha, MD
Albany Medical Center Hospital
47 New Scotland Ave A-74
Albany, NY 12208
518-262-5587
Length: 4 Year(s) Total Positions: 23 (GYI: 6)
Program ID: 220-35-21-170

Bronx
Albert Einstein College of Medicine (East Campus) Program
Albert Einstein College of Medicine of Yeshiva University
Montefiore Medical Center-Weiler Hospital
Program Director:
Irwin B. Merkatza, MD
Albert Einstein College of Medicine
University Hospital
1300 Morris Park Ave
Bronx, NY 10461
718-430-4192
Length: 4 Year(s) Total Positions: 28 (GYI: 7)
Program ID: 220-35-21-178

Albert Einstein College of Medicine (West Campus) Program
Albert Einstein College of Medicine of Yeshiva University
Montefiore Medical Center-Weiler Hospital
North Central Bronx Hospital
Program Director:
Joanna F Shulman, MD
Montefiore Medical Center North Central Bronx Hospital
3434 K nephew Ave
Rm TC-01
Bronx, NY 10457
718-436-2776
Length: 4 Year(s) Total Positions: 8 (GYI: 2)
Program ID: 220-35-21-332

Brooklyn
Brookdale Hospital Medical Center Program
Brookdale Hospital Medical Center
Program Director:
Joseph A. Ochse, MD
Brookdale Hospital Medical Center
Linden Blvd at Brookdale Plaza
Brooklyn, NY 11212
718-431-6224
Length: 4 Year(s) Total Positions: 21 (GYI: 6)
Program ID: 220-35-11-181

Brooklyn Hospital Center Program
Brooklyn Hospital Center
Program Director:
Vincent Tricomi, MD
The Brooklyn Hospital Center
121 DeKalb Ave
Brooklyn, NY 11201
718-250-0900
Length: 4 Year(s) Total Positions: 19 (GYI: 9)
Program ID: 220-35-12-142

Long Island College Hospital Program
Long Island College Hospital
Program Director:
Jack E. Maiman, MD
Long Island College Hospital
340 Henry St
Brooklyn, NY 11201
718-780-1647
Length: 4 Year(s) Total Positions: 10 (GYI: 3)
Program ID: 220-35-13-189

Lutheran Medical Center Program
Lutheran Medical Center
Program Director:
Donald M. Zaccar, MD
Lutheran Medical Center
1000 56th St
Brooklyn, NY 11220-2574
718-850-7550
Length: 4 Year(s) Total Positions: 13 (GYI: 3)
Program ID: 220-35-11-191

Maimonides Medical Center Program
Maimonides Medical Center
Coney Island Hospital
Montefiore Medical Center
Raphael Jewelewicz, MD
4802 10th Ave
Brooklyn, NY 11219
718-283-7048
Length: 4 Year(s) Total Positions: 20 (GYI: 5)
Program ID: 220-35-31-192

New York Methodist Hospital Program
New York Methodist Hospital
Program Director:
John B. Juszczecik, MD
New York Methodist Hospital
605 Fifth St
Brooklyn, NY 11215-9008
718-766-2072
Length: 4 Year(s) Total Positions: 13 (GYI: 4)
Program ID: 220-35-31-339

SUNY Health Science Center at Brooklyn Program
SUNY HSC at Brooklyn College of Medicine
Kings County Hospital Center
University Hospital-SUNY Health Science Center at Brooklyn
Program Director:
John G. Boyle, MD
SUNY Health Science Center at Brooklyn
460 Clarkson Ave
Box 24
Brooklyn, NY 11203-2088
718-270-2081
Length: 4 Year(s) Total Positions: 29 (GYI: 6)
Program ID: 220-35-21-308

Buffalo
SUNY at Buffalo Graduate Medical-Dental Education Consortium (Sisters of Charity) Program
SUNY at Buffalo Grad Medical-Dental Education Consortium
Sisters of Charity Hospital
Program Director:
Michael Ray, MD
Sisters of Charity Hospital Dept of OB/GYN
2157 Main St
Buffalo, NY 14214
716-882-2565
Length: 4 Year(s) Total Positions: 8 (GYI: 2)
Program ID: 220-35-21-171

SUNY at Buffalo Graduate Medical-Dental Education Consortium Program
SUNY at Buffalo Grad Medical-Dental Education Consortium
Buffalo General Hospital
Children's Hospital of Buffalo
 Erie County Medical Center
Millard Fillmore Hospitals
Program Director:
Myron M. Herschek, MD
Children's Hospital of Buffalo
Dept of Obstetrics
219 Bryant St
Buffalo, NY 14222
716-897-7138
Length: 4 Year(s) Total Positions: 44 (GYI: 10)
Program ID: 220-35-21-172

* Updated information not provided.
East Meadow
Nassau County Medical Center Program
Nassau County Medical Center
Mercy Medical Center
Program Director:
Victor Hallisky, MD
Nassau County Medical Center
Dept of OB/GYN
DCB 3
East Meadow, NY 11554-5409
516 573-6254
Length: 4 Year(s)  Total Positions: 16  (GYI: 4)
Program ID: 220-35-01-174

Flushing
Flushing Hospital Medical Center Program
Flushing Hospital Medical Center
Program Director:
Joseph P. Fontal, MD
Flushing Hospital Medical Center
46th Ave at Parsons Blvd
Flushing, NY 11355
718 670-5400
Length: 4 Year(s)  Total Positions: 13  (GYI: 4)
Program ID: 220-35-11-184

Jamaica
Catholic Medical Center of Brooklyn and Queens Program
Catholic Medical Center of Brooklyn and Queens Inc
Catholic Medical Center (St. Mary’s Hospital)
Catholic Medical Center (St John’s Queens Hospital)
Catholic Medical Center (St Mary’s Hospital)
Program Director:
Peter Albano, MD
Catholic Medical Center
88-25 162nd St
Jamaica, NY 11432
718 556-7365
Length: 4 Year(s)  Total Positions: 18  (GYI: 6)
Program ID: 220-35-21-183

Jamaica Hospital Program*
Jamaica Hospital
Program Director:
P. Maurice Abbot, MD
Jamaica Hospital
99th Ave & Van Wyck Expwy
Jamaica, NY 11418
718 282-6886
Length: 4 Year(s)  Total Positions: 8  (GYI: 2)
Program ID: 220-35-21-198

Manhasset
North Shore University Hospital Program
North Shore University Hospital
Program Director:
Arnold N. Fenton, MD
North Shore University Hospital
Dept of OB/GYN
Manhasset, NY 11030
516 622-4385
Length: 4 Year(s)  Total Positions: 17  (GYI: 5)
Program ID: 220-35-01-175

Mineola
Winthrop-University Hospital Program
Winthrop-University Hospital
Program Director:
Dev Maullik, MD PhD
Winthrop-University Hospital
Dept of OB/GYN
251 First St
Mineola, NY 11501
516 666-2364
Length: 4 Year(s)  Total Positions: 12  (GYI: 3)
Program ID: 220-35-12-176

New Hyde Park
Albert Einstein College of Medicine at Long Island Jewish Medical Center Program
Long Island Jewish Medical Center
Skosyrew Community Hospital
Program Director:
Victor L. Setzer, MD
Long Island Jewish Med Ctr
Dept of OB/GYN
New Hyde Park, NY 11040
718 470-7661
Length: 4 Year(s)  Total Positions: 21  (GYI: 5)
Program ID: 220-35-21-190

New York
Albert Einstein College of Medicine at Beth Israel Medical Center Program
Beth Israel Medical Center
Program Director:
Alfai A Jacobs, MD
Beth Israel Medical Center
First Ave at 16th St
New York, NY 10039
212 420-4236
Length: 4 Year(s)  Total Positions: 16  (GYI: 4)
Program ID: 220-35-11-179

Harlem Hospital Center Program*
Harlem Hospital Center
Morristown Memorial Hospital
Program Director:
Stephen Masseanne, MD
Harlem Hospital Center
Columbia University
155th St & Lenox Ave
New York, NY 10037
Length: 4 Year(s)  Total Positions: 8  (GYI: 2)
Program ID: 220-35-21-185

Lenox Hill Hospital Program
Lenox Hill Hospital
Program Director:
Hugh K. Barber, MD
Dept of OB/GYN
Lenox Hill Hospital
100 E 77th St
New York, NY 10021-1883
212 434-2160
Length: 4 Year(s)  Total Positions: 12  (GYI: 3)
Program ID: 220-35-11-188

Mount Sinai School of Medicine (Jamaica) Program*
Mount Sinai School of Medicine
Jamaica Hospital
Mount Sinai Medical Center
Program Director:
Mark Spitzer, MD
Mount Sinai Hospital Center
83-68 164th St
Bldg Room 210
Jamaica, NY 11432
718 885-4035
Length: 4 Year(s)
Program ID: 220-35-21-342

Mount Sinai School of Medicine Program
Mount Sinai School of Medicine
Elmhurst Hospital Center-Mount Sinai Service
Mount Sinai Medical Center
Program Director:
Michael L. Brodman, MD
Mount Sinai Med Ctr-Dept of OB/GYN
Box 1170
1 Gustave L. Levy Pl
New York, NY 10029-8574
212 241-4380
Length: 4 Year(s)  Total Positions: 35  (GYI: 7)
Program ID: 220-35-21-196

New York Downtown Hospital Program
New York Downtown Hospital
Program Director:
William E. Stridr, MD
New York Downtown Hospital
170 William St
New York, NY 10038
212 312-0580
Length: 4 Year(s)  Total Positions: 13  (GYI: 4)
Program ID: 220-35-21-198

New York Hospital/Cornell Medical Center Program
New York Hospital
Program Director:
William J. Ledges, MD
New York Hospital
525 E 65th St
New York, NY 10021
212 746-3611
Length: 4 Year(s)  Total Positions: 25  (GYI: 7)
Program ID: 220-35-21-197

New York University Medical Center Program
New York University Medical Center
Bellevue Hospital Center
New York University Medical Center of Queens
Program Director:
Robert P. Porges, MD
New York University Medical Center
550 First Ave
New York, NY 10016
212 288-3882
Length: 4 Year(s)  Total Positions: 24  (GYI: 6)
Program ID: 220-35-21-394

Presbyterian Hospital in the City of New York Program*
Presbyterian Hospital in the City of New York
Program Director:
Sterling B. Williams, MD
Presbyterian Hospital in the City of New York
Dept of OB/GYN
622 W 168th St
New York, NY 10032
212 305-8770
Length: 4 Year(s)  Total Positions: 20  (GYI: 5)
Program ID: 220-35-21-201

* Updated information not provided.
### Accredited Programs in Obstetrics and Gynecology

#### St Luke's-Roosevelt Hospital Center Program
- **St Luke's-Roosevelt Hospital Center**
- **St Luke's-Roosevelt Hospital Center: Roosevelt Division**
- **St Luke's-Roosevelt Hospital Center-St Luke's Division**
**Program Director:** Solan Chir, MD
**Dept of OB/GYN**
**St Luke's-Roosevelt Hospital Center**
1000 Tenth Ave
New York, NY 10019
212 923-5750
**Length:** 4 Year(s)  **Total Positions:** 24  (GYI: 6)
**Program ID:** 220-35-11-204

#### Rochester

#### Rochester General Hospital Program
- **Rochester General Hospital**
**Program Director:** Phyllis C Luppert, MD PhD
**Rochester General Hospital**
Dept of OB/GYN Box 249
1425 Portland Ave
Rochester, NY 14621
716 336-3794
**Length:** 4 Year(s)  **Total Positions:** 12  (GYI: 3)
**Program ID:** 220-35-31-543

#### University of Rochester Program
- **Strong Memorial Hospital of the University of Rochester Genesee Hospital**
- **Highland Hospital of Rochester**
**Program Director:** Jacques S Abramowicz, MD
**Dept of OB/GYN**
601 Elmwood Ave
Box 668
Rochester, NY 14642-5688
716 276-3723
**Length:** 4 Year(s)  **Total Positions:** 43  (GYI: 10)
**Program ID:** 220-38-31-218

#### Staten Island

#### Staten Island University Hospital Program
- **Staten Island University Hospital**
**Program Director:** Jahanji Ayarzoo, MD
**Staten Island University Hospital**
275 Seaview Ave
Staten Island, NY 10305
718 226-9269
**Length:** 4 Year(s)  **Total Positions:** 9  (GYI: 3)
**Program ID:** 220-35-11-207

#### Stony Brook

#### SUNY at Stony Brook Program
- **University Hospital SUNY at Stony Brook**
**Program Director:** Valerie M Parisi, MD
**Dept of OB/GYN**
**University Hospital SUNY at Stony Brook**
Stony Brook, NY 11794-6001
516 444-2783
**Length:** 4 Year(s)  **Total Positions:** 16  (GYI: 4)
**Program ID:** 220-35-31-316

#### Syracuse

#### SUNY Health Science Center at Syracuse Program
- **University Hospital-SUNY Health Science Center at Syracuse**
- **Crouse-Irving Memorial Hospital**
**Program Director:** Raul Artai, MD
**Dept of OB/GYN**
SUNY Health Sci Ctr at Syracuse
750 E Adams St
Syracuse, NY 13210
315 470-7100
**Length:** 4 Year(s)  **Total Positions:** 16  (GYI: 4)
**Program ID:** 220-35-31-215

#### Valhalla

#### New York Medical College (Lincoln) Program
- **New York Medical College**
- **Lincoln Medical and Mental Health Center**
**Program Director:** Huey Cunop, MD
**Dept of Obstetrics and Gynecology**
Lincoln Medical and Mental Health Center
234 E 149th St
Bronx, NY 10461
718 739-5455
**Length:** 4 Year(s)  **Total Positions:** 14  (GYI: 5)
**Program ID:** 220-35-21-336

#### New York Medical College (Our Lady of Mercy) Program
- **New York Medical College**
- **Our Lady of Mercy Medical Center**
**Program Director:** Kevin D Reddy, MD
**Our Lady of Mercy Medical Center**
600 E 223rd St
Bronx, NY 10466
718 920-9469
**Length:** 4 Year(s)  **Total Positions:** 9  (GYI: 3)
**Program ID:** 220-35-31-330

#### New York Medical College (Richmond) Program
- **New York Medical College**
- **St Vincent's Medical Center of Richmond**
**Program Director:** Vincent T Pillari, MD
**New York Medical College Pgm B at St Vincent's Medical Center of Richmond**
355 Hard Ave
Staten Island, NY 10310-1669
718 876-6293
**Length:** 4 Year(s)  **Total Positions:** 10  (GYI: 3)
**Program ID:** 220-35-11-206

#### New York Medical College (Stamford) Program
- **New York Medical College**
- **Stamford Hospital**
**Program Director:** Frances Glusburg, MD
**Stamford Hospital**
Shelburne Rd & W Broad St
Stamford, CT 06902
203 325-7462
**Length:** 4 Year(s)  **Total Positions:** 9  (GYI: 3)
**Program ID:** 220-35-11-061

#### New York Medical College at St Vincent's Hospital and Medical Center of New York Program
- **New York Medical College**
- **St Vincent's Hospital and Medical Center of New York**
**Program Director:** Paul L Juan, MD
**Dept of OB/GYN**
153 W 11th St
New York, NY 10011
212 604-7829
**Length:** 4 Year(s)  **Total Positions:** 7  (GYI: 1)
**Program ID:** 220-35-31-305

#### New York Medical College at Westchester County Medical Center Program
- **New York Medical College**
- **Metropolitan Hospital Center**
- **Westchester County Medical Center**
**Program Director:** Sari Kaminskas, MD
**Dept of OB/GYN**
1901 First Ave
New York, NY 10039
212 239-7095
**Length:** 4 Year(s)  **Total Positions:** 19  (GYI: 5)
**Program ID:** 220-35-31-199

#### North Carolina

#### Asheville

#### Mountain Area Health Education Center Program
- **Mountain Area Health Education Center Memorial Mission Hospital**
**Program Director:** Hal C Lawrence III, MD
**MAHEC Dept of OB/GYN**
60 Livingston St
Ste 106
Asheville, NC 28801
704 547-4720
**Length:** 4 Year(s)  **Total Positions:** 12  (GYI: 3)
**Program ID:** 220-36-31-340

#### Chapel Hill

#### University of North Carolina Hospitals Program
- **University of North Carolina Hospitals**
- **Wake Medical Center**
**Program Director:** Wesley C Fowler Jr, MD
**University of North Carolina School of Medicine**
**Dept of OB/GYN**
5000 Johnson Dr CB#7570
Chapel Hill, NC 27599-7570
919 966-1196
**Length:** 4 Year(s)  **Total Positions:** 20  (GYI: 5)
**Program ID:** 220-36-31-216

#### Charlotte

#### Carolinas Medical Center Program
- **Carolinas Medical Center**
**Program Director:** Ronald V Wade, MD
**Dept of Obstetrics-Gynecology**
P.O. Box 32361
1000 Blythe Blvd
Charlotte, NC 28223-2861
704 355-3153
**Length:** 4 Year(s)  **Total Positions:** 19  (GYI: 5)
**Program ID:** 220-36-31-217

*Updated information not provided.*
Durham
Duke University Program
Duke University Medical Center
Program Director:
Charles R Hammond, MD
Duke University Medical Center
Dept of OB/GYN
PO Box 8555
Durham, NC 27710
919-684-2038
Length: 4 Year(s) Total Positions: 28 (GYT: 7)
Program ID: 220-38-21-219

Greenville
East Carolina University Program
East Carolina University School of Medicine
Pitt County Memorial Hospital
Program Director:
Samuel M Atkinson, Jr, MD
The School of Medicine
East Carolina University
Greenville, NC 27858-5354
919-716-4669
Length: 4 Year(s) Total Positions: 17 (GYT: 5)
Program ID: 220-38-21-220

Wilmington
New Hanover Regional Medical Center Program
New Hanover Regional Medical Center
Program Director:
Brent D Wright, MD
New Hanover Regional Medical Center
Coastal AHEC OB/GYN
PO Box 9293
Wilmington, NC 28402-9293
910-763-0161
Length: 4 Year(s) Total Positions: 11 (GYT: 3)
Program ID: 220-38-11-218

Winston-Salem
Bowman Gray School of Medicine Program
North Carolina Baptist Hospital Forsyth Memorial Hospital
Program Director:
Eberhard Mueller-Fruehbach, MD
Bowman Gray School of Medicine
Dept of OB/GYN
Medical Center Blvd
Winston-Salem, NC 27157-1066
336-716-2619
Length: 4 Year(s) Total Positions: 21 (GYT: 5)
Program ID: 220-38-21-221

Ohio
Akron
Akron City Hospital (Summa Health System)/NEOUCOM Program
Akron City Hospital (Summa Health System)
Program Director:
John R Karlen, MD
Akron City Hospital
525 E Market St
Akron, OH 44308
216-975-3175
Length: 4 Year(s) Total Positions: 16 (GYT: 4)
Program ID: 220-38-21-223

Cleveland
Case Western Reserve University Program (MetroHealth) Program
MetroHealth Medical Center
Program Director:
Leon I Mane
MetroHealth Medical Center
2300 MetroHealth Dr
Cleveland, OH 44109-1096
216-449-4876
Length: 4 Year(s) Total Positions: 20 (GYT: 5)
Program ID: 220-38-21-327

Case Western Reserve University Program
University Hospitals of Cleveland
Program Director:
Louis Saner, MD, PhD
University Macdonald Women's Hospital
1110 Euclid Ave
Cleveland, OH 44106
216-844-1092
Length: 4 Year(s) Total Positions: 19 (GYT: 4)
Program ID: 220-38-21-230

Mount Sinai Medical Center of Cleveland Program
Mount Sinai Medical Center of Cleveland
Program Director:
Irwin Kornbluth, MD
Mt Sinai Medical Center of Ohio
One Mt Sinai Dr
Cleveland, OH 44106-4198
216-491-4077
Length: 4 Year(s) Total Positions: 8 (GYT: 2)
Program ID: 220-38-11-231

St Luke's Medical Center Program
St Luke's Medical Center
Program Director:
Michael J Gwyer, MD
St Luke's Medical Center
11311 Shaker Blvd
Cleveland, OH 44104-3650
216-963-7206
Length: 4 Year(s) Total Positions: 8 (GYT: 2)
Program ID: 220-38-11-232

Columbus
Mount Carmel Health Program
Mount Carmel Medical Center
Program Director:
John G Boulusel, MD
Mount Carmel Health
793 W State St
Columbus, OH 43222
614-225-5064
Length: 4 Year(s) Total Positions: 8 (GYT: 2)
Program ID: 220-38-12-233

Ohio State University Program
Ohio State University Medical Center
Arthur G James Cancer Hospital and Research Institute
Grant Medical Center
Program Director:
Steven G Gabe, MD
Ohio State University Hospital
1554 Upham Dr
606 Means Hall
Columbus, OH 43210
614-688-8967
Length: 4 Year(s) Total Positions: 32 (GYT: 7)
Program ID: 220-38-11-234

Riverside Methodist Hospitals/St Ann's Hospital of Columbus Program
Riverside Methodist Hospitals St Ann's Hospital of Columbus
Program Director:
Jeffrey G Bell, MD
Riverside Methodist Hospitals
3535 Glenmont River Rd
Med Ed Dept
Columbus, OH 43214
614-666-5762
Length: 4 Year(s) Total Positions: 16 (GYT: 4)
Program ID: 220-38-33-235
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<td>405 211-8787</td>
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<td>Hahnemann University Hospital</td>
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<td>Program Director: Tarik K. Goheen, MD</td>
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<td>MCPHU/Hahnemann University Hospital Program</td>
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<td>Program Director: R Douglas Rom, MD</td>
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<td>Philadelphia, PA 19102-1122</td>
<td>Program Director: Joseph C.L. Merola, MD</td>
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<td>215 572-2222</td>
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* Updated information not provided.
Accredited Programs in Obstetrics and Gynecology

Medical College of Pennsylvania Program
Medical College of Pennsylvania Hospital
Frankford Hospital (Torresdale Campus)
Program Director: Jan Schneider, MD
Medical College of Pennsylvania Hospital
3300 Henry Ave
Philadelphia, PA 19129
215 842-7183
Length: 4 Year(s) Total Positions: 23 (GYT: 6)
Program ID: 220-41-31-250

Pennsylvania Hospital Program
Pennsylvania Hospital
Program Director: Mark B Woodland, MD
Pennsylvania Hospital
301 S Eighth St Ste 3C-2
Philadelphia, PA 19106
215 629-6023
Length: 4 Year(s) Total Positions: 21 (GYT: 6)
Program ID: 220-41-11-252

Temple University Program
Temple University Hospital
Lower Bucks Hospital
Program Director: Ashwin Chaturvedi, MD
Temple University Hospital
3401 N Broad St 70PD
Philadelphia, PA 19140
215 707-3012
Length: 4 Year(s) Total Positions: 21 (GYT: 6)
Program ID: 220-41-21-255

Thomas Jefferson University Program
Thomas Jefferson University Hospital
Methodist Hospital
West Jersey Health System
Program Director: Cynthia G Silber, MD
Thomas Jefferson University Hospital
1025 Walnut St Rm 310
Philadelphia, PA 19107
215 655-8461
Length: 4 Year(s) Total Positions: 32 (GYT: 8)
Program ID: 220-41-21-255

University of Pennsylvania Program
Hospital of the University of Pennsylvania
Program Director: William W Beek Jr, MD
Hospital of the University of Pennsylvania
106 Duties Bldg
3400 Spruce St
Philadelphia, PA 19104-4283
215 549-9035
Length: 4 Year(s) Total Positions: 24 (GYT: 6)
Program ID: 220-41-41-256

Puerto Rico

Caguas
Caguan Regional Hospital Program
Caguan Regional Hospital
Program Director: Ariel G Colon Rodriguez, MD
Caguan Regional Hosp
Dept of OB/GYN
PB Rd No 172 Box 8729
Caguan, PR 00735
809 744-3172
Length: 4 Year(s) Total Positions: 16 (GYT: 4)
Program ID: 220-42-11-264

Mayaguez
Ramén E Betances Hospital-Mayaguez Medical Center Program
Dr Ramén E Betances Hospital-Mayaguez Medical Center
Program Director: Armando G Gutierrez, MD
Mayaguez Medical Center Dept of OB/GYN
410 Carr 2
Mayaguez, PR 00680-1622
809 834-8686
Length: 4 Year(s) Total Positions: 12 (GYT: 3)
Program ID: 220-42-12-265

Ponce
Ponce Regional Hospital Program*
Ponce Regional Hospital
Program Director: Alberto Artes-Collado, MD
Ponce Regional Hospital
Dept of OB/GYN
State Rd 314
Ponce, PR 00731
Length: 4 Year(s)
Program ID: 220-42-21-246

Río Piedras
San Juan City Hospital Program
San Juan City Hospital
Program Director: Edward O'Neil, MD
San Juan Municipal Hospital
PO Box 21405
Rio Piedras, PR 00935
809 776-3322
Length: 4 Year(s) Total Positions: 16 (GYT: 4)
Program ID: 220-41-12-267

San Juan
University of Puerto Rico Program
University of Puerto Rico School of Medicine
University Hospital
Program Director: Karol Adamowska, MD PhD
Medical Sciences Campus
GPO Box 82067
San Juan, PR 00936
809 787-8740
Length: 4 Year(s) Total Positions: 24 (GYT: 6)
Program ID: 220-42-11-268

* Updated information not provided.
Rhode Island

Providence

Brown University Program
Women and Infants Hospital of Rhode Island
Rhode Island Hospital
Program Director: Donald R Costant, MD
Brown University Dept of OB/GYN
101 Dudley St
Providence, RI 02905-2401
401 274-1100
Length: 4 Year(s) Total Positions: 27 (GY: 7)
Program ID: 220-45-21-389

South Carolina

Charleston

Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
Charleston Memorial Hospital
MUSC Medical Center
Program Director: James V VanBorsen, MD
Department of OB/GYN
Medical Univ of South Carolina
171 Ashley Ave
Charleston, SC 29425-2223
803 792-4170
Length: 4 Year(s) Total Positions: 20 (GY: 5)
Program ID: 220-45-21-270

Columbia

Richland Memorial Hospital-University of South Carolina School of Medicine Program
Richland Memorial Hospital-Univ. of South Carolina School of Med
Program Director: E O Horger III, MD
Richland Memorial Hospital
Dept of OB/GYN
Two Richland Medical Pk Ste 206
Columbia, SC 29033
803 779-4139
Length: 4 Year(s) Total Positions: 10 (GY: 4)
Program ID: 220-45-11-371

Greenville

Greenville Hospital System Program
Greenville Hospital System
Program Director: Robert G Bruns, MD
Greenville Hospital System
701 Grove Blvd
Greenville, SC 29605
864 465-7697
Length: 4 Year(s) Total Positions: 12 (GY: 3)
Program ID: 220-45-11-272

Tennessee

Chattanooga

University of Tennessee College of Medicine at Chattanooga Program*
University of Tennessee College of Medicine-Chattanooga
Erlanger Medical Center
Program Director: C Neil Nelson, MD
Chattanooga Uni-University of Tennessee College of Medicine
Dept of OB/GYN
921 E Third St Ste 400
Chattanooga, TN 37403
615 778-7016
Length: 4 Year(s) Total Positions: 13 (GY: 3)
Program ID: 220-47-21-274

Johnson City

East Tennessee State University Program
James H Quillen College of Medicine
Johnson City Medical Center Hospital
Program Director: Frederick K Jelosek, MD
James H Quillen College of Medicine
Dept of OB/GYN
PO Box 7059
Johnson City, TN 37664-0599
423 286-6335
Length: 4 Year(s) Total Positions: 7 (GY: 3)
Program ID: 220-47-21-274

Knoxville

University of Tennessee Medical Center at Knoxville Program
University of Tennessee Graduate School of Medicine
University of Tennessee Hospital
Program Director: Michael R Guadie, MD
The University of Tennessee
Graduate School of Medicine
1844 Alcoa Hwy
Knoxville, TN 37920
865 544-3036
Length: 4 Year(s) Total Positions: 12 (GY: 3)
Program ID: 220-47-11-275

Memphis

University of Tennessee Program
University of Tennessee College of Medicine
Regional Medical Center at Memphis
University of Tennessee Medical Center
Program Director: Frank W Ling, MD
Univ of Tennessee Memphis
Dept of OB/GYN
880 Jefferson Ave 1st Floor
Memphis, TN 38163
901 448-4775
Length: 4 Year(s) Total Positions: 4 (GY: 1)
Program ID: 220-47-51-276

Nashville

Vanderbilt University Program
Vanderbilt University Medical Center
Baptist Hospital
Program Director: Lonnie S Barrett, MD
Vanderbilt University Hospital Dept of OB/GYN
1161 21st Ave
R1214 MCN
Nashville, TN 37232-2521
615 343-3385
Length: 4 Year(s) Total Positions: 18 (GY: 6)
Program ID: 220-47-21-278

Texas

Amarillo

Texas Tech University (Amarillo) Program
Texas Tech University Health Sciences Center at Amarillo
Northwest Texas Health Care System
Program Director: Bobby Biner, MD
Texas Tech University Health Sciences Center
Dept of Obstetrics-Gynecology
1400 Wallace
Amarillo, TX 79106
806 355-5147
Length: 4 Year(s) Total Positions: 16 (GY: 4)
Program ID: 220-45-21-320

Dallas

Baylor University Medical Center Program
Baylor University Medical Center
Program Director: Carolyn M Matthews, MD
Baylor University Medical Center
Dept of OB/GYN
3500 Gaston
Dallas, TX 75246
214 820-6526
Length: 4 Year(s) Total Positions: 16 (GY: 4)
Program ID: 220-48-51-280

Methodist Hospitals of Dallas Program
Methodist Hospitals of Dallas
Dallas County Hospital District-Parkland Memorial Hospital
Program Director: Clare D Edman, MD
Methodist Hospitals of Dallas
PO Box 655099
Dallas, TX 75235-5999
214 947-2300
Length: 4 Year(s) Total Positions: 9 (GY: 3)
Program ID: 220-48-51-281

St Paul Medical Center Program
St Paul Medical Center
Dallas County Hospital District-Parkland Memorial Hospital
Program Director: Larry E West, MD
St Paul Medical Center
Graduate Medical Education Services
5000 Harry Hines Blvd
Dallas, TX 75235
214 878-9936
Length: 4 Year(s) Total Positions: 8 (GY: 2)
Program ID: 220-48-51-283

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<td>Texas Tech University Health Sciences Center at El Paso R E Thomason General Hospital</td>
<td>Frederick H Harliss, MD</td>
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<td>915-546-6708</td>
<td>4 Year(s)</td>
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<td>Brooke Army Medical Center Program</td>
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<td>Manuel P De Los Santos, MD</td>
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<td>210-565-6200</td>
<td>4 Year(s)</td>
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<td>John Peter Smith Hospital (Tarrant County Hospital District) Harris Methodist Fort Worth</td>
<td>Ralph J Anderson, MD</td>
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<td>817-921-4341</td>
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<td>409-772-6764</td>
<td>4 Year(s)</td>
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<td>I. Russell Malinak, MD</td>
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<td>713-797-7817</td>
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<td>Daniel E McGuinle, MD</td>
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<td>886-743-2351</td>
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<td>Carol A Bergquist, MD</td>
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<td>4 Year(s)</td>
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<td>University of Texas Medical School at San Antonio University Hospital-South Texas Medical Center</td>
<td>Carl J Paukentiuc, MD</td>
<td>San Antonio, TX</td>
<td>210-567-4953</td>
<td>4 Year(s)</td>
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<td>Temple</td>
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<td>Scott and White Memorial Hospital</td>
<td>Charles V Cupen, MD</td>
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<td>4 Year(s)</td>
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* Updated information not provided.
Accredited Programs in Obstetrics and Gynecology

Utah
Salt Lake City
University of Utah Program
University of Utah Medical Center
LDS Hospital
Program Director:
James Scott, MD
University of Utah Health Sciences Center
Dept of OB/GYN
50 N Medical Dr
Salt Lake City, UT 84132
801-581-5001
Length: 4 Year(s) Total Positions: 17 (GYI: 4)
Program ID: 220-49-27-294

Vermont
Burlington
Medical Center Hospital of Vermont Program
Medical Center Hospital of Vermont
Program Director:
Daniel H Biddick, MD PhD
Univ of Vermont Dept of OB/GYN
MCNV BS 426
111 Colchester Ave
Burlington, VT 05401
802-656-5112
Length: 4 Year(s) Total Positions: 12 (GYI: 3)
Program ID: 220-80-21-205

Virginia
Charlottesville
University of Virginia Program
University of Virginia Medical Center
Program Director:
James D Kitchin III, MD
University of Virginia Hospital
Box 887
Dept OB-Gyn
Charlottesville, VA 22908
804-924-3701
Length: 4 Year(s) Total Positions: 21 (GYI: 5)
Program ID: 220-61-11-288

Newport News
Riverside Regional Medical Center Program
Riverside Regional Medical Center
Program Director:
William J Mann Jr, MD
Riverside Obstetrics/Gynecology
314 Main St Ste a
Newport News, VA 23601-3888
804-594-4723
Length: 4 Year(s) Total Positions: 12 (GYI: 3)
Program ID: 220-51-11-297

Norfolk
Eastern Virginia Graduate School of Medicine Program
Eastern Virginia Graduate School of Medicine
DePaul Medical Center
Portsmouth General Hospital
Sentara Norfolk General Hospital
Program Director:
Kathleen McIntyre-Selman, MD
Eastern Virginia Medical School
721 Fairfax Ave B2 406
Norfolk, VA 23507
804-446-7470
Length: 4 Year(s) Total Positions: 21 (GYI: 5)
Program ID: 220-51-21-298

Portsmouth
Naval Medical Center (Portsmouth) Program
Naval Medical Center (Portsmouth)
Program Director:
James Smith, MD
Naval Hospital
Dept of OB/GYN
Portsmouth, VA 23705-5106
804-368-4801
Length: 3 Year(s) Total Positions: 25 (GYI: 6)
Program ID: 220-51-11-014

Richardson
Medical College of Virginia/Virginia Commonwealth University Program
Medical College of Virginia/Virginia Commonwealth University
Medical College of Virginia Hospital
Program Director:
David Soper, MD
Medical College of Virginia Hospital
PO Box 980084
Richmond, VA 23298-0084
804-828-6114
Length: 4 Year(s) Total Positions: 22 (GYI: 9)
Program ID: 220-51-11-299

Roanoke
Carilion Health System Program
Carilion Health System
Community Hospital of Roanoke Valley
Roanoke Memorial Hospitals
University of Virginia Medical Center
Program Director:
Larry G Dennis, MD
Carilion Center For Women and Children
Community Med Bldg
102 Highland Ave Ste 435
Roanoke, VA 24013
540-985-8977
Length: 4 Year(s) Total Positions: 12 (GYI: 3)
Program ID: 220-51-31-300

Washington
Seattle
University of Washington Program
University of Washington School of Medicine
Swedish Medical Center Seattle
University of Washington Medical Center
Program Director:
Morton A Stenchever, MD
Leon R Spadoni, MD
University of Washington Medical Center
Dept of OB/GYN
HH-30
Seattle, WA 98195
206-667-9456
Length: 4 Year(s) Total Positions: 22 (GYI: 6)
Program ID: 220-51-21-301

Tacoma
Madigan Army Medical Center Program
Madigan Army Medical Center
Program Director:
Larry L Morgenstern, MD
Madigan Army Medical Center
Dept of OB/GYN Attn: HSILJ-LOG
Tacoma, WA 98431-5000
253-968-1315
Length: 4 Year(s) Total Positions: 21 (GYI: 5)
Program ID: 220-54-12-010

West Virginia
Charleston
West Virginia University (Charleston Division) Program
Charleston Area Medical Center
Program Director:
S R Heywood, MD
Dept of Obstetrics/Gynecology
Robert C Byrd HSC/WVU/Charleston
500 Pennsylvania Ave #204
Charleston, WV 25302-3390
304-342-9016
Length: 4 Year(s) Total Positions: 12 (GYI: 3)
Program ID: 220-65-11-300

Huntington
Marshall University School of Medicine Program
Marshall University School of Medicine
Cabell Huntington Hospital
Program Director:
Robert C Norwood, MD
Marshall University School of Medicine
Dept of OB/GYN
1001 Sixth Ave
Huntington, WV 25703
304-528-7136
Length: 4 Year(s) Total Positions: 9 (GYI: 3)
Program ID: 220-55-21-344

* Updated information not provided.
Morgantown
West Virginia University Program
West Virginia University Hospitals
Program Director:
Donald W Cox, MD
West Virginia University Hospital
Dept of OB/GYN Rm 4001
Box 9146
Morgantown, WV 26506-9146
304-266-5831
Length: 4 Year(s)  Total Positions: 8  (GYI: 2)
Program ID: 120-66-11-394

Wisconsin
Madison
University of Wisconsin Program
University of Wisconsin Hospital and Clinics
Meriter Hospital
St Marys Hospital Medical Center
Program Director:
Thomas M Julian, MD
University of Wisconsin Hosp and Clinic
CSB B4/668
600 Highland Ave
Madison, WI 53792-6188
608-263-1228
Length: 4 Year(s)  Total Positions: 21  (GYI: 5)
Program ID: 220-68-21-306

Milwaukee
Medical College of Wisconsin Program
Medical College of Wisconsin Affiliated Hospitals Inc
John L Doyne Hospital
Program Director:
Dwight P Cruikshank, MD
Medical College of Wisconsin Dept of OB/GYN
8700 W Wisconsin Ave
Milwaukee, WI 53226
414-257-6122
Length: 4 Year(s)  Total Positions: 24  (GYI: 6)
Program ID: 220-66-01-937

University of Wisconsin (Milwaukee) Program
Sina Samaritan Medical Center
Program Director:
Fredrik P Breakeyne, MD
Sina Samaritan Medical Center
PO Box 342
Milwaukee, WI 53201-0342
414-977-5600
Length: 4 Year(s)  Total Positions: 14  (GYI: 5)
Program ID: 220-66-11-398

Oncology (Internal Medicine)
Arkansas
Little Rock
University of Arkansas for Medical Sciences Program*
University of Arkansas College of Medicine
John L McCullum Memorial Veterans Hospital
University Hospital of Arkansas
Program Director:
Susan Guba, MD
Arthur Baut, MD
University of Arkansas for Medical Sciences
Mail Slot 545
4301 W Markham
Little Rock, AR 72205-7199
501-686-3222
Length: 2 Year(s)  Total Positions: 6
Program ID: 147-04-21-097

California
La Jolla
Scripps Clinic and Research Foundation Program
Scripps Clinic and Research Foundation
Program Director:
Michael P Kosty, MD
Dept of Graduate Med Educ/403C
Scripps Clinic & Research Fnd
10566 N Torrey Pines Rd
La Jolla, CA 92037-1063
619-654-8382
Length: 2 Year(s)  Total Positions: 5
Program ID: 147-05-21-365

Los Angeles
UCLA Medical Center Program
UCLA School of Medicine
UCLA Medical Center
Veterans Affairs Medical Center (West Los Angeles)
Program Director:
Robert J Phipps, MD
UCLA Sch of Med
Ctr for the Hsh Sci
Los Angeles, CA 90024
213-265-6577
Length: 2 Year(s)  Total Positions: 17
Program ID: 147-05-11-114

University of Southern California Program*
Los Angeles County-USC Medical Center
Program Director:
Franco M Moggia, MD
Director Residency Training
University of Southern California Medical Center
1411 Eastlake Ave #162
Los Angeles, CA 90033
213-344-6677
Length: 2 Year(s)
Program ID: 147-05-21-645

Orange
University of California (Irvine) Program
University of California (Irvine) Medical Center
Long Beach Memorial Medical Center
Program Director:
Nora Ku, MD
UCI Medical Center
Div of Hematology/Oncology
101 City Dr
Orange, CA 92668-8110
714-456-5162
Length: 2 Year(s)  Total Positions: 6
Program ID: 147-05-21-770

San Francisco
University of California (San Francisco) Program*
University of California (San Francisco) School of Medicine
San Francisco General Hospital Medical Center
University of California (San Francisco) Medical Center
Veterans Affairs Medical Center (San Francisco)
Program Director:
Craig Henderson, MD
University of California San Francisco
500 Parnassus Ave
Moffitt Hospital Bld M-1292
San Francisco, CA 94143
415-476-8700
Length: 2 Year(s)
Program ID: 147-05-21-135

Stanford
Stanford University Program*
Stanford University Hospital
Veterans Affairs Medical Center (Palo Alto)
Program Director:
Saul A Rosenberg, MD
Stanford University Medical Center
Medicine/Oncology Room M211
Stanford, CA 94305-5306
415-725-6465
Length: 2 Year(s)  Total Positions: 15
Program ID: 147-05-21-820

Torrance
Los Angeles County-Harbor-UCLA Medical Center Program*
Los Angeles County-Harbor-UCLA Medical Center
Program Director:
Jerome B Block, MD
Los Angeles County-Harbor-UCLA Medical Center
Bld 4001000 W Carson St
Torrance, CA 90005
213-333-9344
Length: 2 Year(s)
Program ID: 147-05-11-156

* Updated information not provided.

Graduate Medical Education Directory 571
Accredited Programs in Oncology (Internal Medicine)

Colorado

Denver

University of Colorado Program
University of Colorado Health Sciences Center
Denver Health and Hospitals
Veterans Affairs Medical Center (Denver)
Program Director:
Madeleine A Kane, MD PhD
Univ of Colorado Health Sciences Ctr Div of Med Oncology
4200 E Ninth Ave Box B171
Denver, CO 80262
303 276-8891
Length: 2 Year(s) Total Positions: 2
Program ID: 147-07-21-058

Connecticut

New Haven

Yale-New Haven Medical Center Program
Yale-New Haven Hospital
Veterans Affairs Medical Center (West Haven)
Program Director:
Vincent T De Vita Jr, MD
Yale-New Haven Medical Center Section of Medical Oncology
933 Cedar Street PO Box 208032
New Haven, CT 06502-8032
203 785-6007
Length: 2 Year(s) Total Positions: 14
Program ID: 147-06-21-021

District of Columbia

Washington

George Washington University Program
George Washington University School of Medicine
George Washington University Hospital
Veterans Affairs Medical Center (Washington DC)
Program Director:
Catherine M Brown, MD
George Washington University Hospital Dept of Medicine
2150 Pennsylvania Ave NW
Washington, DC 20037
202 994-4200
Length: 2 Year(s) Total Positions: 5
Program ID: 147-10-21-101

Georgetown University Program
George Washington University Hospital
Program Director:
Edward P Olmann, MD
Georgetown University Hospital
Div of Hematology/Oncology
3800 Reservoir Rd NW
Washington, DC 20007
202 687-2186
Length: 2 Year(s) Total Positions: 13
Program ID: 147-10-21-078

Howard University Program*
Howard University Hospital
District of Columbia General Hospital
Program Director:
Elliott Perlman, MD
Howard University Hospital
2041 Georgia Ave NW
Washington, DC 20059
202 865-1511
Length: 2 Year(s) Total Positions: 2
Program ID: 147-10-21-116

Florida

Gainesville

University of Florida Program
University of Florida College of Medicine
Shands Hospital at the University of Florida
Veterans Affairs Medical Center (Gainesville)
Program Director:
James W Lynch, MD
Ward D Noyes, MD
University of Florida Dept of Medicine
Div of Medical Oncology
PO Box 10277
Gainesville, FL 32610-0277
904 392-4611
Length: 2 Year(s) Total Positions: 4
Program ID: 147-11-21-032

Jacksonville

University of Florida Health Science Center/Jacksonville Program
University Medical Center (UFHSCJ)
Baptist Medical Center (UFHSCJ)
Program Director:
Troy P Guthrie Jr, MD
Dept of Medicine
Div of Hematology/Oncology
656 W Eight St
Jacksonville, FL 32209-6511
904 509-3072
Length: 2 Year(s) Total Positions: 3
Program ID: 147-11-21-022

Illinois

Chicago

Cook County Hospital Program*
Cook County Hospital
Program Director:
Gail Shimomoto, MD
Cook County Hospital
1626 W Harrison
Chicago, IL 60612
312 632-7117
Length: 2 Year(s) Total Positions: 4
Program ID: 147-16-12-244

Rush-Presbyterian-St Luke’s Medical Center Program*
Rush-Presbyterian-St Luke’s Medical Center
Program Director:
Jules B Harris, MD
Rush-Presbyterian-St Luke’s Medical Center
1735 W Congress Plwy
Chicago, IL 60612
312 942-5004
Length: 2 Year(s) Program ID: 147-16-11-119

Evanston

St Francis Hospital of Evanston Program
St Francis Hospital of Evanston
Northwestern Memorial Hospital
Program Director:
Thomas N Gynn, MD
St Francis Hospital of Evanston
355 Ridge Ave
Evanston, IL 60202-3909
708 493-6227
Length: 2 Year(s) Total Positions: 3
Program ID: 147-16-11-155

Maywood

Loyola University Program*
Foster C McGaw Hospital-Loyola University of Chicago
Edward J Hines Jr Veterans Affairs Hospital
Program Director:
Kenneth C Micetich, MD
Section of Hematology-Oncology Bldg 54 Room 049
2160 S First Ave
Maywood, IL 60153
708 216-4011
Length: 2 Year(s) Total Positions: 7
Program ID: 147-16-21-003

Kansas

Kansas City

University of Kansas Medical Center Program
University of Kansas School of Medicine
University of Kansas Medical Center
Program Director:
Ronald J Stephens, MD MA
University of Kansas Medical Center
Clinical Oncology Div
3801 Rainbow Blvd
Kansas City, KS 66108-7353
913 588-6629
Length: 3 Year(s) Total Positions: 4
Program ID: 147-18-21-102

Kentucky

Lexington

University of Kentucky Medical Center Program
University Hospital Albert B Chandler Medical Center
Veterans Affairs Medical Center (Lexington)
Program Director:
William J John, MD
University Hospital Albert B Chandler Medical Center
Hematology/Oncology
Markey Cancer Center
Lexington, KY 40536
606 627-4000
Length: 2 Year(s) Total Positions: 6
Program ID: 147-20-21-159

* Updated information not provided.
<table>
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<tr>
<th>Location</th>
<th>Program Name</th>
<th>Program Details</th>
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<tr>
<td>Louisiana</td>
<td>New Orleans</td>
<td>Alton Ochsner Medical Foundation Program: Alton Ochsner Medical Foundation Program Director: Richard J Orla, MD Alton Ochsner Medical Foundation Dept. of Graduate Medical Education 1515 Jefferson Hwy New Orleans, LA 70121 504 843-3261 Length: 2 Year(s) Total Positions: 2 Program ID: 147-31-21-191</td>
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<tr>
<td>Louisiana State University Program</td>
<td>Louisiana State University School of Medicine Medical Center of Louisiana at New Orleans - LSU Division Medical Center of Louisiana University Hospital Campus Program Director: Richard H Vial, MD LSU Med Med Ctr 1542 Tulane Ave New Orleans, LA 70112 504 668-5863 Length: 2 Year(s) Total Positions: 4 Program ID: 147-31-21-458</td>
<td></td>
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<tr>
<td>Massachusetts</td>
<td>Boston</td>
<td>Brigham and Women's Hospital Program 1 Brigham and Women's Hospital Dana-Farber Cancer Institute Program Director: George P Canellos, MD Dana-Farber Cancer Institute 44 Binney St Boston, MA 02215 617 632-3470 Length: 2 Year(s) Total Positions: 24 Program ID: 147-34-21-005 Brigham and Women's Hospital Program 2 Brigham and Women's Hospital Children's Hospital Program Director: Lawrence N Shulman, MD Dept of Medicine Brigham and Women's Hospital 75 Francis St Boston, MA 02115 617 736-6260 Length: 2 Year(s) Program ID: 147-24-21-184 Massachusetts General Hospital Program Massachusetts General Hospital Program Director: Irene Kuter, MD DPhil Massachusetts General Hospital 100 Longwood St Cox Bldg 235 Boston, MA 02114 617 736-8743 Length: 2 Year(s) Program ID: 147-24-11-059 St Elizabeth's Medical Center of Boston Program St Elizabeth's Medical Center of Boston Program Director: Jill Palek, MD St Elizabeth's Medical Center 736 Cambridge St Brighton, MA 02135 617 789-2560 Length: 2 Year(s) Total Positions: 6 Program ID: 147-24-21-049 Michigan</td>
</tr>
<tr>
<td>Detroit</td>
<td>Wayne State University/Detroit Medical Center Program</td>
<td>Wayne State University School of Medicine Detroit Receiving Hospital and University Health Center Harper Hospital Veterans Affairs Medical Center (Allen Park) Program Director: Bruce G Redman, DO Division of Hematology &amp; Oncology WSU School of Medicine Box 62143 Detroit, MI 48201-6188 313 746-4700 Length: 2 Year(s) Total Positions: 12 Program ID: 147-35-21-064</td>
</tr>
<tr>
<td>East Lansing</td>
<td>Michigan State University Program</td>
<td>Michigan State University College of Human Medicine Michigan State University College of Human Medicine Program Director: Kenneth A Schwartz, MD Michigan State University Hospitals Dept of Medicine B226 B Life Science Bldg East Lansing, MI 48824 517 353-3728 Length: 2 Year(s) Program ID: 147-35-21-464</td>
</tr>
<tr>
<td>Royal Oak</td>
<td>William Beaumont Hospital Program</td>
<td>William Beaumont Hospital Program Director: Freeman Wilner, MD William Beaumont Hospital 3601 W 13 Mile Rd Royal Oak, MI 48073 810 288-6500 Length: 2 Year(s) Total Positions: 3 Program ID: 147-35-18-181</td>
</tr>
<tr>
<td>Southfield</td>
<td>Providence Hospital Program</td>
<td>Providence Hospital Program Director: Anbal Drelichman, MD Providence Hospital Medical Educ 1000 W Nine Mile Rd Southfield, MI 48076 810 424-2216 Length: 2 Year(s) Total Positions: 4 Program ID: 147-35-21-185</td>
</tr>
<tr>
<td>Mississippi</td>
<td>Jackson</td>
<td>University of Mississippi Medical Center Program University of Mississippi School of Medicine University Hospital Program Director: James T Thigpen, MD University Hospital 2500 N State St Jackson, MS 39216 601 844-6500 Length: 2 Year(s) Total Positions: 4 Program ID: 147-27-21-070</td>
</tr>
</tbody>
</table>

*Updated information not provided.*
Missouri

Columbia

University of Missouri-Columbia Program
University of Missouri-Columbia School of Medicine
Harry S Truman Memorial Veterans Hospital
University and Children's Hospital
Program Director:
Michael C Perry, MD
Ellis Fischel Cancer Center B1 518-115 Business Loop 70-W
Columbia, MO 65203-3299
314 882-6663
Length: 2 Year(s)  Total Positions: 3
Program ID: 147-36-21-071

New York

Albany

Albany Medical Center Program*
Albany Medical Center Hospital
Program Director:
George P Sartiano, MD
Albany Medical College Div of Medical Oncology A-52
47 New Scotland Ave
Albany, NY 12208
518 445-5297
Length: 2 Year(s)  Total Positions: 9
Program ID: 147-35-34-030

Bronx

Albert Einstein College of Medicine Program
Albert Einstein College of Medicine of Yeshiva University
Bronx Municipal Hospital Center
Montefiore Medical Center-Henry and Lucy Moses Division
Montefiore Medical Center-Weiller Hospital
Program Director:
Peter H Warmik, MD
Montefiore Medical Center
111 E 210th St
Bronx, NY 10467
718 903-6396
Length: 2 Year(s)  Total Positions: 16
Program ID: 147-35-21-091

Brooklyn

Brooklyn Hospital Center Program
Brooklyn Hospital Center
Woodhull Medical and Mental Health Center
Program Director:
Angeline B Miotto, MD
The Brooklyn Hospital Center
Div of Hematology/Oncology
121 DeKalb Ave
Brooklyn, NY 11201
718 250-6960
Length: 2 Year(s)  Total Positions: 5
Program ID: 147-35-31-643

South Orange

Seton Hall University School of Graduate Medical Education Program*
Seton Hall University School of Graduate Medical Education
St Joseph's Hospital and Medical Center
St Michael's Medical Center (Cathedral Health Services Inc)
Program Director:
Pradeep S Mahal, MD
St Elizabeth Hospital
225 Williamson St
Elizabeth, NJ 07207
732 837-5000
Length: 2 Year(s)  Total Positions: 5
Program ID: 147-35-21-163

New Mexico

Albuquerque

University of New Mexico Program
University of New Mexico School of Medicine
University Hospital
Program Director:
Lawrence Elias, MD
UNM Cancer Research & Treatment Center
900 Camino de Salud NE
Albuquerque, NM 87131-5536
505 277-5857
Length: 2 Year(s)  Program ID: 147-26-21-071

New York Methodist Hospital Program
New York Methodist Hospital
Program Director:
Adolfo Elizalde, MD
Methodist Hospital of Brooklyn
506 Sixth St
Brooklyn, NY 11215
718 780-3246
Length: 2 Year(s)  Total Positions: 3
Program ID: 147-36-11-126

Buffalo

SUNY at Buffalo Graduate Medical-Dental Education Consortium Program
SUNY at Buffalo Grad Medical-Dental Education Consortium
Roswell Park Cancer Institute
Veterans Affairs Medical Center (Buffalo)
Program Director:
Ellis G Levine, MD
Roswell Park Cancer Institute
Dept of Medicine
Elm & Carlton Sts
Buffalo, NY 14263
716 845-8047
Length: 2 Year(s)  Total Positions: 15
Program ID: 147-35-31-006

East Meadow

SUNY at Stony Brook (East Meadow) Program
Nassau County Medical Center
Program Director:
Stephen Feffer, MD
Nassau County Medical Center
2201 Hempstead Turnpike
East Meadow, NY 11554-5400
516 577-8713
Length: 2 Year(s)  Total Positions: 5
Program ID: 147-35-31-085

Manhattan

North Shore University Hospital Program
North Shore University Hospital
Program Director:
Vincent P Vincen Guerra, MD
North Shore University Hospital
Dept of Medicine
300 Community Dr
Manhattan, NY 11004-3800
516 563-9577
Length: 2 Year(s)  Total Positions: 2
Program ID: 147-35-31-152

New York

New York Hospital/Cornell Medical Center Program
Memorial Sloan-Kettering Cancer Center
Program Director:
Dean F Bajorin, MD
Memorial Sloan-Kettering Cancer Center
1270 York Ave
New York, NY 10021
212 698-9500
Length: 2 Year(s)  Total Positions: 51
Program ID: 147-35-21-160

* Updated information not provided.
New York University Medical Center Program
New York University Medical Center Bellevue Hospital Center
Program Director: Ronald H Blum, MD
New York University Medical Center Division of Oncology
550 First Ave
New York, NY 10016
212 263-6465
Length: 2 Year(s)  Total Positions: 16
Program ID: 147-30-21-106

St Luke's-Roosevelt Hospital Center (Roosevelt) Program
St Luke's-Roosevelt Hospital Center
St Luke's-Roosevelt Hospital Center-Roosevelt Division
Program Director: Harvey J Weiss, MD
St Luke's-Roosevelt Hospital Center
1000 Tenth Ave
New York, NY 10019
212 523-2351
Length: 2 Year(s)  Total Positions: 3
Program ID: 147-35-11-092

St Luke's-Roosevelt Hospital Center (St Luke's) Program
St Luke's-Roosevelt Hospital Center
St Luke's-Roosevelt Hospital Center-St Luke's Division
Program Director: Milayna Subar, MD
St Luke's Roosevelt Hospital Center
Amsterdam Ave & 114th St
New York, NY 10025
212 523-5400
Length: 2 Year(s)  Total Positions: 3
Program ID: 147-35-21-164

Rochester
University of Rochester Program*
Strong Memorial Hospital of the University of Rochester Rochester General Hospital
Program Director: John M Bennett, MD
Strong Memorial Hospital
601 Elmwood Ave Box 704
Rochester, NY 14642
716 274-8100
Length: 2 Year(s)
Program ID: 147-35-11-167

Syracuse
SUNY Health Science Center at Syracuse Program
University Hospital-SUNY Health Science Center at Syracuse
Veterans Affairs Medical Center (Syracuse)
Program Director: Jonathan Wright, MD
Dept of Medicine
SUNY Health Science Center
750 E Adams St
Syracuse, NY 13210
315 444-6453
Length: 2 Year(s)  Total Positions: 2
Program ID: 147-35-21-063

Valhalla
New York Medical College at Westchester County and Medical Center Program*
New York Medical College
Westchester County Medical Center
Program Director: Touneef Ahmed, MD
New York Medical College
Dept of Medicine
Valhalla, NY 10595
914 993-4460
Length: 2 Year(s)
Program ID: 147-35-11-011

Ohio
Cincinnati
University of Cincinnati Hospital Group Program
University of Cincinnati Hospital Veterans Affairs Medical Center (Cincinnati)
Program Director: Louis E Schroeder, MD
Barrett Cancer Center/University Hospital
204 Goodman Ave
Cincinnati, OH 45267-0601
513 588-3850
Length: 2 Year(s)  Total Positions: 7
Program ID: 147-38-32-167

Cleveland
Case Western Reserve University Program
University Hospitals of Cleveland MetroHealth Medical Center
Program Director: Clark W Distelhorst, MD
Case Western Reserve University Hematology/Oncology Division
1000 Euclid Ave (BIBB)
Cleveland, OH 44106-4057
216 368-1175
Length: 2 Year(s)  Total Positions: 12
Program ID: 147-38-21-146

Toledo
Medical College of Ohio at Toledo Program*
Medical College of Ohio Hospital St Vincent Medical Center
Program Director: Roland T Skeel, MD
Medical College of Ohio at Toledo
PO Box 10008
Dept of Medicine
Toledo, OH 43699-0008
419 381-3727
Length: 2 Year(s)  Total Positions: 6
Program ID: 147-38-21-013

Oregon
Portland
Oregon Health Sciences University Program
Oregon Health Sciences University Hospital Veterans Affairs Medical Center (Portland)
Program Director: Gerald McSagal, MD
Bruce V Dunn, MD
Oregon Health Sciences University - L580
311 SW Sam Jackson Park Rd
Portland, OR 97201-3098
503 494-8504
Length: 2 Year(s)  Total Positions: 3
Program ID: 147-48-31-149

Pennsylvania
Philadelphia
MCPHU/Medical College of Pennsylvania Hospital Program
Medical College of Pennsylvania Hospital
Program Director: Rosaline E Joseph, MD
Medical College of Pennsylvania Hospital Div of Med Oncology
2300 Henry Ave
Philadelphia, PA 19129
215 842-6880
Length: 2 Year(s)  Total Positions: 2
Program ID: 147-41-31-107

Presbyterian Medical Center of Philadelphia Program
Presbyterian Medical Center of Philadelphia
Program Director: Rene Rothstein-Rubin, MD
Presbyterian Med Ctr of Philadelphia
15 N 38th St
Philadelphia, PA 19104-2640
215 662-8847
Length: 2 Year(s)  Total Positions: 3
Program ID: 147-41-31-182

Temple University Program
Temple University Hospital Fox Chase Cancer Center
Program Director: Rita S Axelrod, MD
Temple University Cancer Center
3322 N Broad St
PO Box 8345
Philadelphia, PA 19140
215 707-2777
Length: 2 Year(s)  Total Positions: 2
Program ID: 147-41-32-026

Thomas Jefferson University Program
Thomas Jefferson University Hospital
Program Director: Gary E Fishbein, MD
Thomas Jefferson University Hospital
11th & Walnut St
Philadelphia, PA 19107
215 655-8875
Length: 2 Year(s)  Total Positions: 9
Program ID: 147-41-32-029

* Updated information not provided.
### Accredited Programs in Oncology (Internal Medicine)

<table>
<thead>
<tr>
<th>Program</th>
<th>University</th>
<th>Program Director</th>
<th>Length</th>
<th>Total Positions</th>
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<tbody>
<tr>
<td><strong>University of Pennsylvania Program</strong></td>
<td>Hospital of the University of Pennsylvania</td>
<td>Stephen G Emerson, MD PhD</td>
<td>2 year(s)</td>
<td>13</td>
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<tr>
<td><strong>Pittsburgh</strong></td>
<td>MCPH/Allegheny General Hospital Program</td>
<td>Bernard L Zidar, MD</td>
<td>2 year(s)</td>
<td>4</td>
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<tr>
<td><strong>University Health Center of Pittsburgh</strong></td>
<td>University Health Center of Pittsburgh</td>
<td>David C Smith, MD</td>
<td>2 year(s)</td>
<td>18</td>
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<tr>
<td><strong>San Juan City Hospital Program</strong></td>
<td>San Juan City Hospital</td>
<td>Luis Baz, MD</td>
<td>2 year(s)</td>
<td>2</td>
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<tr>
<td><strong>San Juan</strong></td>
<td>University of Puerto Rico Program</td>
<td>Enrique Velez-Garcia, MD</td>
<td>2 year(s)</td>
<td>12</td>
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<tr>
<td><strong>Providence</strong></td>
<td>Brown University (Roger Williams) Program</td>
<td>Alan D Weitberg, MD</td>
<td>2 year(s)</td>
<td>6</td>
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<tr>
<td><strong>South Carolina</strong></td>
<td>Richland Memorial Hospital-University of South Carolina School of Medicine Program</td>
<td>James A McFarland, MD</td>
<td>2 year(s)</td>
<td>3</td>
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<tr>
<td><strong>Tennessee</strong></td>
<td>University of Tennessee Program</td>
<td>Alvin M Mauer, MD</td>
<td>1 year(s)</td>
<td>6</td>
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<tr>
<td><strong>Texas</strong></td>
<td>Baylor University Medical Center Program</td>
<td>Marvin J Stone, MD</td>
<td>2 year(s)</td>
<td>4</td>
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<tr>
<td><strong>Galveston</strong></td>
<td>University of Texas Medical Branch Hospitals Program</td>
<td>James T Lin, MD</td>
<td>2 year(s)</td>
<td>5</td>
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<tr>
<td><strong>Houston</strong></td>
<td>Baylor College of Medicine Program*</td>
<td>Garrett R Lynch, MD</td>
<td>2 year(s)</td>
<td>4</td>
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<td><strong>University of Texas at Houston Program</strong></td>
<td>University of Texas Medical School</td>
<td>Richard Paudar, MD</td>
<td>2 year(s)</td>
<td>3</td>
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<td><strong>San Antonio</strong></td>
<td>University of Texas Health Science Center at San Antonio</td>
<td>Geoffrey B Weiss, MD</td>
<td>2 year(s)</td>
<td>12</td>
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*Updated information not provided.*
Temple
Texas A&M College of Medicine-Scott and White Program
Scott and White Memorial Hospital
Program Director:
John J Rinehart, MD
Graduate Med Educ Scott and White Hospital
2401 S 31st St
Temple, TX 76508
903 289-4463
Length: 2 Year(s) Total Positions: 4
Program ID: 147-45-21-186

Utah
Salt Lake City
University of Utah Program
University of Utah Medical Center
Veterans Affairs Medical Center (Salt Lake City)
Program Director:
James P Kushner, MD
Div of Hematology Oncology
University of Utah Medical Center
58 N Medical Dr
Salt Lake City, UT 84132
801 381-6734
Length: 2 Year(s) Total Positions: 5
Program ID: 147-49-21-100

Virginia
Charlottesville
University of Virginia Program
University of Virginia Medical Center
Program Director:
Charles E Myers Jr, MD
University of Virginia Hospitals Dept of Medicine
MB 4 Box 1231
Charlottesville, VA 22908
804 842-4100
Length: 2 Year(s) Total Positions: 6
Program ID: 147-51-21-017

Washington
Seattle
University of Washington Program
University of Washington School of Medicine
Fred Hutchinson Cancer Research Center
University of Washington Medical Center
Program Director:
Robert B Livingston, MD
University of Washington Hospital Medical Center
1935 NE Pacific St RC-08
Seattle, WA 98105
206 548-4155
Length: 2 Year(s) Total Positions: 18
Program ID: 147-54-21-175

West Virginia
Morgantown
West Virginia University Program
West Virginia University Hospitals
Program Director:
Edward J Crowell, MD
West Virginia University Health Sciences Center
Dept of Medicine
PO Box 9162
Morgantown, WV 26506-9162
304 293-4229
Length: 2 Year(s) Total Positions: 2
Program ID: 147-63-21-187

Wisconsin
Madison
University of Wisconsin Program
University of Wisconsin Hospital and Clinics William S Middleton Veterans Hospital
Program Director:
James A Stewart, MD
University of Wisconsin Hospital and Clinics
600 Highland Ave Rm K4630
UW Comprehensive Cancer Center
Madison, WI 53792-0001
608 263-1396
Length: 2 Year(s) Total Positions: 4
Program ID: 147-56-21-111

Milwaukee
Medical College of Wisconsin Program
Medical College of Wisconsin Affiliated Hospitals Inc
Clement J Zablocki Veterans Affairs Medical Center
John L Doyne Hospital
Program Director:
Tom Anderson, MD
Medical College of Wisconsin
8700 W Wisconsin Ave
Box 138
Milwaukee, WI 53226
414 257-5559
Length: 2 Year(s) Total Positions: 6
Program ID: 147-56-21-140

Ophthalmology
Alabama
Birmingham
University of Alabama Medical Center Program
University of Alabama Hospital
Cooper Green Hospital
Rye Foundation Hospital
Veterans Affairs Medical Center (Birmingham)
Program Director:
Harold W Skalak, MD
Rye Foundation Hospital
700 S 18th St
Ste 300
Birmingham, AL 35233
205 932-8007
Length: 3 Year(s) Total Positions: 18
Program ID: 240-01-21-916

Arizona
Tucson
University of Arizona Program
University of Arizona College of Medicine
Kino Community Hospital
University Medical Center
Veterans Affairs Medical Center (Tucson)
Program Director:
Joseph M Miller, MD
University of Arizona College of Medicine
Dept of Ophthalmology
1810 N Campbell Ave
Tucson, AZ 85719-3758
520 219-3077
Length: 3 Year(s) Total Positions: 6
Program ID: 240-03-21-171

Arkansas
Little Rock
University of Arkansas for Medical Sciences Program
University of Arkansas College of Medicine
Arkansas Children's Hospital
John L McClellan Memorial Veterans Hospital
University Hospital of Arkansas
Program Director:
Charles D Ries, MD
Univ of Arkansas for Medical Sciences Dept of Ophthalmology
4301 W Markham St
Mail Slot 559
Little Rock, AR 72205-7190
501 686-6100
Length: 4 Year(s) Total Positions: 12
Program ID: 240-04-21-018

* Updated information not provided.
Accredited Programs in Ophthalmology

California

Loma Linda

Loma Linda University Program
Loma Linda University Medical Center
Jerry L. Pettis Memorial Veterans Hospital
Riverside General Hospital—University Medical Center
Program Director:
David I. Wilkins, MD
Dept. of Ophthalmology
1100 Anderson St #1800
Loma Linda, CA 92354
909-786-4141
Length: 3 Year(s)  Total Positions: 9
Program ID: 240-05-21-028

Los Angeles

Charles R. Drew University Program
Charles R. Drew University of Medicine and Science
LAC-King/Drew Medical Center
Program Director:
Richard Casey, MD
Martin Luther King Jr. Medical Center
1200 S Wilmington Ave
Los Angeles, CA 90059
310-608-4531
Length: 3 Year(s)  Total Positions: 6
Program ID: 240-05-21-026

UCLA Medical Center Program
UCLA School of Medicine
Los Angeles County—Harbor—UCLA Medical Center
UCLA Medical Center—Jules Stein Eye Institute
Veterans Affairs Medical Center (West Los Angeles)
Program Director:
Barry J. Mendis, MD
Jules Stein Eye Institute
-400 Stein Plaza UCLA
Los Angeles, CA 90095-7000
310-825-5063
Length: 3 Year(s)  Total Positions: 24
Program ID: 240-05-21-027

University of Southern California Program*
Los Angeles County-USC Medical Center
Program Director:
Alfredo A. Sadun, MD, PhD
Los Angeles County-USC Medical Center
1200 N State St Box 664
Los Angeles, CA 90033
213-646-5417
Length: 3 Year(s)  Total Positions: 24
Program ID: 240-05-21-025

White Memorial Medical Center Program
White Memorial Medical Center
Program Director:
David J. Faure, MD
White Memorial Medical Center
414 N Boyle Ave
Los Angeles, CA 90033
213-398-6644
Length: 3 Year(s)  Total Positions: 9
Program ID: 240-05-21-029

Orange

University of California (Irvine) Program
University of California (Irvine) Medical Center
Long Beach Memorial Medical Center
Veterans Affairs Medical Center (Long Beach)
Program Director:
Baruch D. Kuppermann, MD
University of California (Irvine) College of Medicine
Dept. of Ophthalmology
Centerpointe
Irvine, CA 92717-4375
714-856-6256
Length: 3 Year(s)  Total Positions: 11
Program ID: 240-05-21-022

Sacramento

University of California (Davis) Program
University of California (Davis) Medical Center
Program Director:
John L. Kellett, MD
University of California (Davis) School of Medicine
Dept. of Ophthalmology
1650 Alhambra Blvd
Sacramento, CA 95816
916-524-6967
Length: 4 Year(s)  Total Positions: 2
Program ID: 240-05-21-020

San Diego

Naval Medical Center (San Diego) Program
Naval Medical Center (San Diego)
Program Director:
Neil T. Choppin, MD
Dept. of Ophthalmology
Naval Medical Center
3800 Bob Wilson Dr
San Diego, CA 92134-6000
619-522-6702
Length: 3 Year(s)  Total Positions: 12
Program ID: 240-05-21-008

University of California (San Diego) Program* University of California (San Diego) Medical Center
Veterans Affairs Medical Center (San Diego)
Program Director:
Don Kikkawa, MD
University of California (San Diego)
Dept. of Ophthalmology
UCSD Eye Ctr/618
La Jolla, CA 92038
619-534-2238
Length: 3 Year(s)  Program ID: 240-05-21-030

San Francisco

California Pacific Medical Center Program
California Pacific Medical Center
California Pacific Medical Center (Pacific Campus)
Highland General Hospital
Program Director:
Barrett Katz, MD
Dept. of Ophthalmology
California Pacific Medical Center
2340 Clay St
San Francisco, CA 94115
415-823-3800
Length: 3 Year(s)  Total Positions: 9
Program ID: 240-05-22-091

University of California (San Francisco) Program*
University of California (San Francisco) School of Medicine
San Francisco General Hospital—Medical Center
University of California (San Francisco) Medical Center
Veterans Affairs Medical Center (San Francisco)
Program Director:
Craig S. Holt, MD
Univ of California (San Francisco) School of Medicine
Dept. of Ophthalmology
4501 Utah St
San Francisco, CA 94133-0730
415-476-1911
Length: 3 Year(s)  Total Positions: 15
Program ID: 240-05-21-002

Stanford

Stanford University Program
Stanford University Hospital
Santa Clara Valley Medical Center
Veterans Affairs Medical Center (Palo Alto)
Program Director:
Michael Marzorati, MD
Stanford University Hospital
Ren AISE Dept. of Ophthalmology
Stanford, CA 94305-5308
415-733-5517
Length: 3 Year(s)  Total Positions: 9
Program ID: 240-05-21-033

Colorado

Aurora

Fitzsimons Army Medical Center Program
Fitzsimons Army Medical Center
Program Director:
Maj Eric A. Stawicki, MD
Ophthalmology Service
Fitzsimons Army Medical Center
Aurora, CO 80045-5001
303-316-3170
Length: 3 Year(s)  Total Positions: 2
Program ID: 240-05-21-008

Denver

University of Colorado Program
University of Colorado Health Sciences Center
Denver Health and Hospitals
Veterans Affairs Medical Center (Denver)
Program Director:
Philip P. Ellis, MD
Univ of Colorado Health Sciences Ctr Dept of Ophthalmology
4000 E 9th Ave Container #B-204
Denver, CO 80262
303-721-6365
Length: 3 Year(s)  Total Positions: 12
Program ID: 240-05-21-035

* Updated information not provided.
Connecticut

New Haven

Yale-New Haven Medical Center Program
Yale-New Haven Medical Center
Veterans Affairs Medical Center (West Haven)
Program Director:
Joseph Caprilli, MD
Yale Univ Dept of Ophthalmology & Visual Sci & the Yale Eye Ctr for Clin Research
PO Box 239961
New Haven, CT 06520-9961
203 785-7230
Length: 3 Year(s)  Total Positions: 12
Program ID: 240-08-21-038

District of Columbia

Washington

George Washington University Program
George Washington University School of Medicine
Children's National Medical Center
George Washington University Hospital
Veterans Affairs Medical Center (Martinsburg)
Program Director:
Manooor Farshady, MD
George Washington University
2150 Pennsylvania Ave NW
PO Box 4188
Washington, DC 20037
202 396-4028
Length: 3 Year(s)  Total Positions: 12
Program ID: 240-10-21-009

Georgetown University Program*
Georgetown University Hospital
District of Columbia General Hospital
Veterans Affairs Medical Center (Washington DC)
Program Director:
George A Cherico, MD
Georgetown University Medical Center
3900 Reservoir Rd NW
Washington, DC 20007
202 416-7665
Length: 3 Year(s)  Total Positions: 9
Program ID: 240-10-21-038

Howard University Program*
Howard University Hospital
District of Columbia General Hospital
Program Director:
Nancy S Williams, MD
Howard University Hospital
2041 Georgia Ave NW
Washington, DC 20030
202 885-6100
Length: 3 Year(s)  Total Positions: 5
Program ID: 240-10-21-040

Walter Reed Army Medical Center Program
Walter Reed Army Medical Center
Program Director:
William F Maslak, Jr, MD
Ophthalmology Service
Walter Reed Army Medical Center
1672 10th St NW
Washington, DC 20007-5901
202 722-5969
Length: 3 Year(s)  Total Positions: 6
Program ID: 240-10-12-004

Washington Hospital Center Program
Washington Hospital Center
Program Director:
William B Grew, MD
Washington Hospital Center
110 Irving St NW
Ste 1A-15
Washington, DC 20010-2975
202 877-9993
Length: 3 Year(s)  Total Positions: 14
Program ID: 240-10-35-041

Florida

Gainesville

University of Florida Program
University of Florida College of Medicine
Shands Hospital at the University of Florida
University of Florida Medical Center (UFHSC/J)
Veterans Affairs Medical Center (Gainesville)
Program Director:
George A Storm, MD
Box 10324
JHMIC
Dept of Ophthalmology
University of Florida
Gainesville, FL 32610-0324
208 352-3451
Length: 3 Year(s)  Total Positions: 18
Program ID: 240-11-21-042

Miami

University of Miami-Jackson Memorial Medical Center Program
University of Miami-Jackson Memorial Medical Center
Bascom Palmer Eye Institute
Anne Bates Leach Eye Hospital
Veterans Affairs Medical Center (Miami)
Program Director:
Richard Parrish, MD
Bascom Palmer Eye Institute
PO Box 016880
Miami, FL 33101-6880
305 356-6992
Length: 3 Year(s)  Total Positions: 25
Program ID: 240-11-11-043

Tampa

University of South Florida Program
University of South Florida College of Medicine
James A Haley Veterans Hospital
Tampa General Healthcare
Program Director:
J. Curtis Stiles, MD
University of South Florida
Dept of Ophthalmology
Box 21 12901 B Downs Blvd
Tampa, FL 33612-4796
813 978-5815
Length: 3 Year(s)  Total Positions: 15
Program ID: 240-11-21-044

Georgia

Atlanta

Emory University Program
Emory University School of Medicine
Emory University Hospital
Grady Memorial Hospital
Veterans Affairs Medical Center (Atlanta)
Program Director:
Geoffrey Breucker, MD
Emory University School of Medicine
Dept of Ophthalmology
1350 Clifton Rd NE
Atlanta, GA 30322
404 715-4501
Length: 3 Year(s)  Total Positions: 18
Program ID: 240-12-21-045

Augusta

Medical College of Georgia Program
Medical College of Georgia Hospital and Clinics
Veterans Affairs Medical Center (Augusta)
Program Director:
Malcolm N. Luxenberg, MD
Medical College of Georgia
Department of Ophthalmology
Augusta, GA 30912-5400
706 721-4227
Length: 3 Year(s)  Total Positions: 18
Program ID: 240-12-21-046

Illinois

Chicago

Cook County Hospital Program
Cook County Hospital
Program Director:
Alan J Axelrod, MD
Cook County Hospital Div of Ophthalmology
1335 W Harrison St
Chicago, IL 60612-1885
312 533-5833
Length: 3 Year(s)  Total Positions: 9
Program ID: 240-16-23-047

McGaw Medical Center of Northwestern University Program
Northwestern University Medical School
Children's Memorial Medical Center
Edvaston Hospital
Northwestern Memorial Hospital
Veterans Affairs Lakeside Medical Center (Chicago)
Program Director:
Michael Rosenberg, MD
Northwestern University Medical School
Dept of Ophthalmology
645 N Michigan Ave Ste 440
Chicago, IL 60611
312 922-8162
Length: 3 Year(s)  Total Positions: 10
Program ID: 240-16-21-048

Rush-Presbyterian-St Luke's Medical Center Program*
Rush-Presbyterian-St Luke's Medical Center
Program Director:
Thomas A Deutsch, MD
Rush-Presbyterian-St Luke's Medical Center
1632 W Congress Plwy
Ste 906-Professional Bldg
Chicago, IL 60611-3846
312 924-3670
Length: 3 Year(s)  Total Positions: 8
Program ID: 240-11-21-056

* Updated information not provided.

Graduate Medical Education Directory
Accredited Programs in Ophthalmology

University of Chicago Program
University of Chicago Hospitals
Oak Forest Hospital of Cook County
Program Director: Sanjeev C Patel, MD
University of Chicago Visual Sciences Center
580 E 57th St, MC1214
Chicago, IL 60637-1470
312 702-1965
Length: 3 Year(s) Total Positions: 9
Program ID: 240-16-21-174

University of Illinois College of Medicine at Chicago Program
University of Illinois College of Medicine at Chicago
Michael Reese Hospital and Medical Center
University of Illinois Hospital and Clinics
Program Director: John W Chandler, MD
Jacobi T Wilensky, MD
University of Illinois Eye and Ear Infirmary
1855 W Taylor MC 464
Chicago, IL 60612
312 996-5580
Length: 3 Year(s) Total Positions: 29
Program ID: 240-16-21-052

Maywood

Loyola University Program
Foster G McGaw Hospital-Loyola University of Chicago
Edward J Hines Jr Veterans Affairs Hospital
Program Director: Charles S Buchardt, MD
Loyola University Chicago Stritch School of Medicine
Foster G McGaw Hospital
2150 S First Ave
Maywood, IL 60153
708 212-3428
Length: 3 Year(s) Total Positions: 9
Program ID: 240-16-21-054

Springfield

Southern Illinois University Program
Southern Illinois University School of Medicine
Memorial Medical Center
St John's Hospital
Program Director: Joseph M Feder, MD
Southern Illinois University
530 N Fourth St
PO Box 19289
Springfield, IL 62794-9320
217 544-8656
Length: 3 Year(s) Total Positions: 4
Program ID: 240-16-31-176

Indiana

Indianapolis

Indiana University Medical Center Program
Indiana University Medical Center
Methodist Hospital of Indiana
Richard L Roudebush Veterans Affairs Medical Center
William N Winand Memorial Hospital
Program Director: Robert D Yee, MD
Indiana University Hospitals
712 Rotary Circle
Indianapolis, IN 46202-5175
317 274-7101
Length: 3 Year(s) Total Positions: 18
Program ID: 240-17-21-055

Iowa

Iowa City

University of Iowa Hospitals and Clinics Program
University of Iowa Hospitals and Clinics
Program Director: Keith D Carter, MD
University of Iowa Hospitals and Clinics
Dept of Ophthalmology
Iowa City, IA 52242-1009
319 356-7897
Length: 3 Year(s) Total Positions: 18
Program ID: 240-18-11-056

Kansas

Kansas City

University of Kansas Medical Center Program
University of Kansas School of Medicine
University of Kansas Medical Center
Veterans Affairs Medical Center (Kansas City)
Program Director: John D Burkley, MD
University of Kansas Medical Center
3901 Rainbow Blvd
Kansas City, KS 66160-7379
913 588-5605
Length: 4 Year(s) Total Positions: 10
Program ID: 240-19-21-057

Kentucky

Lexington

University of Kentucky Medical Center Program
University of Kentucky Medical Center
Veterans Affairs Medical Center (Lexington)
Program Director: Robert S Baker, MD
University of Kentucky/Kentucky Clinic
Dept of Ophthalmology
E 345 Kentucky Clinic
Lexington, KY 40536-0284
606 232-5887
Length: 3 Year(s) Total Positions: 9
Program ID: 240-29-21-058

Louisiana

New Orleans

Alton Ochsner Medical Foundation Program
Alton Ochsner Medical Foundation
Eye Ear Nose and Throat Hospital
Leonard J Chabert Medical Center
University of South Alabama Medical Center
Program Director: HSprague Eustis, MD
Alton Ochsner Medical Foundation
Dept of Graduate Med Educ
1515 Jefferson Hwy
New Orleans, LA 70121
504 864-3095
Length: 3 Year(s) Total Positions: 18
Program ID: 240-21-22-061

Louisiana State University Program
Louisiana State University School of Medicine
Louisiana State University Eye Center
Medical Center of Louisiana at New Orleans-LSU Division
Program Director: Ronald R Bergrom, MD
Louisiana State University Med Ctr Dept of Ophthalmology
2020 Gravier St Ste B
New Orleans, LA 70112
504 698-6700
Length: 4 Year(s) Total Positions: 20
Program ID: 240-21-21-060

Tulane University Program
Tulane University Medical Center
Medical Center of Louisiana at New Orleans-Tulane Division
Tulane University Hospital and Clinic
Veterans Affairs Medical Center-Tulane Service (New Orleans)
Program Director: Zeypal A Karcilcoglu, MD
Tulane University School of Medicine
Dept of Ophthalmology
1430 Tulane Ave
New Orleans, LA 70112-2999
504 988-5504
Length: 3 Year(s) Total Positions: 25
Program ID: 240-21-21-062

Shreveport

Louisiana State University (Shreveport) Program
Louisiana State University Medical Center-Shreveport
Ochsner-Burns Veterans Affairs Medical Center
Program Director: James P Gaynor, MD Ph.D
Louisiana State University Medical Center Hospital
Medical Education - Ophthalmology
1501 Kings Hwy PO Box 5392
Shreveport, LA 71130-3932
318 677-5012
Length: 3 Year(s) Total Positions: 12
Program ID: 240-21-21-063

* Updated information not provided.
Maryland

Greater Baltimore Medical Center Program
Greater Baltimore Medical Center
Program Director:
Charles F. Wilkinson, MD
Greater Baltimore Medical Center
6500 N Charles St Pavilion 606 W
Baltimore, MD 21204
410 838-2196
Length: 3 Year(s) Total Positions: 9
Program ID: 240-23-12-004

Johns Hopkins University Program
Johns Hopkins University School of Medicine
Johns Hopkins Hospital
Program Director:
Terrence F. O’Brien, MD
The Wilmer Institute 355 W. 350
600 N Wolfe St
Baltimore, MD 21201-3121
410 955-1771
Length: 3 Year(s) Total Positions: 15
Program ID: 240-23-21-065

Maryland General Hospital Program*
Maryland General Hospital
Program Director:
Samuel D Friedel, MD
Maryland General Hospital
827 Linden Ave
Baltimore, MD 21201
301 225-8077
Length: 3 Year(s) Total Positions: 6
Program ID: 240-23-13-066

Sinai Hospital of Baltimore Program
Sinai Hospital of Baltimore
Program Director:
Harold R Katz, MD
Krieger Eye Institute
Sinai Hospital of Baltimore
2411 W Belvedere Ave
Baltimore, MD 21215-0271
410 679-5672
Length: 3 Year(s) Total Positions: 6
Program ID: 240-23-21-067

University of Maryland Program*
University of Maryland Medical System
Program Director:
Mark W Pressin, MD
University of Maryland
Dept of Ophthalmology
22 S Greene St
Baltimore, MD 21201-1590
410 328-5744
Length: 3 Year(s) Total Positions: 9
Program ID: 240-23-21-008

Massachusetts

Boston
Boston University Program
Boston University Medical Center-Hospital Boston City Hospital
Brigham and Women's Hospital
Program Director:
Howard M Leibovitz, MD
Dept of Ophthalmology
80 E Concord St 6097
Boston, MA 02118-2284
617 638-6500
Length: 3 Year(s) Total Positions: 13
Program ID: 240-23-21-069

Massachusetts Eye and Ear Infirmary Program
Massachusetts Eye and Ear Infirmary
Program Director:
Anthony P Adamis, MD
Massachusetts Eye and Ear Infirmary
248 Charles St
Boston, MA 02114-3096
617 737-3092
Length: 3 Year(s) Total Positions: 24
Program ID: 240-24-21-070

Tufts University Program
New England Medical Center Hospitals
Veterans Affairs Medical Center (Boston)
Program Director:
Joel S Schuman, MD
New England Eye Center
750 Washington St Box 450
Boston, MA 02111
617 303-7560
Length: 3 Year(s) Total Positions: 12
Program ID: 240-24-21-071

Michigan

Ann Arbor
University of Michigan Program
University of Michigan Hospitals
Veterans Affairs Medical Center (Ann Arbor)
Program Director:
Terry J Bengtson, MD
Univ of Michigan Medical School
W K Kellogg Eye Ctr Box 0174
1000 Wall St
Ann Arbor, MI 48105
313 764-5028
Length: 3 Year(s) Total Positions: 18
Program ID: 240-25-11-072

Detroit
Henry Ford Hospital Program
Henry Ford Hospital
Program Director:
J. David Carew, MD
Henry Ford Hospital
2798 W Grand Blvd
Detroit, MI 48202
313 876-3289
Length: 3 Year(s) Total Positions: 15
Program ID: 240-25-13-073

Sinai Hospital Program
Sinai Hospital
Program Director:
Hugh Beckman, MD
Sinai Hospital of Detroit
6787 W Outer Dr
Detroit, MI 48226-2886
313 495-517
Length: 3 Year(s) Total Positions: 6
Program ID: 240-23-31-074

Wayne State University/Detroit Medical Center Program
Wayne State University School of Medicine
Children’s Hospital of Michigan Hutzel Hospital
Program Director:
Robert S Jampel, MD
Kresge Eye Institute
4717 St Antoine
Detroit, MI 48201
313 577-1325
Length: 3 Year(s) Total Positions: 18
Program ID: 240-22-21-075

Royal Oak
William Beaumont Hospital Program
William Beaumont Hospital
Program Director:
Raymond R Barbour, MD
William Beaumont Hospital
5601 W Thirteen Mile Rd
Royal Oak, MI 48073
810 551-2175
Length: 3 Year(s) Total Positions: 6
Program ID: 240-23-21-165

Minnesota

Minneapolis
University of Minnesota Program
University of Minnesota Medical School
Hennepin County Medical Center
St Paul-Ramsey Medical Center
University of Minnesota Hospital and Clinic
Veterans Affairs Medical Center (Minneapolis)
Program Director:
Martha M Wright, MD
University of Minnesota Dept of Ophthalmology
CMHC Box 483
430 Delaware St SE
Minneapolis, MN 55455-0591
612 722-440
Length: 3 Year(s) Total Positions: 17
Program ID: 240-26-31-077

Rochester
Mayo Graduate School of Medicine Program
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Rochester)
Rochester Methodist Hospital
St Mary’s Hospital of Rochester
Program Director:
David C Herman, MD
MGSM Application Processing Center
Mayo Graduate School of Medicine
200 First St SW
Rochester, MN 55905
507 284-4239
Length: 3 Year(s) Total Positions: 15
Program ID: 240-26-21-078

* Updated information not provided.
Mississippi
Jackson
University of Mississippi Medical Center Program
University of Mississippi School of Medicine
Veterans Affairs Medical Center (Jackson)
Program Director:
Samuel B Josephson, MD
University of Mississippi Medical Center
2000 N State St McBurny Bldg
Jackson, MS 39216
601 894-5020
Length: 3 Year(s)  Total Positions: 10
Program ID: 240-27-21-079

Missouri
Columbia
University of Missouri-Columbia Program
University of Missouri-Columbia School of Medicine
Harry S Truman Memorial Veterans Hospital
Program Director:
John W Cowden, MD
Univ of Missouri-Columbia Hospital and Clinics
One Hospital Dr
Columbia, MO 65212
314 882-1029
Length: 3 Year(s)  Total Positions: 9
Program ID: 240-28-22-000

Kansas City
University of Missouri at Kansas City Program
University of Missouri-Kansas City School of Medicine
Children's Mercy Hospital
Truman Medical Center-West
Program Director:
Nelson R Sabatini, MD
University of Missouri at Kansas City School of Medicine
2300 Holmes St
Kansas City, MO 64108
816 861-6184
Length: 3 Year(s)  Total Positions: 9
Program ID: 240-28-21-081

St. Louis
St Louis University Group of Hospitals Program
St Louis University School of Medicine
Anheuser-Busch Eye Institute
Program Director:
David J Schmaling, MD
Anheuser-Busch Eye Inst
1755 S Grand Blvd
St Louis, MO 63104
314 865-6380
Length: 3 Year(s)  Total Positions: 12
Program ID: 240-38-31-083

Washington University Program
Barnes Hospital
Veterans Affairs Medical Center (St Louis)
Program Director:
Anthony Lubniwski, MD
William J Dinning, MD
Washington University School of Medicine
Dept of Ophthalmology
660 S Euclid Box 8036
St Louis, MO 63110
314 363-3744
Length: 3 Year(s)  Total Positions: 15
Program ID: 240-38-21-084

Nebraska
Omaha
University of Nebraska Program
University of Nebraska Medical Center
Veterans Affairs Medical Center (Omaha)
Program Director:
David M Chacko, MD PhD
University of Nebraska Medical Center
600 S 42nd St
Omaha, NE 68198-5540
402 559-8275
Length: 3 Year(s)  Total Positions: 6
Program ID: 240-30-21-085

New Jersey
Camden
UMDNJ-Robert Wood Johnson Medical School (Camden) Program
Cooper Hospital-University Medical Center
Princeton Hospital (Torresdale Campus)
Medical College Hospitals-Elkins Park Campus
Program Director:
David R Soll, MD
Div of Ophthalmology
3 Cooper Plaza
Ste 510
Camden, NJ 08103
856 245-7200
Length: 3 Year(s)  Total Positions: 9
Program ID: 240-33-21-172

Newark
UMDNJ-New Jersey Medical School Program
UMDNJ-New Jersey Medical School
Dept of Veterans Affairs Medical Center (East Orange)
Newark VAMC Medical Center
Newark VAMC Medical Center
Program Director:
Christopher M Scovil, MD
UMDNJ-New Jersey Medical School
Dept of Ophthalmology
1801 Bergen St Do-4th Fl
Newark, NJ 07113-2467
201 999-2368
Length: 3 Year(s)  Total Positions: 15
Program ID: 240-38-21-086

New York
Albany
Albany Medical Center Program*
Albany Medical Center
Veterans Affairs Medical Center (Albany)
Program Director:
Michael W Bellin, MD
Dept of Ophthalmology A-77
Albany Medical College
New Scotland Ave
Albany, NY 12208-3470
518 465-0977
Length: 3 Year(s)  Total Positions: 12
Program ID: 240-35-21-087

Bronx
Albert Einstein College of Medicine Program
Albert Einstein College of Medicine of Yeshiva University
Bronx Municipal Hospital Center
Montefiore Medical Center-Henry and Lucy Moses Division
Montefiore Medical Center-Weiler Hospital
North Central Bronx Hospital
Program Director:
Harry Engel, MD
Montefiore Med Ctr Dept of Ophthalmology
Centennial Bldg Rm 306
111 E 210th St
Bronx, NY 10467
718 920-2434
Length: 3 Year(s)  Total Positions: 18
Program ID: 240-35-21-093

Brooklyn
Brookdale Hospital Medical Center Program*
Brookdale Hospital Medical Center
Program Director:
George F Hyman, MD
Linden Blvd at Brookdale Plaza
Brooklyn, NY 11212
718 240-5027
Length: 3 Year(s)  Total Positions: 6
Program ID: 240-35-11-096

Interfaith Medical Center Program
Interfaith Medical Center
Program Director:
Wally Koplowitz, MD
Interfaith Medical Center
Dept of Ophthalmology
555 Prospect Pl
Brooklyn, NY 11238
718 935-7293
Length: 3 Year(s)  Total Positions: 6
Program ID: 240-35-11-100

* Updated information not provided.
MANHATTAN

North Shore University Hospital Program

North Shore University Hospital

Program Director:
Steven Robin, MD
North Shore University Hospital
300 Community Dr
Manhattan, NY 11008-1111

Length: 3 Year(s) Total Positions: 8
Program ID: 240-36-11-092

NEW HYDE PARK

Albert Einstein College of Medicine at Long Island Jewish Medical Center Program

Long Island Jewish Medical Center

Program Director:
Michael L. Slavin, MD
Long Island Jewish Medical Center
Dept of Ophthalmology
New Hyde Park, NY 11040

Length: 3 Year(s) Total Positions: 9
Program ID: 240-35-21-102

NEW YORK

Harlem Hospital Center Program

Harlem Hospital Center
Presbyterian Hospital in the City of New York

Program Director:
K. Sunny Harris, MD
Harlem Hospital Center
514 Lenox Ave
New York, NY 10037

Length: 3 Year(s) Total Positions: 6
Program ID: 240-36-11-089

Lenox Hill Hospital Program

Lenox Hill Hospital
North General Hospital

Program Director:
Stephen A. Oelschlaegel, MD
180 E 77th St
New York, NY 10021-1883

Length: 3 Year(s) Total Positions: 6
Program ID: 240-35-11-101

Manhattan Eye and Ear Hospital Program

Manhattan Eye and Ear and Throat Hospital

Program Director:
James S. Schatz, MD
Manhattan Eye and Ear and Throat Hospital
210 E 64th St
New York, NY 10021

Length: 3 Year(s) Total Positions: 8
Program ID: 240-35-21-168

Mount Sinai School of Medicine Program

Mount Sinai School of Medicine
Beth Israel Medical Center
Elmhurst Hospital Center-Mount Sinai Services
Mount Sinai Medical Center
Veterans Affairs Medical Center (Bronx)

Program Director:
Janelle B. Berlin, MD
Mount Sinai School of Medicine
One Gustave L. Levy Pl
Box 1183
New York, NY 10029

Length: 3 Year(s) Total Positions: 21
Program ID: 240-35-21-04

New York Eye and Ear Infirmary Program

New York Eye and Ear Infirmary

Program Director:
Richard B. Rosen, MD
New York Eye and Ear Infirmary
310 E 14th St
New York, NY 10003

Length: 3 Year(s) Total Positions: 21
Program ID: 240-35-22-168

New York Hospital/Cornell Medical Center Program

New York Hospital

Program Director:
D. Jason Coleman, MD
New York Hospital
525 E 68th St
New York, NY 10021

Length: 3 Year(s) Total Positions: 15
Program ID: 240-35-21-169

New York University Medical Center Program

New York University Medical Center
Bellevue Hospital Center
Veterans Affairs Medical Center (Manhattan)

Program Director:
Kenneth G. Nokes, MD
New York University Medical Center
500 First Ave
New York, NY 10016

Length: 3 Year(s) Total Positions: 15
Program ID: 240-35-21-168

Presbyterian Hospital in the City of New York Program

Presbyterian Hospital in the City of New York

Program Director:
Anthony Donn, MD
Presbyterian Hospital in the City of New York
655 W 166th St
New York, NY 10032

Length: 3 Year(s) Total Positions: 9
Program ID: 240-35-11-099

St Luke’s-Roosevelt Hospital Center Program

St Luke’s-Roosevelt Hospital Center

Program Director:
James C. Newton, MD
St Luke’s-Roosevelt Hospital Center
114th St & Amsterdam Ave
New York, NY 10025

Length: 3 Year(s) Total Positions: 6
Program ID: 240-35-11-111
Accredited Programs in Ophthalmology

Rochester
University of Rochester Program
Strong Memorial Hospital of the University of Rochester
Rochester General Hospital
St Mary's Hospital
Program Director:
George II Bresnick, MD
University of Rochester Medical Center
PO Box 659
601 Elmwood Ave
Rochester, NY 14642
716 772-3236
Length: 3 Year(s) Total Positions: 8
Program ID: 240-35-116

Syracuse
SUNY Health Science Center at Syracuse Program
University Hospital-SUNY Health Science Center at Syracuse
Crouse Irving Memorial Hospital
Veterans Affairs Medical Center (Syracuse)
Program Director:
John A Hoepner, MD
SUNY Health Science Center at Syracuse
University Hospital
750 E Adams St
Syracuse, NY 13210
315 645-6205
Length: 3 Year(s) Total Positions: 6
Program ID: 240-35-116

Valhalla
New York Medical College at St Vincent's Hospital and Medical Center of New York Program
New York Medical College
St Vincent's Hospital and Medical Center of New York
Bayley Seton Hospital
Cabrini Medical Center
Program Director:
Robert A D'Amico, MD
St Vincent's Hospital and Medical Center of New York
155 W 11th St
New York, NY 10011
212 694-2041
Length: 3 Year(s) Total Positions: 12
Program ID: 240-35-112

New York Medical College at Westchester County Medical Center Program
New York Medical College
Lincoln Medical and Mental Health Center
Metropolitan Hospital Center
Our Lady of Mercy Medical Center
Westchester County Medical Center
Program Director:
Steven B Zabin, MD
New York Medical College
Westchester County Medical Center
Valhalla, NY 10595
914 235-7771
Length: 3 Year(s) Total Positions: 18
Program ID: 240-35-1107

North Carolina
Chapel Hill
University of North Carolina Hospitals Program
University of North Carolina Hospitals
Program Director:
Baird S Grimson, MD
Univ of North Carolina
Dept of Ophthalmology
617 Burnett-Womack Bldg CB 7040
Chapel Hill, NC 27599-7040
919 966-2596
Length: 3 Year(s) Total Positions: 9
Program ID: 240-36-119

Durham
Duke University Program
Duke University Medical Center
Veterans Affairs Medical Center (Durham)
Program Director:
Stephen C Pollock, MD
Duke University Medical Center
Box 3500
Durham, NC 27710
919 684-4417
Length: 3 Year(s) Total Positions: 15
Program ID: 240-36-118

Winston-Salem
Bowman Gray School of Medicine Program
North Carolina Baptist Hospital
Program Director:
M Madison Slusher, MD
Wake Forest University Eye Center
Medical Center Blvd
Winston-Salem, NC 27157-1038
919 716-3971
Length: 3 Year(s) Total Positions: 7
Program ID: 240-36-1120

Ohio
Akron
Akron City Hospital (Summa Health System/NEUCOM Program
Akron City Hospital (Summa Health System)
Children's Hospital Medical Center of Akron
Program Director:
James H Bates, MD
Akron City Hospital
555 Market St
Akron, OH 44305
234 568-2521
Length: 3 Year(s) Total Positions: 6
Program ID: 240-38-1121

Cincinnati
University of Cincinnati Hospital Group Program
University of Cincinnati Hospital
Veterans Affairs Medical Center (Cincinnati)
Program Director:
Joshua J Sands, MD
Section BP
Bldg 22 East Professional Bldg 350
Eide & Roadhouse Ave
Cincinnati, OH 45267-0027
513 558-5151
Length: 3 Year(s) Total Positions: 9
Program ID: 240-38-1122

Cleveland
Case Western Reserve University Program
University Hospitals of Cleveland
MetroHealth Medical Center
Veterans Affairs Medical Center (Cleveland)
Program Director:
Jonathan Lasz, MD
University Hospitals of Cleveland
11100 Euclid Ave
Cleveland, OH 44106
216 444-1235
Length: 3 Year(s) Total Positions: 15
Program ID: 240-38-1123

Cleveland Clinic Foundation Program
Cleveland Clinic Foundation
St Vincent Charity Hospital and Health Center
Program Director:
Roger H S Langston, MD
Cleveland Clinic Foundation
Dept of Ophthalmology
9550 Euclid Ave 1772
Cleveland, OH 44106-5242
216 444-1235
Length: 3 Year(s) Total Positions: 12
Program ID: 240-38-1124

Mount Sinai Medical Center of Cleveland Program
Mount Sinai Medical Center of Cleveland
Program Director:
Mark Levine, MD
Mt Sinai Medical Center of Cleveland
One Mt Sinai Dr
Cleveland, OH 44106-4198
216 621-4585
Length: 3 Year(s) Total Positions: 6
Program ID: 240-38-1125

St Luke's Medical Center Program
St Luke's Medical Center
Program Director:
Howard D Kahn, MD
Saint Luke's Medical Center
13011 Shaker Blvd
Cleveland, OH 44104
216 357-1745
Length: 3 Year(s) Total Positions: 6
Program ID: 240-38-1126

* Updated information not provided.
Accredited Programs in Ophthalmology

Columbus
Ohio State University Program
Ohio State University Medical Center
Program Director:
Paul A Weber, MD
Dept. of Ophthalmology
5024 B Univ Hosp Clinic
456 W 10th Ave
Columbus, OH 43210-1228
614-298-8169
Length: 3 Year(s) Total Positions: 16
Program ID: 240-38-21-127

Oklahoma
Oklahoma City
University of Oklahoma Health Sciences Center Program
University of Oklahoma College of Medicine-Oklahoma City
Children's Hospital of Oklahoma
McGee Eye Institute
University Hospital and Clinics
Veterans Affairs Medical Center (Oklahoma City)
Program Director:
James M Richard, MD
Dean A McGee Eye Institute
608 Stanton St Young Blvd
Oklahoma City, OK 73104
405-271-4066
Length: 3 Year(s) Total Positions: 13
Program ID: 240-39-21-129

Oregon
Portland
Oregon Health Sciences University Program
Oregon Health Sciences University Hospital
Good Samaritan Hospital and Medical Center
Veterans Affairs Medical Center (Portland)
Program Director:
Joseph E Robertson Jr, MD
Casey Eye Institute
Oregon Health Sciences University
3375 SW Terwilliger Blvd
Portland, OR 97201-4197
503-494-3666
Length: 4 Year(s) Total Positions: 10
Program ID: 240-40-21-131

Pennsylvania
Danville
Geisinger Medical Center Program
Geisinger Medical Center
Program Director:
Herbert J Ingraham, MD
Geisinger Medical Center
Dept. of Ophthalmology
N Academy Ave
Danville, PA 17822-2120
717-271-6531
Length: 3 Year(s) Total Positions: 6
Program ID: 240-41-21-132

Hershey
Milton S Hershey Medical Center of Pennsylvania State University Program
Penn State University Hospital-Milton S Hershey Med Ctr
Veterans Affairs Medical Center (Lebanon)
Program Director:
Stuart R Goldberg, MD
Milton S Hershey Medical Center
Dept. of Ophthalmology
PO Box 850
Hershey, PA 17033
717-531-6661
Length: 3 Year(s) Total Positions: 9
Program ID: 240-41-11-133

Philadelphia
MCPHU/Hahnemann University Hospital Program
Hahnemann University Hospital
Veterans Affairs Medical Center (Wilkes-Barre)
Program Director:
Elliott B Werner, MD
Hahnemann University
Broad & Vine Sts
Mail Stop 209
Philadelphia, PA 19102-1192
215-448-1863
Length: 3 Year(s) Total Positions: 9
Program ID: 240-41-21-134

Temple University Program
Temple University Hospital
Lankenau Hospital
The Medical Center of Delaware
Program Director:
Stephen Wong, MD
Department of Ophthalmology
Temple University School of Med
Broad & Logan Sts
930 W Hunting Park Ave
Philadelphia, PA 19140
215-707-4998
Length: 3 Year(s) Total Positions: 9
Program ID: 240-41-21-164

Thomas Jefferson University Program
Wills Eye Hospital
Program Director:
John B Jeffers, MD
Wills Eye Hospital
500 Walnut St
Philadelphia, PA 19107-5598
215-440-3157
Length: 3 Year(s) Total Positions: 32
Program ID: 240-41-11-137

University of Pennsylvania Program
Hospital of the University of Pennsylvania
Presbyterian Medical Center of Philadelphia
Scheie Eye Institute
University of Pennsylvania School of Medicine
Veterans Affairs Medical Center (Philadelphia)
Program Director:
Stuart I Fine, MD
Scheie Eye Institute
61 N 36th St
Philadelphia, PA 19104
215-662-8657
Length: 3 Year(s) Total Positions: 15
Program ID: 240-41-21-138

Pittsburgh
St Francis Medical Center Program
St Francis Medical Center
Allegheny General Hospital
Program Director:
John C Barber, MD
St Francis Medical Center
Medical Education Office
400 46th St
Pittsburgh, PA 15201
412-622-4889
Length: 3 Year(s) Total Positions: 6
Program ID: 240-41-21-139

University Health Center of Pittsburgh Program
University Health Center of Pittsburgh
Montefiore University Hospital (UPMC)
Veterans Affairs Medical Center (Pittsburgh)
Program Director:
Jerold S Gordon, MD
The Eye & Ear Institute
200 Lothrop St Ste H
Pittsburgh, PA 15213
412-647-2555
Length: 3 Year(s) Total Positions: 18
Program ID: 240-41-21-190

Puerto Rico
San Juan
University of Puerto Rico Program
University of Puerto Rico School of Medicine
San Juan City Hospital
University Hospital
Veterans Affairs Medical Center (San Juan)
Program Director:
William Townsend, MD
University of Puerto Rico School of Medicine
GPO Box 380
San Juan, PR 00936
809-756-7000
Length: 3 Year(s) Total Positions: 15
Program ID: 240-42-21-141

Rhode Island
Providence
Rhode Island Hospital Program
Rhode Island Hospital
Veterans Affairs Medical Center (Providence)
Program Director:
King W To, MD
Rhode Island Hospital
593 Eddy St APO: J-744
Providence, RI 02903
401-444-8887
Length: 3 Year(s) Total Positions: 6
Program ID: 240-43-11-142

* Updated information not provided.

Graduate Medical Education Directory 585
Accredited Programs in Ophthalmology

South Carolina
Charleston
Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
MUSC Medical Center
Veterans Affairs Medical Center (Charleston)
Program Director:
M. Edward Wilson, MD
Dept of Ophthalmology
Medical Univ of South Carolina
171 Ashley Ave
Charleston, SC 29425-2296
803 792-8864
Length: 3 Year(s) Total Positions: 16
Program ID: 240-45-21-143

Columbia
Richland Memorial Hospital-University of South Carolina School of Medicine Program
Richland Memorial Hospital-Univ of South Carolina Sch of Med
Williams Jennings Bryan Dorn Veterans Hospital
Program Director:
Leslie A. Okunowsky, MD
Richland Memorial Hospital-University of South Carolina
Dept of Ophthalmology
4 Richland Med Pk Ste 100
Columbia, SC 29205
803 794-4388
Length: 4 Year(s) Total Positions: 9
Program ID: 240-45-21-163

Tennessee
Chattanooga
University of Tennessee College of Medicine at Chattanooga Program
University of Tennessee College of Medicine-Chattanooga
Erlanger Medical Center
TC Thompson Children's Hospital Medical Center
Willis D Eye Center
Program Director:
H M Lawrence, MD
Chattanooga Univ-Univ of Tennessee College of Medicine
Dept of Ophthalmology
976 E Third St
Chattanooga, TN 37403
423 777-6163
Length: 3 Year(s) Total Positions: 6
Program ID: 240-45-71-144

Memphis
University of Tennessee Program
University of Tennessee College of Medicine
Methodist Hospital-Central Unit
Regional Medical Center at Memphis
Veterans Affairs Medical Center (Memphis)
Program Director:
Richard D Drewery Jr, MD
Univ of Tennessee Memphis
Dept of Ophthalmology
866 Court Ave Ste D228
Memphis, TN 38163
901 448-5885
Length: 3 Year(s) Total Positions: 12
Program ID: 240-45-71-145

Nashville
Vanderbilt University Program
Vanderbilt University Medical Center
Veterans Affairs Medical Center (Nashville)
Program Director:
Dennis M O'Day, MD
Vanderbilt University School of Medicine
Dept of Ophthalmology & Vis Sci
8000 Medical Center E
Nashville, TN 37232-8808
615 936-1461
Length: 3 Year(s) Total Positions: 12
Program ID: 240-47-31-147

Texas
Dallas
University of Texas Southwestern Medical School Program
University of Texas Southwestern Medical School
Dallas County Hospital District-Parkland Memorial Hospital
Veterans Affairs Medical Center (Dallas)
Program Director:
David R Wiskley Jr, MD
Univ of Texas Southwestern Medical School
5323 Harry Hines Blvd
Dallas, TX 75390-8507
214 648-3807
Length: 3 Year(s) Total Positions: 23
Program ID: 240-48-21-148

Fort Sam Houston
Brooke Army Medical Center Program
Brooke Army Medical Center
Program Director:
Benjamin Chaco, MD
Brooke Army Medical Center
HSHE-SDU-2Bldg 2976
1950 Stanley Rd
Fort Sam Houston, TX 78234-5051
210 816-9246
Length: 3 Year(s) Total Positions: 6
Program ID: 240-48-21-066

Galveston
University of Texas Medical Branch Hospitals Program
University of Texas Medical Branch Hospitals
Program Director:
Stefan D Thomsen, MD
University of Texas Medical Branch
591 University Blvd
Galveston, TX 77556-0787
409 713-2163
Length: 3 Year(s) Total Positions: 12
Program ID: 240-48-21-149

Houston
Baylor College of Medicine Program
Baylor College of Medicine
Harris County Hospital District-Ben Taub General Hospital
Methodist Hospital
Veterans Affairs Medical Center (Houston)
Program Director:
Evaglia D Koch, MD
Baylor College of Medicine Dept of Ophthalmology
6501 Fannin ST 300
Houston, TX 77030
713 798-5845
Length: 3 Year(s) Total Positions: 18
Program ID: 240-49-21-150

University of Texas at Houston Program
University of Texas Medical School at Houston
Hermann Hospital
Program Director:
Richard S Ruiz, MD
Hermann Eye Center
6411 Fannin 7th Floor
Houston, TX 77030-1697
713 704-1777
Length: 3 Year(s) Total Positions: 9
Program ID: 240-49-21-151

Lackland AFB
Wilford Hall USAF Medical Center Program
Wilford Hall USAF Medical Center (SG)
Program Director:
Joseph S Weisman, MD
Wilford Hall Medical Center
Dept of Ophthalmalogy/FSSE
2200 Bergquist Dr Ste 1
Lackland AFB, TX 78236-5300
210 679-5014
Length: 3 Year(s) Total Positions: 9
Program ID: 240-48-11-061

Lubbock
Texas Tech University (Lubbock) Program
Texas Tech University Health Sciences Center at Lubbock
University Medical Center
Veterans Affairs Medical Center (Big Spring)
Program Director:
David L McCartney, MD
Thompson Hall
Dept of Ophthalmalogy
Texas Tech Health Science Center
Lubbock, TX 79430
806 743-2400
Length: 3 Year(s) Total Positions: 11
Program ID: 240-48-21-152

San Antonio
University of Texas Health Science Center at San Antonio Program
University of Texas Medical School at San Antonio
Audie L Murphy Memorial Veterans Hospital (San Antonio)
University Health System-Downtown
University Hospital-South Texas Medical Center
Program Director:
Richard J van Hove, MD
University of Texas Health Science Center
Dept of Ophthalmology
7070 Floyd Curl Dr
San Antonio, TX 78284-0230
210 567-8407
Length: 3 Year(s) Total Positions: 13
Program ID: 240-49-21-153

* Updated information not provided.

586 Graduate Medical Education Directory
Temple
Texas A&M College of Medicine-Scott and White Program
Scott and White Memorial Hospital
Olin E Teague Veterans Center
Program Director:
J Paul Dieckert, MD
Texas A&M-Scott and White Graduate Medical Education
2401 S 31st St
Temple, TX 76508-0001
800 389-4463
Length: 3 Year(s)  Total Positions: 5
Program ID: 240-48-21-154

Richmond
Medical College of Virginia/Virginia Commonwealth University Program
Medical College of Virginia/Virginia Commonwealth University
Hunters Holmes McGuire VA Medical Center (Richmond)
Medical College of Virginia Hospitals
Program Director:
Michael S Weinberg, MD
MCV/Virginia Commonwealth Univ
PO Box 980262
Richmond, VA 23298-0242
804 822-9679
Length: 3 Year(s)  Total Positions: 12
Program ID: 240-51-21-185

Utah
Salt Lake City
University of Utah Program
University of Utah Medical Center
Veterans Affairs Medical Center (Salt Lake City)
Program Director:
Randall J Olson, MD
John A Moran Eye Center
Department of Ophthalmology
50 N Medical Dr
Salt Lake City, UT 84132
801 581-6564
Length: 3 Year(s)  Total Positions: 6
Program ID: 240-49-21-185

Virginia
Charlottesville
University of Virginia Program
University of Virginia Medical Center
Program Director:
Stephen V Scoper, MD
University of Virginia Health Sciences Center
Dept of Ophthalmology
Box 475
Charlottesville, VA 22908
804 924-5563
Length: 3 Year(s)  Total Positions: 9
Program ID: 240-51-21-158

Washington
Seattle
University of Washington Program
University of Washington School of Medicine
Children's Hospital and Medical Center
Harcourt Medical Center
University of Washington Medical Center
Veterans Affairs Medical Center (Seattle)
Program Director:
Robert E Kalina, MD
University of Washington School of Medicine
Dept of Ophthalmology R-3-10
Seattle, WA 98195-0001
206 616-3883
Length: 3 Year(s)  Total Positions: 11
Program ID: 240-54-21-189

Tacoma
Madigan Army Medical Center Program
Madigan Army Medical Center
Program Director:
Thomas H Nader, MD
Madigan Army Medical Center
Attn: HUSM-50U
Ophthalmology Service
Tacoma, WA 98431-5000
256 688-1770
Length: 3 Year(s)  Total Positions: 2
Program ID: 240-54-21-175

Norfolk
Eastern Virginia Graduate School of Medicine Program
Eastern Virginia Graduate School of Medicine
Southeastern Virginia General Hospital
Veterans Affairs Medical Center (Hampton)
Program Director:
Barry S Cook Jr, MD
Eastern Virginia Medical School
300 Contemplative Rd Ste 2500
Norfolk, VA 23507-8331
804 461-0050
Length: 3 Year(s)  Total Positions: 6
Program ID: 240-51-21-187

West Virginia
Morgantown
West Virginia University Program
West Virginia University Hospitals
Louis A Johnson Veterans Affairs Medical Center
Program Director:
Julie J Charlisten, MD
West Virginia University Hospital
Dept of Ophthalmology
Morgantown, WV 26506
304 293-3571
Length: 4 Year(s)  Total Positions: 6
Program ID: 240-55-21-165

Wisconsin
Madison
University of Wisconsin Program
University of Wisconsin Hospital and Clinics
William S Middleton Veterans Hospital
Program Director:
Todd W Perkins, MD
University of Wisconsin
Ophthalmology Dept
2880 University Ave Rm 542
Madison, WI 53705-3831
608 254-5779
Length: 3 Year(s)  Total Positions: 20
Program ID: 240-56-21-161

Milwaukee
Medical College of Wisconsin Program
Medical College of Wisconsin Affiliated Hospitals Inc
Clement J Zablocki Veterans Affairs Medical Center
John J Diogue Hospital
Program Director:
Kenneth Simons, MD
Milwaukee County Medical Complex
8700 W Wisconsin Ave
Milwaukee, WI 53226
414 257-5874
Length: 3 Year(s)  Total Positions: 22
Program ID: 240-56-21-162

* Updated information nec provided.
Orthopaedic Surgery

**Alabama**

**Birmingham**

**University of Alabama Medical Center Program**

University of Alabama Hospital
Children's Hospital of Alabama
Cooper Green Hospital

Veterans Affairs Medical Center (Birmingham)

*Program Director:* John Cuckier, MD
Division of Orthopaedic Surgery
1813 6th Ave S
Birmingham, AL 35233-2316

**Length:** 5 Year(s)  Total Positions: 16 (GYT: 0)

**Subspecialties:** HSO, OSM

*Program ID:* 260-01-21-044

**Mobile**

**University of South Alabama Program**

University of South Alabama Medical Center
Children's Hospital of Alabama

USA Doctors Hospital

*Program Director:* Angela M McElroy, Jr, MD
Univ of South Alabama Med Ctr
2451 Pillingin St
Mobile, AL 36617

**Length:** 5 Year(s)  Total Positions: 11 (GYT: 2)

*Program ID:* 260-01-11-182

**Arizona**

**Phoenix**

**Maricopa Medical Center Program**

Maricopa Medical Center
Carl T Hayden Veterans Affairs Medical Center (Phoenix)
Children's Rehabilitative Services
Harlington Arrtisitic Research Center

*Program Director:* Robert R Karpman, MD MBA
Maricopa Medical Center
2601 E Roosevelt
Phoenix, AZ 85008

**Length:** 5 Year(s)  Total Positions: 18 (GYT: 5)

**Subspecialties:** HSO

*Program ID:* 260-08-22-273

**Tucson**

**University of Arizona Program**

University of Arizona College of Medicine
Tucson Medical Center
University Medical Center
Veterans Affairs Medical Center (Tucson)

*Program Director:* James B Benjamin, MD
Arizona Health Sciences Center
Section of Orthopaedic Surgery
1501 N Campbell Ave
Tucson, AZ 85724

**Length:** 5 Year(s)  Total Positions: 10 (GYT: 2)

*Program ID:* 260-03-31-084

*Updated information not provided.*

**Arkansas**

**Little Rock**

**University of Arkansas for Medical Sciences Program**

University of Arkansas College of Medicine
Arkansas Children's Hospital

*Program Director:* Karl L Nelson, MD
University of Arkansas for Medical Sciences
4901 W Markham
Little Rock, AR 72205

**Length:** 5 Year(s)  Total Positions: 20 (GYT: 4)

*Program ID:* 260-04-21-084

**California**

**Loma Linda**

**Loma Linda University Program**

Loma Linda University Medical Center

*Program Director:* William H Egan, MD
Loma Linda University Medical Center
Dept of Orthopaedic Surgery Rm A530
11234 Anderson St
Loma Linda, CA 92354
909 824-4413

**Length:** 5 Year(s)  Total Positions: 19 (GYT: 4)

**Subspecialties:** HSO

*Program ID:* 260-06-21-063

**Los Angeles**

**Charles R Drew University Program**

Charles R Drew University of Medicine and Science

*Program Director:* Clarence Woods, MD
Martin Luther King Jr-Drew Medical Center
12021 S Wilmington Ave
Los Angeles, CA 90059

**Length:** 5 Year(s)  Total Positions: 10 (GYT: 0)

*Program ID:* 260-06-22-209

**UCLA Medical Center Program**

UCLA School of Medicine

*Program Director:* Joseph M Lane, MD
UCLA School of Medicine
Dept of Orthopaedic Surgery
Rm 76-134
Los Angeles, CA 90024-8002

**Length:** 5 Year(s)  Total Positions: 20 (GYT: 6)

*Program ID:* 260-06-21-078

**University of Southern California Program**

Los Angeles County-USC Medical Center
Children's Hospital of Los Angeles
LAC-Rancho Los Amigos Medical Center
Orthopaedic Hospital

USC University Hospital

*Program Director:* Michael J Marzulli, MD
LAC Orthopaedic Residency Program
2025 Zonal Ave COE 3800
Los Angeles, CA 90033

**Length:** 5 Year(s)  Total Positions: 38 (GYT: 12)

**Subspecialties:** HSO

*Program ID:* 260-06-21-193

**Oakland**

**Naval Hospital (Oakland) Program**

Naval Hospital (Oakland)

Shriners Hospital for Crippled Children (San Francisco)

*Program Director:* Capt A Herbert Alexander, MD
Naval Hospital Oakland
Dept of Orthopaedic Surgery
Oakland, CA 94627-6090

510 633-5047

**Length:** 4 Year(s) (GYT: 0)

*Program ID:* 260-04-11-020

**Orange**

**University of California (Irvine) Program**

University of California (Irvine) Medical Center

*Program Director:* Harry B Skinner, MD
University of California (Irvine) Medical Center
Dept of Orthopaedic Surgery
101 City Dr S
Orange, CA 92668

714 456-5754

**Length:** 4 Year(s)  Total Positions: 16 (GYT: 0)

*Program ID:* 260-06-21-064

**Sacramento**

**University of California (Davis) Program**

University of California (Davis) Medical Center
Kaiser Foundation Hospital (Sacramento)

*Program Director:* Michael W Chapman, MD
University of California (Davis) Medical Center
Dept of Orthopaedics
2200 Stockton Blvd
Sacramento, CA 95817

916 734-2709

**Length:** 5 Year(s)  Total Positions: 21 (GYT: 4)

**Subspecialties:** HSO

*Program ID:* 260-06-21-193

**San Diego**

**Naval Medical Center (San Diego) Program**

Naval Medical Center (San Diego)

*Program Director:* Gregory R Mack, MD
Naval Hospital
Dept of Orthopaedic Surgery
San Diego, CA 92134

619 532-8426

**Length:** 4 Year(s)

*Program ID:* 260-06-31-079

Graduate Medical Education Directory
University of California (San Diego) Program
University of California (San Diego) Medical Center
Children’s Hospital and Health Center
Veterans Affairs Medical Center (San Diego)
Program Director:
Wayne H Alexson, MD
Univ of California San Diego Dept of Orthopedics
Business Office
9600 Gilman Dr #0022
La Jolla, CA 92036-0022
619 534-6112
Length: 4 Year(s) Total Positions: 16 (GY: 0)
Subspecialties: HS0
Program ID: 260-05-21-109

San Francisco
San Francisco Program*
St Mary’s Hospital and Medical Center
Highland General Hospital
Kaiser Foundation Hospital (San Francisco)
Seton Medical Center
Program Director:
Garnet P Wynne, MD
St Mary’s Hospital and Medical Center
450 Sutter St
San Francisco, CA 94117-1110
209 766-7672
Length: 5 Year(s) Total Positions: 14 (FY: 0)
Program ID: 260-05-22-108

University of California (San Francisco) Program
University of California (San Francisco) School of Medicine
California Pacific Medical Center (Pacific Campus)
Children’s Hospital Medical Center of Northern California
Highland General Hospital
San Francisco General Hospital Medical Center
Shriners Hospital for Crippled Children (San Francisco)
University of California (San Francisco) Medical Center
Veterans Affairs Medical Center (San Francisco)
Program Director:
David S Bradford, MD
University of California San Francisco
Dept of Orthopaedic Surgery
500 Parnassus MUS302W
San Francisco, CA 94143-0728
415 476-2280
Length: 5 Year(s) Total Positions: 36 (GY: 6)
Subspecialties: HS0
Program ID: 260-05-21-002

Torrance
Los Angeles County-Harbor-UCLA Medical Center Program
Los Angeles County-Harbor-UCLA Medical Center
Program Director:
Daniel M Zinar, MD
Los Angeles County-Harbor-UCLA Medical Center
1000 W Carson St
Torrance, CA 90060
310 222-2715
Length: 5 Year(s) Total Positions: 15 (GY: 5)
Program ID: 260-05-31-122

Colorado
Aurora
Fitzsimons Army Medical Center Program
Fitzsimons Army Medical Center
Children’s Hospital
Program Director:
Edward J Lisecki, Jr, MD
Fitzsimons Army Medical Center
Orthopedic Surgery Service
Aurora, CO 80045-5001
303 348-6561
Length: 4 Year(s) Total Positions: 12 (FY: 0)
Program ID: 260-07-23-091

Denver
University of Colorado Program*
University of Colorado Health Sciences Center
Children’s Hospital
Denver Health and Hospitals
Veterans Affairs Medical Center (Denver)
Program Director:
R C Fisher, MD
University of Colorado Health Science Center
4200 E 9th Ave
UCHSC Container B802
Denver, CO 80262
303 270-7647
Length: 4 Year(s) Total Positions: 20 (GY: 4)
Subspecialties: G3M
Program ID: 260-07-21-004

Connecticut
Farmington
University of Connecticut Program
University of Connecticut School of Medicine
Hartford Hospital
Newington Children’s Hospital
St Francis Hospital and Medical Center
Univ of Connecticut Health Center/John Dempsey Hospital
Program Director:
Bruce Browner, MD
University of Connecticut Health Center
Dept of Orthopedics
10 Tahoclip Road PO Box 6267
Farmington, CT 06032-6407
Length: 4 Year(s) Total Positions: 16 (GY: 5)
Subspecialties: HS0,G3M
Program ID: 260-08-21-172

New Haven
Yale-New Haven Medical Center Program
Yale-New Haven Hospital
Hospital of St Raphael
Veterans Affairs Medical Center (West Haven)
Program Director:
Gary E Priebe, M.D.
Yale University School of Medicine
Dept of Orthopaedics & Rehab
69 Park St
New Haven, CT 06520-3071
203 785-2582
Length: 4 Year(s) Total Positions: 20 (GY: 0)
Program ID: 260-08-21-005

District of Columbia
Washington
George Washington University Program
George Washington University School of Medicine
Children’s National Medical Center
Fairfax Hospital
George Washington University Hospital
Washington Hospital Center
Program Director:
Robert J Neihauser, MD
George Washington University Dept of Orthopedic Surgery
5150 Pennsylvania Ave NW
Washington, DC 20037
202 994-4386
Length: 4 Year(s) Total Positions: 15 (GY: 0)
Subspecialties: G3M
Program ID: 260-10-21-143

Georgetown University Program
Georgetown University Hospital
Arlington Hospital
Sidley Memorial Hospital
Program Director:
Sam W Weisel, MD
Georgetown University Hospital
Dept of Orthopaedic Surgery
3860 Reservoir Rd NW
Washington, DC 20007-2197
202 687-8766
Length: 5 Year(s) Total Positions: 15 (GY: 5)
Subspecialties: G3M
Program ID: 260-10-21-014

Howard University Program*
Howard University Hospital
Children’s National Medical Center
District of Columbia General Hospital
Providence Hospital
Veterans Affairs Medical Center (Washington DC)
Program Director:
Richard E Grant, MD
Howard University Hospital
Div of Orthopaedic Surgery
3043 Georgia Ave NW
Washington, DC 20060
202 865-1182
Length: 4 Year(s) Total Positions: 17 (GY: 0)
Program ID: 260-10-21-115

* Updated information not provided.

Graduate Medical Education Directory
Accredited Programs in Orthopaedic Surgery

Florida
Gainesville
University of Florida Program
University of Florida College of Medicine
Shands Hospital at the University of Florida
Veterans Affairs Medical Center (Gainseville)
Program Director: William Pety, MD
University of Florida College of Medicine
Department of Orthopaedics
PO Box 002546. JHMHC
Gainseville, FL 32610-0246
004 549-855
Length: 5 Year(s) Total Positions: 15 (GY: 3)
Subspecialties: OAR, OMS, OVS
Program ID: 260-11-11-123

Jacksonville
University of Florida Health Science Center/ Jacksonville Program
University Medical Center (UFHSC/J)
Nemours Children’s Clinic (UFHSC/J)
Program Director: James M Perry, MD
University of Florida Health Science Center/Jacksonville
653 II W 8th St
Jacksonville, FL 32209
004 549-855
Length: 4 Year(s) Total Positions: 8 (GY: 6)
Subspecialties: OP
Program ID: 260-11-11-062

Miami
University of Miami-Jackson Memorial Medical Center Program
University of Miami-Jackson Memorial Medical Center
Doctor’s Hospital
Veterans Affairs Medical Center (Miami)
Program Director: Frank J Esmann, MD
University of Miami School of Medicine
Dept of Orthopaedics & Rehab
PO Box 06660 D-27
Miami, FL 33101
305 586-7138
Length: 4 Year(s) Total Positions: 30 (GY: 6)
Subspecialties: OSS
Program ID: 260-11-11-076

Orlando
Orlando Regional Healthcare System Program
Orlando Regional Medical Center
Florida Elks Children's Hospital
Program Director: John F Connolly, MD
Orlando Regional Healthcare System
1414 Kahal Ave
Orlando, FL 32806
407 448-8888
Length: 5 Year(s) Total Positions: 11 (GY: 2)
Program ID: 260-11-22-184

Georgia
Atlanta
Emory University Program
Emory University School of Medicine
Crawford Long Hospital of Emory University
Emory University Hospital
Grady Memorial Hospital
Hendrietta Egleson Hospital for Children
Scottish Rite Children's Medical Center (Atlanta)
Veterans Affairs Medical Center (Atlanta)
Program Director: John Gray SeilerIII, MD
Grady Memorial Hospital
30 Butler St SW Ste 602
Atlanta, GA 30303
404 366-4475
Length: 5 Year(s) Total Positions: 25 (GY: 5)
Program ID: 260-12-21-039

Georgie Baptist Medical Center Program
Georgia Baptist Medical Center
Scottish Rite Children's Medical Center
Program Director: John A Ogden, MD
Dept of Medical Education
303 Parkway Dr NE
PO Box 423
Atlanta, GA 30312
404 365-4600
Length: 5 Year(s) Total Positions: 15 (GY: 9)
Program ID: 260-12-22-113

Augusta
Medical College of Georgia Program
Medical College of Georgia Hospital and Clinics
Veterans Affairs Medical Center (Augusta)
Program Director: Monroe I Levine, MD
Medical College of Georgia
Orthopaedic Surgery
Augusta, GA 30912-4030
706 721-2345
Length: 5 Year(s) Total Positions: 12 (GY: 3)
Program ID: 260-12-21-114

Hawaii
Honolulu
University of Hawaii Program
University of Hawaii John A Burns School of Medicine
LAC-Rancho Los Amigos Medical Center
Queen's Medical Center
Shriners Hospital for Crippled Children (Honolulu)
Tripler Army Medical Center
Program Director: James R Doyle, MD
University of Hawaii John A Burns School of Medicine
1366 Lunalima St Ste 614
Honolulu, HI 96813-2478
808 548-4581
Length: 4 Year(s) Total Positions: 8 (GY: 0)
Subspecialties: OP
Program ID: 260-14-21-008

Triflcer AMC
Tripler Army Medical Center Program
Tripler Army Medical Center
Program Director: Gregg W Taylor, MD
Tripler Army Medical Center
Orthopaedic Surgery Service
Honolulu, HI 96859-5000
808 433-6727
Length: 4 Year(s) Total Positions: 12 (GY: 0)
Program ID: 260-14-21-006

Illinois
Chicago
McGaw Medical Center of Northwestern University Program
Northwestern University Medical School
Children's Memorial Medical Center
Cook County Hospital
Barnes Hospital
Lutheran General Hospital
Northwestern Memorial Hospital
Veterans Affairs Lakeside Medical Center (Chicago)
Program Director: Michael P Schaefer, MD
Northwestern University Medical School
Dept of Orthopaedics
303 E Chicago Ave 99-894
Chicago, IL 60611-3900
312 698-7073
Length: 5 Year(s) Total Positions: 45 (GY: 9)
Program ID: 260-16-21-007

Rush Medical College Program
Rush-Presbyterian-St Luke's Medical Center
Rush University Medical Center
Shriners Hospital for Crippled Children (Chicago)
Program Director: Ken N Kuo, MD
Rush-Presbyterian-St Luke's Medical Center
1653 W Congress Pkwy
Chicago, IL 60612
312 945-8660
Length: 5 Year(s) Total Positions: 21 (GY: 4)
Subspecialties: OSS, OVS
Program ID: 260-16-31-174

* Updated information not provided.
### University of Chicago Program
**University of Chicago Hospitals**

**Program Director:**
Michael A Simon, MD
University of Chicago Hospitals
641 S Maryland Ave MC3079
Chicago, IL 60637-1470
312-702-6144

**Length:** 5 Year(s)  
**Total Positions:** 15  **(GYI: 3)**

**Subspecialties:** HSO, OSS

**Program ID:** 200-16-21-136

### University of Illinois College of Medicine at Chicago Program
**University of Illinois College of Medicine at Chicago**

**Cock County Hospital**

Michael Reese Hospital and Medical Center
Ravenwood Hospital Medical Center
Shriners Hospital for Crippled Children (Chicago)
University of Illinois Hospital and Clinics
Veterans Affairs Westside Medical Center (Chicago)

**Program Director:**
Riad Barmada, MD
University of Illinois Hospital
Dept of Orthopaedics
Ortho 206 Box 6808 M/C 844
Chicago, IL 60680
312-966-7100

**Length:** 5 Year(s)  
**Total Positions:** 35  **(GYI: 7)**

**Program ID:** 200-16-21-047

### Maywood
**Loyola University Program**

Foster G McGaw Hospital-Loyola University of Chicago
Edward J Hines Jr Veterans Affairs Hospital
Shriners Hospital for Crippled Children (Chicago)

**Program Director:**
Terry B Light, MD
Loyola University Medical Center
2160 S First Ave
Bldg 54
Maywood, IL 60153
708-216-4570

**Length:** 5 Year(s)  
**Total Positions:** 20  **(GYI: 4)**

**Program ID:** 200-16-21-050

### Springfield
**Southern Illinois University Program**

Southern Illinois University School of Medicine
LAC-Rancho Los Amigos Medical Center
Norton Memorial Medical Center
St John's Hospital

**Program Director:**
E Shannon Stautzer, MD
Southern Illinois University School of Medicine
PO Box 10230
Springfield, IL 62794-0230
217-782-8864

**Length:** 5 Year(s)  
**Total Positions:** 15  **(GYI: 3)**

**Subspecialties:** HSO, OSS

**Program ID:** 200-16-21-110

### Indiana
**Fort Wayne**

**Fort Wayne Medical Education Program**
Lutheran Hospital of Indiana
Fort Wayne State Development Center
Parkview Memorial Hospital
St Joseph's Medical Center

**Program Director:**
James G Buchholz, MD
Lutheran Hospital of Indiana Inc
7610 W Jefferson Blvd
Fort Wayne, IN 46804
219-436-7494

**Length:** 4 Year(s)  
**Total Positions:** 8  **(GYI: 0)**

**Program ID:** 200-17-21-199

### Indianapolis
**Indiana University Medical Center Program**

Indiana University Medical Center
Methodist Hospital of Indiana
Richard L. Roudebush Veterans Affairs Medical Center
St Vincent Hospital and Health Care Center
William N Winship Memorial Hospital

**Program Director:**
G Paul De Rosa, MD
Indiana University Medical Center
541 Clinical Dr Bldg 600
Indianapolis, IN 46203-5111
317-274-5650

**Length:** 5 Year(s)  
**Total Positions:** 25  **(GYI: 5)**

**Subspecialties:** HSO

**Program ID:** 200-17-21-008

### Iowa
**Iowa City**

**University of Iowa Hospitals and Clinics Program**
University of Iowa Hospitals and Clinics
Veterans Affairs Medical Center (Iowa City)

**Program Director:**
Reginald B Cooper, MD
University of Iowa Hospitals and Clinics
Dept of Orthopedic Surgery
Iowa City, IA 52245-1000
319 356-3476

**Length:** 5 Year(s)  
**Total Positions:** 25  **(GYI: 5)**

**Subspecialties:** HSO, GP

**Program ID:** 200-18-21-139

### Kansas
**Kansas City**

**University of Kansas Medical Center Program**
University of Kansas School of Medicine
University of Kansas Medical Center
Veterans Affairs Medical Center (Kansas City)

**Program Director:**
Brad Olney, MD
University of Kansas Medical Center
39th & Rainbow Blvd
Kansas City, KS 66210-7387
913 586-6109

**Length:** 5 Year(s)  
**Total Positions:** 12  **(GYI: 0)**

**Program ID:** 200-19-21-140

### Wichita
**University of Kansas (Wichita) Program**
University of Kansas School of Medicine (Wichita)
Shriners Hospital for Crippled Children (St Louis)
St Francis Regional Medical Center
Veterans Affairs Medical Center (Wichita)

**Program Director:**
George L Lucas, MD
University of Kansas School of Medicine (Wichita)
1010 N Kansas
Wichita, KS 67214-3199
316 269-5068

**Length:** 5 Year(s)  
**Total Positions:** 20  **(GYI: 4)**

**Program ID:** 200-19-21-106

### Kentucky
**Lexington**

**University of Kentucky Medical Center Program**
University of Kentucky Medical Center Albert B Chandler Medical Center
Shriners Hospital for Crippled Children (Lexington)
Veterans Affairs Medical Center (Lexington)

**Program Director:**
Herbert Kaofer, MD
University of Kentucky Medical Center Albert B Chandler Medical Center
Kentucky Clinic
Dept of Orthopedic Surgery
Lexington, KY 40504-0284
606 323-5335

**Length:** 5 Year(s)  
**Total Positions:** 12  **(GYI: 3)**

**Program ID:** 200-20-21-059

### Louisville
**University of Louisville Program**
University of Louisville School of Medicine
Jewish Hospital
Kosair Children's Hospital (Alliant Health System)
Methodist Evangelical Hospital
Norton Hospital (Alliant Health System)
University of Louisville Hospital
Veterans Affairs Medical Center (Louisville)

**Program Director:**
John B Johnson, MD
University of Louisville School of Medicine
Dept of Orthopedic Surgery
Louisville, KY 40292
502 852-5310

**Length:** 4 Year(s)  
**Total Positions:** 21  **(GYI: 4)**

**Program ID:** 200-20-21-009

### Louisiana
**New Orleans**

**Alton Ochsner Medical Foundation Program**
Alton Ochsner Medical Foundation
Leonard J Chabert Medical Center
Shriners Hospital for Crippled Children (Shreveport)

**Program Director:**
Michael R Wilson, MD
Alton Ochsner Medical Foundation
Dept of Graduate Medical Education
1516 Jefferson Hwy
New Orleans, LA 70121
504 842-3170

**Length:** 5 Year(s)  
**Total Positions:** 10  **(GYI: 2)**

**Program ID:** 200-21-23-056
Accredited Programs in Orthopaedic Surgery

Louisiana State University Program
Louisiana State University School of Medicine
Children's Hospital
Earl K. Long Medical Center
Medical Center of Louisiana at New Orleans-LSU Division
Medical Center of Louisiana University Hospital Campus
University Medical Center (Lafayette)
Program Director: Robert D'Orefice, MD
Louisiana State University Medical Center
2035 Gravier St
New Orleans, LA 70112-2922
504 568-6860
Length: 5 Year(s) Total Positions: 8 (GYI: 4)
Subspecialties: OP/OSM
Program ID: 260-21-154

Tulane University Program
Tulane University School of Medicine
Children's Hospital
Huey P. Long Regional Medical Center
Huguelet Sports Medicine Hospital
Medical Center of Louisiana at New Orleans-Tulane Division
Shriners Hospital for Crippled Children (Tampa)
Tulane University Hospital and Clinics
Veterans Affairs Medical Center (Alexandria)
Veterans Affairs Medical Center-Tulane Service (New Orleans)
Program Director: Robert J. Barrack, MD
Tulane University School of Medicine
439 Tulane Ave
Dept of Orthopaedic Surgery
New Orleans, LA 70112
504 867-2016
Length: 4 Year(s) Total Positions: 18 (GYI: 0)
Subspecialties: OSM
Program ID: 260-21-010

Shreveport
Louisiana State University (Shreveport) Program
Louisiana State University School of Medicine
Children's Hospital
Medical Education - Orthopaedics
1501 Kings Hwy PO Box 3832
Shreveport, LA 71130-3832
318 675-6180
Length: 5 Year(s) Total Positions: 15 (GYI: 3)
Program ID: 260-21-043

Maryland
Baltimore
Johns Hopkins University Program
Johns Hopkins University School of Medicine
Children's Hospital and Center for Reconstructive Surgery
Good Samaritan Hospital of Maryland
Johns Hopkins Bayview Medical Center
Johns Hopkins Hospital
Program Director: Richard N. Strauss, MD
Johns Hopkins Hospital Department of Orthopaedic Surgery
555 N. Charles St
Baltimore, MD 21201
410 955-9390
Length: 5 Year(s) Total Positions: 26 (GYI: 5)
Subspecialties: OSM
Program ID: 260-23-015

Union Memorial Hospital Program
Union Memorial Hospital
Children's Hospital and Center for Reconstructive Surgery
Johns Hopkins Bayview Medical Center
Johns Hopkins Hospital
Program Director: Leslie S. Matthews, MD
Union Memorial Hospital
3333 N Calvert St Ste 400
Baltimore, MD 21218
410 554-2857
Length: 4 Year(s) Total Positions: 6 (GYI: 0)
Subspecialties: OSM
Program ID: 260-23-018

University of Maryland Program
University of Maryland Medical System
James Lawrence Kernan Hospital
St. Agnes Hospital of the City of Baltimore
Program Director: John C. Kershner, MD
University of Maryland Medical System
Div of Orthopedic Surgery
22 E. Greene St
Baltimore, MD 21201
410 328-8040
Length: 4 Year(s) Total Positions: 16 (GYI: 4)
Program ID: 260-23-068

Bethesda
National Naval Medical Center (Bethesda) Program
National Naval Medical Center (Bethesda)
Program Director: Frederick G. Lippert, MD
Frederick G. Lippert, MD
National Naval Medical Center
Dept of Orthopedics
Bethesda, MD 20888-5000
301 295-4315
Length: 4 Year(s) Total Positions: 13 (GYI: 0)
Program ID: 260-23-21-13

Massachusetts
Boston
Boston University Program
Boston University Medical Center-University Hospital
Baystate Medical Center
Boston City Hospital
Labey Clinic
Shriners Hospital for Crippled Children (Springfield)
Program Director: L. Andrew G. Westphal, MD
Boston University Medical Center Dept of Orthopedic Surgery
88 E. Newton St
Boston, MA 02118
617 638-5603
Length: 4 Year(s) Total Positions: 20 (GYI: 4)
Program ID: 260-23-01-06

Harvard Medical School Program
Massachusetts General Hospital
Beth Israel Hospital
Brigham and Women's Hospital
Brookline-West Roxbury Veterans Affairs Medical Center
Children's Hospital
Program Director: Henry J. Mankin, MD
Massachusetts General Hospital
Dept of Orthopedic Surgery
Gray Bldg 606
Boston, MA 02114
617 726-6426
Length: 5 Year(s) Total Positions: 10 (GYI: 0)
Subspecialties: OSM
Program ID: 260-23-18-05

Tufts University Program
New England Medical Center Hospitals
New England Baptist Hospital
Newton-Wellesley Hospital
Veterans Affairs Medical Center (Boston)
Program Director: Michael J. Goldberg, MD
New England Medical Center Hospitals
Department of Orthopaedics
720 Washington St Ste 202
Boston, MA 02111
617 258-5180
Length: 5 Year(s) Total Positions: 24 (GYI: 0)
Subspecialties: OSM
Program ID: 260-23-21-013

Worcester
University of Massachusetts Medical Center Program
University of Massachusetts Medical Center
Medical Center of Central Massachusetts
St. Vincent Hospital
Program Director: Arthur M. Pappas, MD
University of Massachusetts Medical Center
55 Lake Ave N
Worcester, MA 01655
508 856-2187
Length: 4 Year(s) Total Positions: 16 (GYI: 0)
Subspecialties: OSM
Program ID: 260-23-21-170

Michigan
Ann Arbor
University of Michigan Program
University of Michigan Hospitals
St. Joseph Mercy Hospital (Catherine McAuley Health System)
Veterans Affairs Medical Center (Ann Arbor)
Program Director: Larry S. Matthews, MD
University of Michigan Hospitals
3333 N. Calvert St Ste 400
Baltimore, MD 21218
410 638-8040
Length: 5 Year(s) Total Positions: 30 (GYI: 6)
Program ID: 260-23-18-06

*Updated information not provided.
Detroit
Grace Hospital Program
Grace Hospital
Providences Hospital
Shriners Hospital for Crippled Children (Erie)
Sinaal Hospital
Program Director:
Maurice E. Cudahy, MD
Metropolitan NW Detroit Hospitals
Grace Hospital Orthopedics Dept
6071 W Outer Dr
Detroit, MI 48215
313 896-4700
Length: 5 Year(s) Total Positions: 15 (GYT: 3)
Program ID: 260-25-21-177

Henry Ford Hospital Program
Henry Ford Hospital
Program Director:
Eric L. Adam, MD
Henry Ford Hospital
Orthopedic Surgery
2700 W Grand Blvd
Detroit, MI 48202
313 586-3850
Length: 5 Year(s) Total Positions: 30 (GYT: 6)
Subspecialties: ORT
Program ID: 240-25-11-114

Wayne State University/Detroit Medical Center Program
Wayne State University School of Medicine
Children's Hospital of Michigan
Detroit Receiving Hospital and University Health Center
Hutzel Hospital
Veterans Affairs Medical Center (Allen Park)
Program Director:
Robert H. Fitzgerald, Jr, MD
Hutzel Hospital 1 South
4707 St Antoine
Detroit, MI 48201
313 746-8248
Length: 4 Year(s) Total Positions: 26 (GYT: 6)
Subspecialties: OAR,OMO,OSM
Program ID: 260-25-21-012

Flint
McLaren Regional Medical Center Program
McLaren Regional Medical Center
Hurley Medical Center
Michigan State University Clinical Center
Program Director:
Robert E. Wolf, MD
McLaren Regional Medical Center
401 Ballenger Hwy
Flint, MI 48502-3686
313 765-2111
Length: 4 Year(s) Total Positions: 10 (GYT: 2)
Program ID: 260-25-12-488

Grand Rapids
Blodgett Memorial Medical Center Program
Blodgett Memorial Medical Center
Butterworth Hospital
St Mary's Health Services
Program Director:
Alfred S. Swanson, MD
Grand Rapids Orthopaedic Residency Program
Medical Education Office
1400 Wealthy SE
Grand Rapids, MI 49506
616 774-7426
Length: 5 Year(s) Total Positions: 20 (GYT: 4)
Subspecialties: HOS
Program ID: 260-25-21-195

Kalamazoo
Kalamazoo Center for Medical Studies/Michigan State University Program
Kalamazoo Center for Medical Studies
Bronson Medical Center
Bronson Methodist Hospital
Program Director:
E. Dennis Lyon, MD
Kalamazoo Center for Medical Studies/MSU
1000 Oakland Dr
Kalamazoo, MI 49008
616 337-8250
Length: 5 Year(s) Total Positions: 10 (GYT: 2)
Program ID: 260-25-21-126

Royal Oak
William Beaumont Hospital Program
William Beaumont Hospital
Program Director:
George N. Spear, MD
William Beaumont Hospital-MOB
3836 W Thirteen Mile Rd
Ste 604
Royal Oak, MI 48073
586 651-0425
Length: 5 Year(s) Total Positions: 10 (GYT: 2)
Program ID: 260-25-12-176

Minnesota
Minneapolis
University of Minnesota Program
University of Minnesota Medical School
Abbott-Northwestern Hospital
Gillette Children's Hospital
HealthEast County Medical Center
Shriners Hospital for Crippled Children (Twin Cities Unit)
University of Minnesota Hospital and Clinic
Veterans Affairs Medical Center (Minneapolis)
Program Director:
Robby C. Thompson Jr, MD
University of Minnesota Hospital and Clinics
2-5 Delaware St SE
PO Box 6992
Minneapolis, MN 55401-2035
612 626-6200
Length: 5 Year(s) Total Positions: 28 (GYT: 6)
Subspecialties: HSO,OMS
Program ID: 260-26-21-850

Rochester
Mayo Graduate School of Medicine Program
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Rochester)
Rochester Methodist Hospital
St Mary's Hospital of Rochester
Program Director:
Robert H. Costello, MD
Mayo Graduate School of Medicine
MGIIP Application Processing Center
200 First St SW
Rochester, MN 55905
507 284-4331
Length: 5 Year(s) Total Positions: 60 (GYT: 12)
Subspecialties: OAR
Program ID: 260-26-21-121

Mississippi
Jackson
University of Mississippi Medical Center Program
University of Mississippi School of Medicine
University Hospital
Veterans Affairs Medical Center (Jackson)
Program Director:
James L. Hughes, MD
University of Mississippi Medical Center
2000 N State St
Jackson, MS 39216-2005
601 984-5135
Length: 5 Year(s) Total Positions: 10 (GYT: 3)
Subspecialties: HOS
Program ID: 260-27-21-001

Missouri
Columbia
University of Missouri-Columbia Program
University of Missouri-Columbia School of Medicine
AMC Columbia Regional Hospital
Harry S Truman Memorial Veterans Hospital
University and Children's Hospital
Program Director:
Jeffrey O. Anglen, MD
University of Missouri-Columbia Program
One Hospital Dr
Columbia, MD 65212
514 882-7186
Length: 4 Year(s) Total Positions: 12 (GYT: 0)
Program ID: 260-25-21-148

Kansas City
University of Missouri at Kansas City Program
University of Missouri-Kansas City School of Medicine
Children's Mercy Hospital
St Luke's Hospital
Truman Medical Center-West
Program Director:
James J. Hamilton, MD
Truman Medical Center
Dept of Orthopaedic Surgery
2301 Holmes St
Kansas City, MO 64106
816 666-3956
Length: 4 Year(s) Total Positions: 13 (GYT: 0)
Subspecialties: OSM
Program ID: 260-26-21-018

*Updated information not provided.
St Louis
St Louis University Group of Hospitals Program
St Louis University School of Medicine
Cardinal Glennon Children's Hospital
St Louis University Hospital
St Mary's Health Center
Program Director:
Robert E Burdge, MD
St Louis University School of Medicine
3635 Vista at Grand Blvd
PO Box 13920
St Louis, MO 63146
314 577-8550
Length: 4 Year(s) Total Positions: 15 (GYI: 3)
Program ID: 260-28-21-146

Washington University Program
Barnes Hospital
Shriners Hospital for Crippled Children (St Louis)
St Louis Children's Hospital
St Louis Regional Medical Center
Veterans Affairs Medical Center (St Louis)
Program Director:
Paul R Manske, MD
Barnes Hospital
One Barnes Hospital Plaza
Suite 11000
St Louis, MO 63110
314 852-4040
Length: 4 Year(s) Total Positions: 20 (GYI: 0)
Subspecialties: OSS
Program ID: 260-28-21-060

Nebraska
Omaha
University of Nebraska/Creighton University Program
University of Nebraska Medical Center
AMC St Joseph Hospital at Creighton University Medical Center
Veterans Affairs Medical Center (Lincoln)
Veterans Affairs Medical Center (Omaha)
Program Director:
James R Neff, MD
University of Nebraska Medical Center
Dept Orthopaedic Surgery
600 S 42nd St PO Box 801080
Omaha, NE 68108
402 559-3000
Length: 5 Year(s) Total Positions: 15 (GYI: 4)
Program ID: 260-30-21-001

New Hampshire
Lebanon
Dartmouth-Hitchcock Medical Center Program
Mary Hitchcock Memorial Hospital
Newington Children's Hospital
Veterans Affairs Medical Center (White River Junction)
Program Director:
Philip M Bernini, MD
Dartmouth-Hitchcock Medical Center
One Medical Center Dr
Lebanon, NH 03756-0001
603 650-5970
Length: 4 Year(s) Total Positions: 10 (GYI: 2)
Program ID: 260-32-01-082

New Jersey
Long Branch
Monmouth Medical Center Program
Monmouth Medical Center
Children's Hospital of Philadelphia
Program Director:
Angela J Lopano, MD
Monmouth Medical Center
300 Second Ave
Roein 511 Stanley Wing
Long Branch, NJ 07740-9980
908 879-5461
Length: 5 Year(s) Total Positions: 7 (GYI: 1)
Program ID: 260-28-11-146

Newark
UMDNJ-New Jersey Medical School Program
UMDNJ-New Jersey Medical School
Dept of Veterans Affairs Medical Center (East Orange)
Hackensack Medical Center
Hospital Center at Orange
Jersey City Medical Center
Orthopedic Center (United Hospitals Medical Center)
UMDNJ University Hospital
Program Director:
Fred P Behrens, MD
UMDNJ-New Jersey Medical School
Department of Orthopaedics
185 S Orange Ave MB 0574
Newark, NJ 07112-2107
201 932-5350
Length: 4 Year(s) Total Positions: 32 (GYI: 0)
Program ID: 260-28-31-105

Piscataway
UMDNJ-Robert Wood Johnson Medical School Program
UMDNJ-Robert Wood Johnson Medical School
Children's Hospital of Philadelphia
Raritan Bay Medical Center-Perth Amboy Division
St Peter's Medical Center
Program Director:
Joseph P Zapolsky, MD
UMDNJ-Robert Wood Johnson Medical School
One Robert Wood Johnson PM CN19
New Brunswick, NJ 08903-0010
908 255-7668
Length: 4 Year(s) Total Positions: 12 (GYI: 0)
Program ID: 260-33-21-149

South Orange
Seton Hall University School of Graduate Medical Education Program
Seton Hall University School of Graduate Medical Education
St Joseph's Hospital and Medical Center
Program Director:
Vincent K McNerney, MD
St Joseph's Hospital & Medical Center
700 Main St
Paterson, NJ 07503
201 977-2411
Length: 4 Year(s) Total Positions: 5 (GYI: 1)
Program ID: 260-30-15-067

New Mexico
Albuquerque
University of New Mexico Program*
University of New Mexico School of Medicine
Carrie Tingley Hospital
University Hospital
Veterans Affairs Medical Center (Albuquerque)
Program Director:
Mohesh S Moreim, MD
University of New Mexico Medical Center
Dept of Orthopaedic Surgery
Ambulatory Care Center 2 W
Albuquerque, NM 87105-5356
505 272-4107
Length: 5 Year(s) Total Positions: 22 (GYI: 4)
Subspecialties: HOS
Program ID: 260-00-01-093

New York
Albany
Albany Medical Center Program
Albany Medical Center Hospital
Ellis Hospital
St Peter's Hospital
Program Director:
Richard Jacobs, MD
Albany Medical Center
Dept of Orthopaedic Surgery A-61
47 New Scotland Ave RM A300A
Albany, NY 12208-4476
518 262-5219
Length: 5 Year(s) Total Positions: 31 (GYI: 0)
Program ID: 260-35-21-055

Bronx
Albert Einstein College of Medicine Program
Albert Einstein College of Medicine of Yeshiva University
Bronx Municipal Hospitals Center
Montefiore Medical Center-Perforcy and Lucy Moses Division
Montefiore Medical Center-Weiler Hospital
North Central Bronx Hospital
Program Director:
Edward T Habermann, MD
Montefiore Medical Center
Gold Zone
111 E 210th St
Bronx, NY 10467
718 922-4661
Length: 4 Year(s) Total Positions: 40 (GYI: 8)
Program ID: 260-35-21-187

Bronx-Lebanon Hospital Center Program
Bronx-Lebanon Hospital Center
Program Director:
Harvey P Insler, MD
Bronx-Lebanon Hospital Center
1650 Grand Concourse
Bronx, NY 10457
718 969-1300
Length: 4 Year(s) Total Positions: 8 (GYI: 0)
Program ID: 260-35-11-104

* Updated information not provided.
Brooklyn
Kingsbrook Jewish Medical Center Program
Kingsbrook Jewish Medical Center
Beth Israel Medical Center
Program Director:
Elie Bryk, MD
Kingsbrook Jewish Medical Center
540 Schenectady Ave
Brooklyn, NY 11203
718 604-0483
Length: 4 Year(s) Total Positions: 4 (GYI: 0)
Program ID: 260-35-21-14-185

Maimonides Medical Center Program
Maimonides Medical Center
Coney Island Hospital
Shriners Hospital for Crippled Children (Twin Cities Unit)
Program Director:
Hershel Samuel, MD
Maimonides Medical Center
4802 10th Ave
Brooklyn, NY 11219
718 283-7694
Length: 4 Year(s) Total Positions: 8 (GYI: 0)
Program ID: 260-35-21-167

SUNY Health Science Center at Brooklyn Program*
SUNY HSC at Brooklyn College of Medicine
Brookdale Hospital Medical Center
Kings County Hospital Center
Long Island College Hospital
University Hospital-SUNY Health Science Center at Brooklyn
Veterans Affairs Medical Center (Brooklyn)
Program Director:
Stanley H. Gordon, MD
Dept of Orthopaedics & Rehabilitation Medicine
460 Clarkson Ave
PO Box 90
Brooklyn, NY 11203-2098
718 270-3179
Length: 5 Year(s) Total Positions: 30 (GYI: 6)
Program ID: 260-35-21-144

Buffalo
SUNY at Buffalo Graduate Medical-Dental Education Consortium Program*
SUNY at Buffalo Grad Medical-Dental Education Consortium
Buffalo General Hospital
Children's Hospital of Buffalo
Erie County Medical Center
Veterans Affairs Medical Center (Buffalo)
Program Director:
Robert Gilmer, MD
Children's Hospital of Buffalo
Dept of Orthopaedics
82 Hodge St
Buffalo, NY 14222-2016
716 897-7722
Length: 4 Year(s) Total Positions: 16 (GYI: 0)
Program ID: 260-35-21-924

Jamaica
Catholic Medical Center of Brooklyn and Queens Program
Catholic Medical Center of Brooklyn and Queens
Catholic Medical Center (Mary Immaculate Hospital)
Catholic Medical Center (St John's Queens Hospital)
Catholic Medical Center (St Mary's Hospital)
Program Director:
John R. Denton, MD
Catholic Medical Center of Brooklyn and Queens Inc
58-25 183rd St
Jamaica, NY 11432
718 558-7241
Length: 4 Year(s) Total Positions: 10 (GYI: 0)
Program ID: 260-35-21-124

New Hyde Park
Albert Einstein College of Medicine at Long Island Jewish Medical Center Program
Long Island Jewish Medical Center
Jamaica Hospital
Scheider Children's Hosp (Long Island Jewish Med Ctr)
Program Director:
John E. Hardwick, MD
Dept of Orthopaedic Surgery
Long Island Jewish Medical Center
270-50 76th Ave
New Hyde Park, NY 11040
718 470-7003
Length: 4 Year(s) Total Positions: 12 (GYI: 0)
Program ID: 260-35-21-162

New York
Columbia University Program
Presbyterian Hospital in the City of New York
Harlem Hospital Center
Helen Hayes Hospital
Program Director:
Harold M. Dick, MD
Presbyterian Hospital in the City of New York
622 W 168th St
New York, NY 10032
212 305-0974
Length: 4 Year(s) Total Positions: 32 (GYI: 0)
Subspecialties: OAB
Program ID: 260-35-31-128

Hospital for Joint Diseases Orthopaedic Institute Program
Hospital for Joint Diseases Orthopaedic Institute
Program Director:
Joseph D. Zuckerman, MD
Hospital for Joint Diseases Orthopaedic Institute
301 E 17th St
New York, NY 10003
212 996-0489
Length: 4 Year(s) Total Positions: 26 (GYI: 0)
Subspecialties: HSO, Q, OSM, OSS
Program ID: 260-35-21-125

Hospital for Special Surgery/Cornell Medical Center Program
Hospital for Special Surgery
New York Hospital
Program Director:
Russell F, Warren, MD
Hospital for Special Surgery
535 E 70th St
New York, NY 10021
212 606-1469
Length: 4 Year(s) Total Positions: 34 (GYI: 0)
Subspecialties: HSO, OAR, OP, OSM
Program ID: 260-35-21-422

Lenox Hill Hospital Program
Lenox Hill Hospital
Children's Hospital
Shriners Hospital for Crippled Children (Philadelphia)
Program Director:
Chitrakaran S. Banawat, MD
Lenox Hill Hospital
Department of Orthopaedic Surgery
100 E 77th St
New York, NY 10021-1833
212 434-2710
Length: 5 Year(s) Total Positions: 10 (GYI: 2)
Program ID: 260-35-21-117-176

Mount Sinai School of Medicine Program
Mount Sinai School of Medicine
Einhurst Hospital Center-Mount Sinai School of Medicine
Mount Sinai Medical Center
Program Director:
Richard J. Ulin, MD
Mount Sinai School of Medicine
Dept of Orthopaedics Box 1188
5 E 86th St
New York, NY 10029-6574
212 241-6144
Length: 4 Year(s) Total Positions: 15 (GYI: 3)
Program ID: 260-35-21-466

New York University Medical Center Program
New York University Medical Center
Bellevese Hospital Center
Veterans Affairs Medical Center (Manhattan)
Program Director:
Theodore J. Waugh, MD PhD
New York University Medical Center
550 First Ave
New York, NY 10016
212 293-6301
Length: 5 Year(s) Total Positions: 30 (GYI: 6)
Program ID: 260-35-21-651

St Luke's-Roosevelt Hospital Center Program
St Luke's-Roosevelt Hospital Center
Alfred I. DuPont Institute of the Nemours Foundation
St Luke's-Roosevelt Hospital Center-Roosevelt Division
St Luke's-Roosevelt Hospital Center-St Luke's Division
Program Director:
Andrew H. Patterson, MD
St Luke's-Roosevelt Hospital Center-St Luke's Division
1111 Amsterdam Ave
New York, NY 10025-2050
Length: 4 Year(s) Total Positions: 12 (GYI: 6)
Subspecialties: HSO
Program ID: 260-35-21-1441

Rochester
University of Rochester Program
Strong Memorial Hospital of the University of Rochester
Genesee Hospital
Highland Hospital of Rochester
Rochester General Hospital
Program Director:
Richard T. Burton, MD
Department of Orthopaedic Surgery
601 Elmwood Ave
PO Box 665
Rochester, NY 14642
716 275-5168
Length: 4 Year(s) Total Positions: 22 (GYI: 0)
Subspecialties: HSO, OSM
Program ID: 260-35-21-031

* Updated information not provided.
Accredited Programs in Orthopaedic Surgery

Stony Brook

SUNY at Stony Brook Program
University Hospital-SUNY at Stony Brook
Nassau County Medical Center
Program Director:
Lawrence C. Harst, MD
Steven Sampson, MD
SUNY at Stony Brook Health Science Center
T:18 4th 020
Stony Brook, NY 11794-8181
516 444-5061
Length: 4 Year(s) Total Positions: 21 (GYI: 0)
Subspecialties: HSO
Program ID: 260-36-51-181

Syracuse

SUNY Health Science Center at Syracuse Program
University Hospital-SUNY Health Science Center at Syracuse
Crouse-Irving Memorial Hospital
Veterans Affairs Medical Center (Syracuse)
Program Director:
David D. Murray, MD
SUNY Health Science Center at Syracuse
Dept of Orthopaedic Surgery
500 E Adams St
Syracuse, NY 13210
315 445-5226
Length: 4 Year(s) Total Positions: 16 (GYI: 0)
Subspecialties: HSO, OSS
Program ID: 260-36-21-048

North Carolina

Chapel Hill

University of North Carolina Hospitals Program
University of North Carolina Hospitals Wake Medical Center
Program Director:
Frank C Wilson, MD
University of North Carolina School of Medicine
236 Burnett-Womack Bldg 229 H
CB# 7065
Chapel Hill, NC 27599-7065
919 966-3359
Length: 5 Year(s) Total Positions: 21 (GYI: 4)
Program ID: 260-36-21-081

Charlottesville

Carolina Medical Center Program
Carolina Medical Center
Shriners Hospital for Crippled Children (Greensville)
Program Director:
Edward N Halley Jr, MD
PO Box 32861
Charlotte, NC 28222-3286
704 355-5184
Length: 5 Year(s) Total Positions: 18 (GYI: 3)
Subspecialties: OTR
Program ID: 260-36-52-104

Durham

Duke University Program
Duke University Medical Center
Duke Regional Hospital
Shriners Hospital for Crippled Children (Greensville)
Veterans Affairs Medical Center (Asheville)
Veterans Affairs Medical Center (Durham)
Program Director:
James E Urbaniaik, MD
Duke University Medical Center
Div of Orthopaedic Surgery
Box 2512
Durham, NC 27710
919 668-3170
Length: 4 Year(s) Total Positions: 36 (GYI: 0)
Subspecialties: HSO
Program ID: 260-36-51-019

Winston-Salem

Bowman Gray School of Medicine Program
North Carolina Baptist Hospital
Program Director:
Gary G Poulling, MD
Dept of Orthopaedic Surgery
Bowman Gray School of Medicine
Medical Center Blvd Box 1070
Winston-Salem, NC 27105-1070
919 716-3846
Length: 5 Year(s) Total Positions: 15 (GYI: 3)
Program ID: 260-36-21-077

Ohio

Akron

Akron City Hospital (Summa Health System)/NEOUCOM Program
Akron City Hospital (Summa Health System)
Children's Hospital Medical Center of Akron
Program Director:
J Patrick Flanagan, MD
411 N Main
Akron, OH 44310
216 339-5681
Length: 5 Year(s) Total Positions: 15 (GYI: 3)
Program ID: 260-36-21-031

Akron General Medical Center/NEOUCOM Program
Akron General Medical Center
Children's Hospital Medical Center of Akron
Program Director:
Marc C Leeson, MD
Akron General Medical Center
400 Wabash Ave
PO Box 438
Akron, OH 44307
216 334-4980
Length: 5 Year(s) Total Positions: 15 (GYI: 3)
Program ID: 260-36-21-058

Cincinnati

University of Cincinnati Hospital Group Program
University of Cincinnati Hospital
Bethesda Hospital Inc
Children's Hospital Medical Center
Good Samaritan Hospital
Veterans Affairs Medical Center (Cincinnati)
Program Director:
Peter J Stern, MD
University of Cincinnati Medical Center
231 Bethesda Ave
Mail Location 512
Cincinnati, OH 45267-0212
513 558-4502
Length: 5 Year(s) Total Positions: 21 (GYI: 4)
Subspecialties: HSO
Program ID: 260-38-21-017

Cleveland

Case Western Reserve University Program
University Hospitals of Cleveland
MetroHealth Medical Center
Veterans Affairs Medical Center (Cleveland)
Program Director:
Victor M Goldberg, MD
University Hospitals of Cleveland
11100 Euclid Ave
Cleveland, OH 44195
216 344-3046
Length: 4 Year(s) Total Positions: 30 (GYI: 6)
Subspecialties: OMO
Program ID: 260-38-21-027

Cleveland Clinic Foundation Program
Cleveland Clinic Foundation
MetroHealth Medical Center
Program Director:
Kenneth E Marks, MD
Cleveland Clinic Foundation
9500 Euclid Ave TT32
Dept of Orthopaedic Surgery
Cleveland, OH 44106-5242
216 444-5900
Length: 4 Year(s) Total Positions: 20 (GYI: 4)
Subspecialties: HSO, OSM
Program ID: 260-38-22-042

Mount Sinai Medical Center of Cleveland Program
Mount Sinai Medical Center of Cleveland
MetroHealth Medical Center
University Hospitals of Cleveland
Program Director:
Aram J Pomponio, MD
Mt Sinai Medical Center of Cleveland
One Mt Sinai Dr
Cleveland, OH 44106-4198
216 444-3775
Length: 5 Year(s) Total Positions: 10 (GYI: 3)
Program ID: 260-38-21-101

St Luke's Medical Center Program
St Luke's Medical Center
MetroHealth Medical Center
University Hospitals of Cleveland
Program Director:
Clay L Nash Jr, MD
St Luke's Medical Center
11311 Shaker Blvd
Cleveland, OH 44109
216 838-9184
Length: 5 Year(s) Total Positions: 8 (GYI: 2)
Program ID: 260-38-11-153

* Updated information not provided.
Accredited Programs in Orthopaedic Surgery

Columbus
Mount Carmel Health Program
Mount Carmel Medical Center
Children’s Hospital
Program Director:
Richard A Fankhauser, MD
Mount Carmel Health
780 W State St
Columbus, OH 43222
614 228-6718
Length: 5 Year(s) Total Positions: 10 (GYI: 2)
Program ID: 206-38-92-025

Ohio State University Program
Ohio State University Medical Center
Children’s Hospital
Riverside Methodist Hospitals
Program Director:
Sheldon R Simon, MD
Ohio State University Hospital
410 W 10th Ave
Rm N-859 Doan Hall
Columbus, OH 43210
614 283-4700
Length: 4 Year(s) Total Positions: 16 (GYI: 4)
Subspecialties: HSI, OSM
Program ID: 206-38-21-099

Dayton
Wright State University Program
Wright State University School of Medicine
Children’s Medical Center
Miami Valley Hospital
Veterans Affairs Medical Center (Dayton)
Program Director:
Hajimrza P Pompe Van Meerservoort, MD
Miami Valley Hospital
30 Apple St Ste L-200
Dayton, OH 45409
513 229-2001
Length: 5 Year(s) Total Positions: 10 (GYI: 2)
Program ID: 206-38-21-105

Toledo
Medical College of Ohio at Toledo Program
Medical College of Ohio Hospital
St Vincent Medical Center
Toledo Hospital
Program Director:
Nabil A Elrezek, MD
Medical College of Ohio Dept of Orthopedic Surgery
3000 Arlington Ave
PO Box 10008
Toledo, OH 43699
419 381-3590
Length: 5 Year(s) Total Positions: 16 (GYI: 3)
Subspecialties: OAR
Program ID: 206-38-31-176

Oklahoma
Oklahoma City
University of Oklahoma Health Sciences Center Program
University of Oklahoma College of Medicine-Oklahoma City
Bone and Joint Hospital
Children’s Hospital of Oklahoma
University Hospital and Clinics
Veterans Affairs Medical Center (Oklahoma City)
Program Director:
J Andy Sullivan, MD
Dept of Orthopaedic Surgery and Rehabilitation OUHSC
College of Medicine
PO Box 28377 Ste 33300
Oklahoma City, OK 73126
405 271-3002
Length: 5 Year(s) Total Positions: 26 (GYI: 4)
Subspecialties: OSM
Program ID: 206-38-21-053

Oregon
Portland
Oregon Health Sciences University Program
Oregon Health Sciences University Hospital
Evanston Hospital and Health Center
Shriners Hospital for Crippled Children (Portland)
Veterans Affairs Medical Center (Portland)
Program Director:
Mark R Colville, MD
Oregon Health Sciences University Hospital
3181 SW Sam Jackson Park Rd
Portland, OR 97201-3088
503 404-5001
Length: 4 Year(s) Total Positions: 12 (GYI: 2)
Program ID: 206-49-21-028

Pennsylvania
Danville
Geisinger Medical Center Program
Geisinger Medical Center
Alfred I DuPont Institute of the Nemours Foundation
Program Director:
John Parenti, MD
Geisinger Medical Center
Dept of Orthopedic Surgery
Danville, PA 17711
717 271-6541
Length: 5 Year(s) Total Positions: 10 (GYI: 2)
Program ID: 206-41-22-155

Erie
Hamot Medical Center Program
Hamot Medical Center
Shriners Hospital for Crippled Children (Erie)
Program Director:
John D Lubahn, MD
Hamot Medical Center
201 State St
Erie, PA 16550-0001
814 877-6257
Length: 4 Year(s) Total Positions: 8 (GYI: 0)
Subspecialties: OP/OSM
Program ID: 206-41-22-158

Hershey
Milton S Hershey Medical Center of Pennsylvania State University Program
Penn State University Hospital- Milton S Hershey Med Ctr
Harrisburg Hospital
Program Director:
Vincent D Pellegrini Jr, MD
Milton S Hershey Medical Center of Pennsylvania State Univ
Dept of Orthopaedics
PO Box 866
Hershey, PA 17033
717 531-4800
Length: 5 Year(s) Total Positions: 15 (GYI: 3)
Program ID: 206-41-21-151

Philadelphia
Albert Einstein Medical Center Program
Albert Einstein Medical Center
Moss Rehabilitation Hospital
Shriners Hospital for Crippled Children (Philadelphia)
Program Director:
Mary Ann E Keenan, MD
Albert Einstein Medical Center-Northern Division
5501 Old York Rd
Willowcrest 4
Philadelphia, PA 19141-3098
215 456-6001
Length: 4 Year(s) Total Positions: 11 (GYI: 2)
Program ID: 206-11-41-157

MCPHU/Hahnemann University Hospital Program
Hahnemann University Hospital
Atlantic City Medical Center
Shriners Hospital for Crippled Children (Philadelphia)
Program Director:
Arnold T Berman, MD
Hahnemann University Hospital
Broad & Vine Sts
Mail Stop 420
Philadelphia, PA 19102-1192
215 762-8168
Length: 4 Year(s) Total Positions: 12 (GYI: 0)
Program ID: 206-41-21-082

MCPHU/Medical College of Pennsylvania Hospital Program
Medical College of Pennsylvania Hospital
Shriners Hospital for Crippled Children (Philadelphia)
Program Director:
Arnold T Berman, MD
Medical College of Pennsylvania and Hospital
C/O Orthopaedic Surgery
3300 Henry Ave
Philadelphia, PA 19129
215 832-6460
Length: 4 Year(s) Total Positions: 5 (GYI: 1)
Program ID: 206-41-21-020

Temple University Program
Temple University Hospital
Abington Memorial Hospital
Shriners Hospital for Crippled Children (Philadelphia)
St Christopher's Hospital for Children
Program Director:
Michael Clancy, MD
Temple University Hospital
Broad & Ontario Sts
Philadelphia, PA 19140
215 707-7987
Length: 4 Year(s) Total Positions: 16 (GYI: 3)
Subspecialties: OP/OSM
Program ID: 206-41-21-029

* Updated information not proviced.
Puerto Rico
San Juan
University of Puerto Rico Program
University of Puerto Rico School of Medicine
San Juan City Hospital
University Pediatric Hospital
Veterans Affairs Medical Center (San Juan)
Address: Rafael Fernandez-Feliberti, MD
University of Puerto Rico Medical Science Campus
GPO Box 5967
San Juan, PR 00936
506-764-5006
Length: 4 Year(s)  Total Positions: 16  (GYT: 0)
Program ID: 260-42-21-010

Rhode Island
Providence
Brown University Program
Rhode Island Hospital
Veterans Affairs Medical Center (Providence)
Address: Michael G. Ehrlich, MD
Rhode Island Hospital
Dept of Orthopaedics
583 Eddy St
Providence, RI 02903
401-444-6800
Length: 4 Year(s)  Total Positions: 23  (GYT: 4)
Subspecialties: OI
Program ID: 260-43-11-112

South Carolina
Charleston
Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
MUSC Medical Center
Naval Hospital (Charleston)
Veterans Affairs Medical Center (Charleston)
Address: Paul P. Griffin, MD
Medical University of South Carolina
Dept of Orthopaedic Surgery
171 Ashley Ave
Charleston, SC 29425
803-792-3856
Length: 4 Year(s)  Total Positions: 15  (GYT: 3)
Program ID: 260-48-21-062

Columbia
Richland Memorial Hospital-University of South Carolina School of Medicine Program*
Richland Memorial Hospital-Usf of South Carolina Sch of Med
Shriners Hospital for Crippled Children (Greenville)
Williams Jennings Bryan Dorn Veterans Hospital
Address: Director Residency Training
Richland Memorial Hospital
Two Richland Medical Pk
Ste 404
Columbia, SC 29003
803-765-5876
Length: 5 Year(s)  Total Positions: 11  (GYT: 6)
Program ID: 260-45-31-163

Greenville
Greenville Hospital System Program
Greenville Hospital System
Shriners Hospital for Crippled Children (Greenville)
Address: C Dayton Riddle Jr, MD
Greenville Hospital System
701 Grove Rd
Greenville, SC 29605
864-465-7878
Length: 5 Year(s)  Total Positions: 15  (GYT: 3)
Program ID: 260-41-21-003

Tennessee
Chattanooga
University of Tennessee College of Medicine at Chattanooga Program*
University of Tennessee College of Medicine-Chattanooga
Erlanger Medical Center
T C Thompson Children's Hospital Medical Center
Address: Robert C Goodfellow, MD
317 Doctors Bldg
741 McCallie Ave
Chattanooga, TN 37403-2609
423-267-1888
Length: 5 Year(s)  Total Positions: 10  (GYT: 6)
Subspecialties: OI
Program ID: 260-47-11-164

Memphis
University of Tennessee Program
University of Tennessee College of Medicine
Baptist Memorial Hospital
Campbell Foundation University of Tennessee
LeBonheur Children's Medical Center
Regional Medical Center at Memphis
Address: James H Beatty MD
University of Tennessee-Campbell Clinic
Dept of Orthopaedic Surgery
869 Madison Ave
Memphis, TN 38103-3433
901-732-3274
Length: 4 Year(s)  Total Positions: 32  (GYT: 0)
Subspecialties: OI
Program ID: 260-47-21-061

* Updated information not provided.
Nashville
Vanderbilt University Program
Vanderbilt University Medical Center
Veterans Affairs Medical Center (Nashville)
Program Director:
Dan M. Spengler, MD
Vanderbilt University
Dept of Orthopaedic & Rehab
137 A Medical Center S
Nashville, TN 37232-2050
615 345-6364
Length: 5 Year(s)
Total Positions: 21 (GYI: 0)
Program ID: 260-47-11-116

Fort Worth
Fort Worth Hospitals Program
John Peter Smith Hospital (Tarrant County Hospital District)
Cook-Fort Worth Children's Medical Center
Harris Methodist Fort Worth
Program Director:
Robert S. Proctor, MD
John Peter Smith Hospital
1500 S Main St
Fort Worth, TX 76104
817 897-1379
Length: 5 Year(s)
Total Positions: 15 (GYI: 3)
Program ID: 260-48-22-100

Galveston
University of Texas Medical Branch Hospitals Program
University of Texas Medical Branch Hospitals
Program Director:
Jason H. Callaway, MD
6.131 McCallum Bldg G-92
University of Texas Medical Branch
Div of Orthopaedic Surgery
Galveston, TX 77555-0762
409 772-2560
Length: 5 Year(s)
Total Positions: 20 (GYI: 4)
Program ID: 260-48-21-165

Houston
Baylor College of Medicine Program
Baylor College of Medicine
Tarrant County Hospital District-Ben Taub General Hospital
Methodist Hospital
Shriners Hospital for Crippled Children (Houston)
Texas Children's Hospital
Veterans Affairs Medical Center (Houston)
Program Director:
Stephen J. Eusey, MD
Baylor College of Medicine
6550 Fannin
Ste 2625
Houston, TX 77030
713 798-3089
Length: 4 Year(s)
Total Positions: 22 (GYI: 5)
Subspecialties: HSO,OP,OSM,OTR
Program ID: 260-48-31-049

University of Texas at Houston Program
University of Texas Medical School at Houston
Hermann Hospital
Lyndon B Johnson General Hospital
Shriners Hospital for Crippled Children (Houston)
St Joseph Hospital
Program Director:
Jeffrey D. Beeman, MD PhD
University of Texas Medical School at Houston
Dept of Orthopaedic Surgery
6431 Fannin Ste 8.144
Houston, TX 77030
713 798-5658
Length: 5 Year(s)
Total Positions: 12 (GYI: 0)
Subspecialties: OSM
Program ID: 260-48-21-166

Lackland AFB
Wilford Hall USAF Medical Center Program
Wilford Hall USAF Medical Center (SG)
Program Director:
Thomas E. Kruikle, MD
50 Medical Wing/FSBB
2209 Bergquist Dr Ste 1
Lackland AFB
San Antonio, TX 78236-5300
210 673-5840
Length: 4 Year(s)
Total Positions: 20 (GYI: 4)
Program ID: 260-48-31-120

Lubbock
Texas Tech University (Lubbock) Program
Texas Tech University Health Sciences Center at Lubbock
St Mary of the Plains Hospital
Program Director:
Eugene J. Dabrowski, MD
Texas Tech University Health Sciences Center
Dept of Orthopaedic Surgery
3801 4th St
Lubbock, TX 79430
806 743-2405
Length: 5 Year(s)
Total Positions: 11 (GYI: 2)
Program ID: 260-48-31-160

San Antonio
University of Texas Health Science Center at San Antonio Program
University of Texas Medical School at San Antonio
Audie L. Murphy Veterans Hospital (San Antonio)
Santa Rosa Health Care Corporation
University Hospital-South Texas Medical Center
Program Director:
James D. Beckman, MD
University of Texas Health Science Center
Dept of Orthopaedics
7708 Floyd Curl Dr
San Antonio, TX 78224-7774
210 567-5105
Length: 5 Year(s)
Total Positions: 34 (GYI: 6)
Subspecialties: HSO,OP,OSM
Program ID: 260-48-31-496

Temple
Texas A&M College of Medicine-Scott and White Program
Scott and White Memorial Hospital
Olin E. Page Veteran's Center
Shriners Hospital for Crippled Children (Houston)
Program Director:
Hanes H. Brindley Jr, MD
Texas A&M-Scott and White
Graduate Medical Education
2401 S 31st St
Temple, TX 76508-0001
903 590-4463
Length: 5 Year(s)
Total Positions: 15 (GYI: 3)
Program ID: 260-48-21-171

* Updated information not provided.

Graduate Medical Education Directory 599
Accredited Programs in Orthopaedic Surgery

Utah

Salt Lake City

University of Utah Program
University of Utah Medical Center
Holy Cross Hospital
LSI Hospital
Primary Children's Medical Center
Shriners Hospital for Crippled Children (Intermountain Unit)
Veterans Affairs Medical Center (Salt Lake City)

Program Director:
Harold K Dunn, MD
University of Utah Medical Center
50 N Medical Dr SB165
Salt Lake City, UT 84132
801-581-7601
Length: 4 Year(s) Total Positions: 16 (GY: 0)
Subspecialties: HSO, OS, MO, OSS
Program ID: 260-42-21-694

Vermont

Burlington

Medical Center Hospital of Vermont Program
Medical Center Hospital of Vermont
Program Director:
James G Howe, MD
Thomas K Kristiansen MD
University of Vermont
Dept of Orthopaedic & Rehab
Stafford Hall
Burlington, VT 05405-0604
802-656-2260
Length: 4 Year(s) Total Positions: 12 (GY: 0)
Program ID: 260-44-11-167

Virginia

Charlottesville

University of Virginia Program
University of Virginia Medical Center
Roanoke Memorial Hospitals
Veterans Affairs Medical Center (Salem)

Program Director:
Gwo-Jaw Wang, MD
University of Virginia Health Sciences Center
Dept of Orthopaedics
Box 159
Charlottesville, VA 22908
804-924-8678
Length: 4 Year(s) Total Positions: 20 (GY: 0)
Subspecialties: OAR
Program ID: 260-43-21-129

Portsmouth

Naval Medical Center (Portsmouth) Program
Naval Medical Center (Portsmouth)
Program Director:
Martin R Doenfshaug, MD
Naval Hospital
Orthopaedic Surgery Department
Portsmouth, VA 23708-5000
804-398-5100
Length: 4 Year(s) Total Positions: 12 (GY: 3)
Program ID: 260-51-12-130

Richmond

Medical College of Virginia/Virginia Commonwealth University Program
Medical College of Virginia/Virginia Commonwealth University
Children's Hospital
Hunter Holmes McGuire VA Medical Center (Richmond)
Medical College of Virginia Hospitals

Program Director:
John A Carde, MD
MC/Virginia Commonwealth Univ
PO Box 900105
Richmond, VA 23298-0103
804-756-3205
Length: 5 Year(s) Total Positions: 20 (GY: 4)
Program ID: 260-51-21-035

Washington

Seattle

University of Washington Program
University of Washington School of Medicine
Children's Hospital and Medical Center
Harborview Medical Center
University of Washington Medical Center
Veterans Affairs Medical Center (Seattle)

Program Director:
Roger V Larson, MD
University Hospital Dept of Orthopaedics
1919 NE Pacific Ave
Mail Stop R4-10
Seattle, WA 98195
206-543-0860
Length: 5 Year(s) Total Positions: 25 (GY: 5)
Subspecialties: HSO
Program ID: 260-54-21-036

Tacoma

Madigan Army Medical Center Program
Madigan Army Medical Center
Children's Hospital and Medical Center
Shriners Hospitals for Crippled Children (Spokane)
Swedish Medical Center (Seattle)

Program Director:
LTC D K Casey Jones, MD
Madigan Army Medical Center
Commander
Att: HSHJ-SGP
Tacoma, WA 98431
256-958-3111
Length: 5 Year(s) Total Positions: 12 (GY: 0)
Program ID: 260-54-32-179

West Virginia

Morgantown

West Virginia University Program
West Virginia University Hospitals
Monongalia General Hospital

Program Director:
J David Basha, MD
West Virginia University Hospital
Dept of Orthopaedics
PO Box 8196
Morgantown, WV 26506-8196
304-293-3908
Length: 5 Year(s) Total Positions: 16 (GY: 3)
Program ID: 260-55-21-109

Wisconsin

Madison

University of Wisconsin Program
University of Wisconsin Hospital and Clinics
Northeast Hospital
St Mary's Hospital Medical Center
William S Middleton Veterans Hospital

Program Director:
Andrew A McBeath, MD
University of Wisconsin Hospital & Clinics
600 Highland Ave
Rm 455-461
Madison, WI 53792-3228
608-263-1948
Length: 4 Year(s) Total Positions: 20 (GY: 4)
Program ID: 260-56-21-097

Milwaukee

Medical College of Wisconsin Program
Medical College of Wisconsin Affiliated Hospitals for Children's Hospital of Wisconsin
Clement J Zablocki Veterans Affairs Medical Center
John L Doyme Hospital

Program Director:
John S Gould, MD
Medical College of Wisconsin
Dept of Orthopaedic Surgery
8700 W Wisconsin Ave
Milwaukee, WI 53226
414-257-7369
Length: 5 Year(s) Total Positions: 25 (GY: 6)
Subspecialties: OP
Program ID: 260-56-21-107

* Updated information not provided.
Orthopaedic Surgery of the Spine (Orthopaedic Surgery)

Florida
Gainesville
University of Florida Program*
University of Florida College of Medicine
Shands Hospital at the University of Florida
Program Director:
Michael MacMillan, MD
Richard G. Feaker, MD
University of Florida
Dept of Orthopaedics
Box 106246
Gainesville, FL 32610
084 392-4551
Length: 1 Year(s)
Program ID: 267-11-31-005

Miami
University of Miami-Jackson Memorial Medical Center Program
University of Miami-Jackson Memorial Medical Center
Program Director:
Frank J. Eismont, MD
University of Miami School of Medicine
Dept of Orthopaedics and Rehab
PO Box 016006 (D-27)
Miami, FL 33101
305 605-7138
Length: 1 Year(s) Total Positions: 1
Program ID: 267-11-21-004

Illinois
Chicago
Rush Medical College Program
Rush-Presbyterian-St Luke’s Medical Center
Shriners Hospital for Crippled Children (Chicago)
Program Director:
Ronald L. DeWald, MD
Rush-Presbyterian-St Luke’s Medical Center
1725 W Harrison
Ste 440
Chicago, IL 60612
312 735-2805
Length: 1 Year(s) Total Positions: 2
Program ID: 267-16-21-015

Springfield
Southern Illinois University Program
Southern Illinois University School of Medicine
Memorial Medical Center
St John’s Hospital
Program Director:
E. Sharron Stueffer, MD
Southern Illinois University School of Medicine
Dept of Orthopaedic Surgery
PO Box 19230
Springfield, IL 62704-9230
217 782-3864
Length: 1 Year(s) Total Positions: 2
Program ID: 267-16-21-001

Minnesota
Minneapolis
Minnesota Spine Center Program
Minnesota Spine Center
Program Director:
Robert B. Winter, MD
Minnesota Spine Center
600 24th Ave S
Ste 606
Minneapolis, MN 55404
612 672-6685
Length: 1 Year(s) Total Positions: 3 (GTY: 3)
Program ID: 267-26-21-010

University of Minnesota Program
University of Minnesota Medical School
Twins Cities Spohnlos Spine Center
University of Minnesota Hospital and Clinic
Program Director:
Ezra E. Trunfeld, MD
Abbott Northwestern Hospital
Twins Cities Spohnlos Spine Center
2737 Chicago Ave S LA 260
Minneapolis, MN 55407-3707
612 625-3775
Length: 1 Year(s) Total Positions: 2
Program ID: 267-26-21-062

Missouri
St Louis
Washington University Program
Barnes Hospital
Shriners Hospital for Crippled Children (St Louis)
St Louis Children’s Hospital
Program Director:
Keith H. Bridwell, MD
One Barnes Hoop Plaza
Ste 1130 W Pavilion
St Louis, MO 63110
314 362-4080
Length: 1 Year(s)
Program ID: 267-28-21-016

New York
New York
Hospital for Joint Diseases Orthopaedic Institute Program*
Hospital for Joint Diseases Orthopaedic Institute
Program Director:
Michael G. Neuwirth, MD
301 E 17th St Ste 410
New York, NY 10003
212 568-6623
Length: 1 Year(s)
Program ID: 267-35-21-011

Syracuse
SUNY Health Science Center at Syracuse Program
University of Syracuse-SUNY Health Science Center at Syracuse
Crouse-Irving Memorial Hospital
Program Director:
Bruce E. Frederickson, MD
SUNY Health Science Center at Syracuse
550 Harrison Ctr Ste 138
Syracuse, NY 13202
315 472-2225
Length: 1 Year(s) Total Positions: 1
Program ID: 267-36-11-019

Utah
Salt Lake City
University of Utah Program
University of Utah Medical Center
Veterans Affairs Medical Center (Salt Lake City)
Program Director:
John D Schieffel, MD
University of Utah Medical Center
Div of Orthopaedics & Spine Surgery
Rm 26165
Salt Lake City, UT 84132
801 581-7601
Length: 1 Year(s) Total Positions: 1
Program ID: 267-49-21-008

* Updated information not provided.
Orthopaedic Trauma
(Orthopaedic Surgery)

Michigan

Detroit

Henry Ford Hospital Program

**Program Director:**
Berton R. Mood, MD

**Henry Ford Hospital**
Dept of Orthopaedic Surgery
2790 W Grand Blvd
Detroit, MI 48202
313-876-1990

Length: 1 Year(s) Total Positions: 1
Program ID: 269-25-21-006

North Carolina

Charlotte

Carolina's Medical Center Program
Carolinas Medical Center

**Program Director:**
James F. Kerlin, MD
Carolinas Medical Center
Dept of Orthopaedic Surgery & Trauma
PO Box 32861
Charlotte, NC 28223-2861
704-355-3464

Length: 1 Year(s) Total Positions: 2
Program ID: 269-30-21-001

Texas

Houston

Baylor College of Medicine Program

**Program Director:**
Ronald W. Lindsey, MD
Baylor College of Medicine
Dept of Orthopaedic Surgery
6650 Fannin St 2625
Houston, TX 77030
713-798-3711

Length: 1 Year(s) Total Positions: 1
Program ID: 269-48-31-004

Otolaryngology

Alabama

Birmingham

University of Alabama Medical Center Program

**Program Director:**
Glenn E. Peters, MD
University of Alabama Medical Center
Otolaryngology Div Head & Neck Surgery
1501 4th Ave S
Birmingham, AL 35233-8680
205-994-9070

Length: 4 Year(s) Total Positions: 12 (GY: 0)
Program ID: 280-04-21-010

Arkansas

Little Rock

University of Arkansas for Medical Sciences Program

**Program Director:**
Scott J. Stern, MD
University of Arkansas Medical Sciences
4301 W Markham Slot 543
Little Rock, AR 72205-7190
501-686-0140

Length: 4 Year(s) Total Positions: 14 (GY: 3)
Program ID: 280-04-21-012

California

Loma Linda

Loma Linda University Program

**Program Director:**
George D. Chonkich, MD
Loma Linda University
11234 Anderson St Ste 2587A
Loma Linda, CA 92354
909-824-0860

Length: 4 Year(s) Total Positions: 9 (GY: 0)
Program ID: 280-05-21-117

Los Angeles

Charles R. Drew University Program

**Program Director:**
Gary Gill, MD
Martin Luther King Jr-Drew Medical Center
12021 S Wilmington Ave
Los Angeles, CA 90029
310-668-4536

Length: 4 Year(s) Total Positions: 6 (GY: 0)
Program ID: 280-05-11-016

UCLA Medical Center Program

**Program Director:**
Gerald S. Becke, MD
Univ of California Los Angeles Medical Center
Div of Head & Neck Surgery
Los Angeles, CA 90024-1824
310-267-5170

Length: 4 Year(s) Total Positions: 20 (GY: 0)
Program ID: 280-05-21-017

University of Southern California Program

**Program Director:**
Dale R. Rice, MD
Univ of Southern California Medical Center
PO Box 785
1200 N State St
Los Angeles, CA 90033-1084
213-232-7315

Length: 4 Year(s) Total Positions: 20 (GY: 4)
Program ID: 280-05-21-015

Oakland

Kaiser Permanente Medical Group Program

**Program Director:**
Raymond L. Hiltzinger Jr, MD
Kaiser Permanente Medical Center
Dept of Head and Neck Surgery
280 W MacArthur Blvd
Oakland, CA 94611-0683
510-596-0136

Length: 3 Year(s) Total Positions: 6 (GY: 0)
Program ID: 280-05-22-020

Orange

University of California Irvine Program

**Program Director:**
Roger Crumley, MD
University of California Irvine Medical Center
Dept of Otolaryngology-Head Neck Surgery
101 The City Dr Ste 653SL 25
Orange, CA 92868-3265
714-456-5753

Length: 4 Year(s) Total Positions: 11 (GY: 0)
Program ID: 280-05-21-014

Sacramento

University of California Davis Program

**Program Director:**
Richard A. Cote, MD, PhD
University of California Davis Medical Center
Dept of Otolaryngology
2550 Stockton Blvd
Sacramento, CA 95817
916-734-2901

Length: 4 Year(s) Total Positions: 10 (GY: 0)
Program ID: 280-05-21-013

*Updated information not provided.*
San Diego
Naval Medical Center (San Diego) Program
Naval Medical Center (San Diego)
Program Director:
Capt Darrell H Hunsaker, MD
Naval Hospital
Dept of Otolaryngology
San Diego, CA 92134-0000
619 535-9604
Length: 3 Year(s) Total Positions: 12 (GYT: 3)
Program ID: 260-05-11487

University of California (San Diego) Program
University of California (San Diego) Medical Center
Kaiser Foundation Hospital (San Diego)
Veterans Affairs Medical Center (San Diego)
Program Director:
Jeffrey P Harris, MD PhD
University of California San Diego Medical Center
Div of Head and Neck Surgery
200 W Arbor Dr
San Diego, CA 92103-8806
619 545-6910
Length: 4 Year(s) Total Positions: 9 (GYT: 0)
Program ID: 260-05-21421

San Francisco
University of California (San Francisco) Program
University of California (San Francisco) School of Medicine
San Francisco General Hospital Medical Center
University of California (San Francisco) Medical Center
Veterans Affairs Medical Center (San Francisco)
Program Director:
Kevan C Lee, MD
University of California (San Francisco)
360 Parnassus Ave
San Francisco, CA 94143-0968
415 476-4925
Length: 4 Year(s) Total Positions: 12 (GYT: 0)
Program ID: 260-05-21422

Stanford
Stanford University Program
Stanford University Hospital
Santa Clara Valley Medical Center
Veterans Affairs Medical Center (Palo Alto)
Program Director:
William E Fee Jr, MD
Stanford University Medical Center
Div of Otolaryngology
Stanford, CA 94305-5338
415 725-6500
Length: 4 Year(s) Total Positions: 15 (GYT: 3)
Program ID: 260-05-21423

Colorado
Denver
University of Colorado Program*
University of Colorado Health Sciences Center
Denver Health and Hospitals
Pittsburgh Army Medical Center
Veterans Affairs Medical Center (Denver)
Program Director:
Michael Leo Legg, MD
Glen Y Yoshida, MD
University of Colorado Health Sciences Center
4200 E 9th Ave Bl-110
Denver, CO 80262-6506
303 270-7689
Length: 4 Year(s) Total Positions: 18 (GYT: 4)
Program ID: 260-07-21-024

Connecticut
Farmington
University of Connecticut Program
University of Connecticut School of Medicine
Hartford Hospital
New Britain General Hospital
St Francis Hospital and Medical Center
Univ of Connecticut Health Center/John Dempsey Hospital
Program Director:
Gerald Leonard, MD
University of Connecticut School of Medicine
263 Farmington Ave
Farmington, CT 06030-3895
203 679-3772
Length: 4 Year(s) Total Positions: 8 (GYT: 3)
Program ID: 260-09-21-025

New Haven
Yale-New Haven Medical Center Program
Yale-New Haven Hospital
Hospital of St Raphael
Veterans Affairs Medical Center (West Haven)
Program Director:
Clarence T Tsakal, MD
Yale School of Medicine Section of Otolaryngology
333 Cedar St
PO Box 208041
New Haven, CT 06510-8041
203 785-1559
Length: 4 Year(s) Total Positions: 10 (GYT: 0)
Program ID: 260-08-21-026

District of Columbia
Washington
Georgetown University Program
Georgetown University Hospital
Veterans Affairs Medical Center (Washington DC)
Washington Hospital Center
Program Director:
Roy B Sessions, MD
George Washington University Hospital
Dept of Otol-Head & Neck Surgery
3800 Reservoir Rd NW
Washington, DC 20007
202 687-8196
Length: 4 Year(s) Total Positions: 12 (GYT: 3)
Program ID: 260-10-32-027

Walter Reed Army Medical Center Program
Walter Reed Army Medical Center
Program Director:
Col Swenn S Stambaugh, MD
Walter Reed Army Medical Center
Otolaryngology Head & Neck Service
6825 16th St NW
Washington, DC 20037-0001
202 282-3166
Length: 3 Year(s) Total Positions: 8 (GYT: 0)
Program ID: 260-10-21-003

Florida
Gainesville
University of Florida Program
University of Florida College of Medicine
Shands Hospital at the University of Florida
University Medical Center (UF/USC)
Veterans Affairs Medical Center (Gainesville)
Program Director:
Scott P Stringer, MD
J Hillo Miller Health Center
Box 10034
Gainesville, FL 32610-0264
354 392-4451
Length: 4 Year(s) Total Positions: 10 (GYT: 0)
Program ID: 260-11-24-028

Miami
University of Miami-Jackson Memorial Medical Center Program
University of Miami-Jackson Memorial Medical Center
Veterans Affairs Medical Center (Miami)
Program Director:
Thomas J Balkany, MD
University of Miami Dept of Otolaryngology (D-48)
PO Box 010969
Miami, FL 33101
305 585-7127
Length: 4 Year(s) Total Positions: 18 (GYT: 3)
Program ID: 260-11-24-29

Tampa
University of South Florida Program
University of South Florida College of Medicine
H Lee Moffitt Cancer Center
James A Haley Veterans Hospital
Tampa General Healthcare
Program Director:
James W Endicott, MD
H Lee Moffitt Cancer Center
12042 Magnolia Dr
Tampa, FL 33612
813 972-8463
Length: 4 Year(s) Total Positions: 8 (GYT: 0)
Program ID: 260-11-31-030

* Updated information not provided.
Georgia

Atlanta

Emory University Program
Emory University School of Medicine
Emory University Hospital
Cobb Memorial Hospital
Henrietta Eggleston Hospital for Children
Veterans Affairs Medical Center (Atlanta)

Program Director:
John S Turner Jr, MD
Emory Clinic
1365 Clifton Rd NE
Atlanta, GA 30322
404 241-3384

Length: 4 Year(s)
Total Positions: 10 (GYI: 2)
Program ID: 280-12-21-051

Augusta

Medical College of Georgia Program
Medical College of Georgia Hospital and Clinics
Veterans Affairs Medical Center (Augusta)

Program Director:
Edward S Porthak, MD
Medical College of Georgia Hospital and Clinics
850 Medical College Pkwy
Augusta, GA 30912-4650
706 721-3047

Length: 4 Year(s)
Total Positions: 10 (GYI: 2)
Program ID: 280-12-21-052

Hawaii

Tripler AMC

Tripler AMC Medical Center Program
Tripler Army Medical Center

Program Director:
LT Col Lawrence P A Burgess, MD
Tripler Army Medical Center
Dept of Surgery
Attn: ES/SH/DSH
Tripler AMC, HI 96859-5000
808 438-3394

Length: 3 Year(s)
Total Positions: 6 (GYI: 0)
Program ID: 280-14-11-116

Illinois

Chicago

McCaw Medical Center of Northwestern University Program
Northwestern University Medical School
Cook County Hospital
McCaw Medical Center of Northwestern University
Veterans Affairs Lakeside Medical Center (Chicago)

Program Director:
David G Haass, MD
Northwestern University Medical School
303 E Chicago Ave
Chicago, IL 60611-3008
312 926-9000

Length: 4 Year(s)
Total Positions: 16 (GYI: 0)
Program ID: 280-16-21-003

Rush-Presbyterian-St Luke's Medical Center Program*
Rush-Presbyterian-St Luke's Medical Center

Program Director:
David D Calabresi, MD
Rush-Presbyterian-St Luke's Medical Center
1653 W Congress Pkwy
Chicago, IL 60612-3804
312 942-4380

Length: 4 Year(s)
Total Positions: 5 (GYI: 1)
Program ID: 280-16-21-034

University of Chicago Program
University of Chicago Hospitals
Louis A Weiss Memorial Hospital

Program Director:
Robert M Nadelso, MD
University of Chicago Medical Center
5841 S Maryland Ave MC1035
Chicago, IL 60637-1470
312 706-6143

Length: 4 Year(s)
Total Positions: 12 (GYI: 2)
Program ID: 280-16-21-035

University of Illinois College of Medicine at Chicago Program
University of Illinois College of Medicine at Chicago
Cook County Hospital
Michael Reese Hospital and Medical Center
University of Illinois Hosp-Illinois Eye and Ear Infirmary
Veterans Affairs Westside Medical Center (Chicago)

Program Director:
Edward L Applebaum, MD
Illinois Eye and Ear Infirmary
1855 W Taylor St VC 648
Chicago, IL 60612
312 996-6502

Length: 4 Year(s)
Total Positions: 25 (GYI: 5)
Program ID: 280-16-21-036

Maywood

Loyola University Program

Paster G McGaw Hospital-Loyola University of Chicago
Edward J Hines V Veterans Affairs Hospital

Program Director:
Gregory J Matz, MD
Loyola University Medical Center
Bldg 105 Rm 1870
2160 S First Ave
Maywood, IL 60153
708 216-0183

Length: 4 Year(s)
Total Positions: 15 (GYI: 3)
Program ID: 280-16-21-037

Springfield

Southern Illinois University Program

Southern Illinois University School of Medicine
Memorial Medical Center
St John's Hospital

Program Director:
Horter K Konrad, MD
Southern Illinois University School of Medicine
201 N Eighth St
Springfield, IL 62704-0230
217 776-8583

Length: 4 Year(s)
Total Positions: 6 (GYI: 1)
Program ID: 280-16-21-119

Indiana

Indianapolis

Indiana University Medical Center Program

Indiana University Medical Center
Richard L Roudebush Veterans Affairs Medical Center
William N Wishard Memorial Hospital

Program Director:
Richard T Miyamoto, MD
Indiana University Medical Center
702 Barnhill Dr
Rm 0860
Indianapolis, IN 46202-0230
317 638-9685

Length: 4 Year(s)
Total Positions: 12 (GYI: 0)
Program ID: 280-17-21-038

Iowa

Iowa City

University of Iowa Hospitals and Clinics Program

University of Iowa Hospitals and Clinics
Veterans Affairs Medical Center (Iowa City)

Program Director:
Bruce J Guz, MD
University of Iowa Hospital & Clinic
Dept of Otolaryngology-Head & Neck
2230 GH
Iowa City, IA 52242-1009
319-356-2173

Length: 4 Year(s)
Total Positions: 20 (GYI: 0)
Program ID: 280-16-21-039

Kansas

Kansas City

University of Kansas Medical Center Program*

University of Kansas School of Medicine
University of Kansas Medical Center
Veterans Affairs Medical Center (Kansas City)

Program Director:
Larry A Hooper, MD
University of Kansas Medical Center
3601 Rainbow Blvd
Kansas City, KS 66160-7380
913 598-8720

Length: 4 Year(s)
Total Positions: 8 (GYI: 0)
Program ID: 280-18-31-040

Kentucky

Lexington

University of Kentucky Medical Center Program

University Hospital-Albert B Chandler Medical Center
Veterans Affairs Medical Center (Lexington)

Program Director:
Ralph O Jones, MD
University of Kentucky Medical Center
Room C238
Lexington, KY 40536-0084
606 257-5097

Length: 4 Year(s)
Total Positions: 6 (GYI: 2)
Program ID: 280-19-21-127

* Updated information not provided.
Accredited Programs in Otolaryngology

Louisville
University of Louisville Program
University of Louisville School of Medicine
Kosair Children’s Hospital (Alliant Health System)
Norton Hospital (Alliant Health System)
University of Louisville Hospital
Veterans Affairs Medical Center (Louisville)
Program Director:
Tom M Ganzel, MD
University of Louisville Health Science Center
Div of Otolaryngology
Louisville, KY 40292
502-852-6894
Length: 4 Year(s) Total Positions: 8 (GYI: 2)
Program ID: 280-2051-041

Maryland
Baltimore
Johns Hopkins University Program
Johns Hopkins University School of Medicine
Greater Baltimore Medical Center
Johns Hopkins Bayview Medical Center
Johns Hopkins Hospital
Program Director:
Wayne M Koch, MD
The Johns Hopkins Hospital
Dept of Otolaryngology
PO Box 41552
Baltimore, MD 21208-4026
410-614-6002
Length: 4 Year(s) Total Positions: 25 (GYI: 0)
Program ID: 280-23-21-047

University of Maryland Program
University of Maryland Medical System
Maryland General Hospital
Program Director:
Douglas F Mazitz, MD
University of Maryland Medical System
22 S Greene St
Rm NW79
Baltimore, MD 21201-1595
410-386-6652
Length: 4 Year(s) Total Positions: 10 (GYI: 3)
Program ID: 280-23-21-045

Tulane University Program
Tulane University School of Medicine
Alton Ochsner Medical Foundation
Eye Ear Nose and Throat Hospital
Medical Center of Louisiana at New Orleans-Tulane Division
Tulane University Hospital and Clinics
Veterans Affairs Medical Center (Biloxi)
Program Director:
Robert H Miller, MD
Tulane University Medical Center
1430 Tulane Ave SL 9
New Orleans, LA 70112-3699
504-971-7655
Length: 4 Year(s) Total Positions: 16 (GYI: 0)
Program ID: 280-21-21-043

Shreveport
Louisiana State University (Shreveport) Program
Louisiana State University Medical Center-Shreveport
Overton Brooks Veterans Affairs Medical Center
Program Director:
Frederick J Slentker Jr, MD
Louisiana State University Medical Center Hospital
Medical Education Otolaryngology
1604 Kings Hwy/PO Box 50932
Shreveport, LA 71130-3932
318-677-6262
Length: 4 Year(s) Total Positions: 12 (GYI: 2)
Program ID: 280-21-21-121

Massachusetts Eye and Ear Infirmary/Harvard Medical School Program
Massachusetts Eye and Ear Infirmary
Beth Israel Hospital
Program Director:
Joseph B Nadol Jr, MD
243 Charles St
Boston, MA 02114
617-573-3854
Length: 4 Year(s) Total Positions: 20 (GYI: 0)
Program ID: 280-24-21-049

Tufts University Program
New England Medical Center Hospitals
Boston City Hospital
Boston University Medical Center University Hospital
Lahey Clinic
Veterans Affairs Medical Center (Boston)
Program Director:
Stanley M Shapshay, MD
New England Medical Center
750 Washington St
PO Box 850
Boston, MA 02111
617-956-1602
Length: 4 Year(s) Total Positions: 8 (GYI: 0)
Program ID: 280-24-31-050

Michigan
Ann Arbor
University of Michigan Program*
University of Michigan Hospitals
Veterans Affairs Medical Center (Ann Arbor)
Program Director:
Gregory T Wolf, MD
University of Michigan Hospitals
Dept of Otolaryngology
1560 E Medical Center Dr T C1904
Ann Arbor, MI 48109-0112
313-853-8209
Length: 4 Year(s) Total Positions: 16 (GYI: 0)
Program ID: 280-25-21-052

Detroit
Henry Ford Hospital Program
Henry Ford Hospital
Program Director:
Samuel A Mickelson, MD
Henry Ford Hospital
Dept of Otolaryngology
2799 W Grand Blvd
Detroit, MI 48202-2689
313-876-2761
Length: 4 Year(s) Total Positions: 12 (GYI: 3)
Program ID: 280-25-13-052

Wayne State University/Detroit Medical Center Program
Wayne State University School of Medicine
Children’s Hospital of Michigan
Detroit Receiving Hospital and University Health Center
Harper Hospital
Veterans Affairs Medical Center (Allen Park)
Program Director:
Robert H Mathog, MD
Wayne State University Dept of Otolaryngology
4201 St Antoine St UHC
Detroit, MI 48201
313-577-0804
Length: 4 Year(s) Total Positions: 16 (GYI: 0)
Program ID: 280-25-21-052

* Updated information not provided.
Minneapolis

**University of Minnesota Program**
University of Minnesota Medical School
Hennepin County Medical Center
St Paul Ramsey Medical Center
University of Minnesota Hospital and Clinic
Veterans Affairs Medical Center (Minneapolis)

**Program Director:**
George L. Adams, MD
Dept of Otolaryngology
Box 366 University Hospital
425 Delaware St SE
Minneapolis, MN 55455
612 343-3290
Length: 4 Year(s) Total Positions: 17 (GYI: 0)
Program ID: 280-28-31-465

**Columbia**

**University of Missouri-Columbia Program**
University of Missouri-Columbia School of Medicine
Harry S Truman Memorial Veterans Hospital
University of Children's Hospital

**Program Director:**
William E Davis, MD
University of Missouri Medical Center
Otolaryngology M4341
One Hospital Dr
Columbia, MO 65212
314 882-6173
Length: 4 Year(s) Total Positions: 10 (GYI: 2)
Program ID: 280-28-31-465

**St Louis**

**St Louis University Group of Hospitals Program**
St Louis University School of Medicine
Cardinal Glennon Children's Hospital
Deaconess Hospital
St John's Mercy Medical Center
St Louis University Hospital

**Program Director:**
Gregory H Brachman, MD
St Louis University Medical Center
Dept of Oto-Head & Neck Surgery
3635 Vista Ave Grand
St Louis, MO 63110-0250
314 577-8884
Length: 4 Year(s) Total Positions: 10 (GYI: 2)
Program ID: 280-28-31-465

**Washington University Program**
Barnes Hospital
Jewish Hospital of St Louis
St Louis Children's Hospital
St Louis Regional Medical Center
Veterans Affairs Medical Center (St Louis)

**Program Director:**
Joel A Groebel, MD
Attn: Pac Bryan
817 S Euclid Campus Box 8115
St Louis, MO 63110
314 363-2073
Length: 4 Year(s) Total Positions: 20 (GYI: 4)
Program ID: 280-28-31-465

**Mississippi**

**Jackson**

**University of Mississippi Medical Center Program**
University of Mississippi School of Medicine
University Hospital
Veterans Affairs Medical Center (Jackson)

**Program Director:**
Vinoth Kumar Anand, MD
University of Mississippi Medical Center
2500 N State St
Jackson, MS 39216-4505
601 828-5143
Length: 4 Year(s) Total Positions: 10 (GYI: 2)
Program ID: 280-28-31-122

**New Jersey**

**Newark**

**UMDNJ-New Jersey Medical School Program**
UMDNJ-New Jersey Medical School
Dept of Veterans Affairs Medical Center (East Orange)
Newark Eye and Ear Infirmary (United Hospitals Med Ctr)
St Barnabas Medical Center
UMDNJ-University Hospital

**Program Director:**
Soly Baradez, MD
UMDNJ-New Jersey Medical School Section of Otolaryngology
195 S Orange Ave Rm H-692
Newark, NJ 07103-2714
201 992-4588
Length: 4 Year(s) Total Positions: 8 (GYI: 0)
Program ID: 280-33-31-082

**New Mexico**

**Albuquerque**

**University of New Mexico Program**
University of New Mexico School of Medicine
Lovelace Medical Center
University Hospital
Veterans Affairs Medical Center (Albuquerque)

**Program Director:**
Fred S Herron, MD
University Hospital
2211 Lomas Blvd NE
Box 290
Albuquerque, NM 87106-3745
505 273-6452
Length: 4 Year(s) Total Positions: 5 (GYI: 1)
Program ID: 280-34-31-126

**New York**

**Albany**

**Albany Medical Center Program**
Albany Medical Center Hospital
Child's Hospital
St Peter's Hospital
Veterans Affairs Medical Center (Albany)

**Program Director:**
Steven M Parpes, MD
Albany Medical College (A-41)
47 New Scotland Ave
Albany, NY 12208-5470
518 262-5897
Length: 4 Year(s) Total Positions: 8 (GYI: 2)
Program ID: 280-35-31-083

*Updated information not provided.*
Bronx
Albert Einstein College of Medicine
Program
Albert Einstein College of Medicine of Yeshiva University
Bronx Municipal Hospital Center
Montefiore Medical Center-Henry and Lucy Moses Division
Montefiore Medical Center-Walter Hospital
Program Director:
Robert J Ruben, MD
Montefiore Medical Center
111 E 210th St
Bronx, NY 10467
718 926-2991
Length: 4 Year(s) Total Positions: 16 (GY: 1)
Program ID: 280-35-21-045

Brooklyn
SUNY Health Science Center at Brooklyn
Program
SUNY BSC at Brooklyn College of Medicine
Kings County Hospital Center
Long Island College Hospital
University Hospital SUNY Health Science Center at Brooklyn
Veterans Affairs Medical Center (Brooklyn)
Program Director:
Frank L Luceote, MD
Long Island College Hospitals
Depto of Otolaryngology
340 Henry St
Brooklyn, NY 11201
718 780-1281
Length: 4 Year(s) Total Positions: 15 (GY: 2)
Program ID: 280-35-21-123

Buffalo
SUNY at Buffalo Graduate Medical-Dental Education Consortium
Program
SUNY at Buffalo Grad Medical-Dental Education Consortium
Buffalo General Hospital
Erie County Medical Center
Sisters of Charity Hospital
Program Director:
George T Simpson, MD
130 LeBrun Rd
Buffalo, NY 14215
716 829-2429
Length: 4 Year(s) Total Positions: 12 (GY: 0)
Program ID: 280-35-21-064

New Hyde Park
Albert Einstein College of Medicine at Long Island Jewish Medical Center
Program
Long Island Jewish Medical Center
Queens Hospital Center
Program Director:
Allan L Abramson, MD
Long Island Jewish Medical Center
370-05 76th Ave
New Hyde Park, NY 11040
718 470-7555
Length: 4 Year(s) Total Positions: 4 (GY: 0)
Program ID: 280-35-21-067

New York
Columbia University Program
Presbyterian Hospital in the City of New York
St Luke's-Roosevelt Hospital Center-Roosevelt Division
St Luke's-Roosevelt Hospital Center-St Luke's Division
Program Director:
Lanny G Close, MD
Presbyterian Hospital in the City of New York
622 W 168th St
New York, NY 10032
212 956-8880
Length: 4 Year(s) Total Positions: 11 (GY: 0)
Program ID: 280-35-21-147

Manhattan Eye Ear and Throat Hospital Program
Manhattan Eye Ear and Throat Hospital
Memorial Sloan-Kettering Cancer Center
New York Hospital
Program Director:
Simon C Parisier, MD
Manhattan Eye Ear and Throat Hospital
Dept of Otolaryngology
210 E 64th St
New York, NY 10021
212 838-9200
Length: 4 Year(s) Total Positions: 16 (GY: 0)
Program ID: 280-35-21-060

Mount Sinai School of Medicine Program
Mount Sinai School of Medicine
Emory Hospital Center-Mount Sinai Services
Mount Sinai Medical Center
Veterans Affairs Medical Center (Brooklyn)
Program Director:
Hugh P Miller, MD
Mount Sinai Hospital Dept of Otolaryngology
One Gustave L Levy Pl
Box #1199
New York, NY 10029
212 274-3200
Length: 3 Year(s) Total Positions: 18 (GY: 0)
Program ID: 280-35-21-046

New York University Medical Center Program
New York University Medical Center
Bellevue Hospital Center
Veterans Affairs Medical Center (Manhattan)
Program Director:
Noel L Cohen, MD
New York University Medical Center
550 First Ave
New York, NY 10016
212 292-6344
Length: 4 Year(s) Total Positions: 14 (GY: 0)
Program ID: 280-35-21-073

North Carolina
Chapel Hill
University of North Carolina Hospitals Program
University of North Carolina Hospitals
Wake Medical Center
Program Director:
Harold C Pillsbury III, MD
University of North Carolina School of Medicine
Div of Otolaryng-Head & Neck Surgery
610 Burnett-Wuacack Bldg CB #0700
Chapel Hill, NC 27598-7070
919 843-3341
Length: 4 Year(s) Total Positions: 14 (GY: 3)
Program ID: 280-35-21-060

Stony Brook
SUNY at Stony Brook Program*
University Hospital-SUNY at Stony Brook
Veterans Affairs Medical Center (Northport)
Program Director:
Arnold E Katz, MD
SUNY at Stony Brook
Div of Otolaryngology
33 Research Way
East Setauket, NY 11733
631 444-4122
Length: 4 Year(s)
Program ID: 280-35-21-128

Syracuse
SUNY Health Science Center at Syracuse Program
University Hospital-SUNY Health Science Center at Syracuse
Crean-Irving Memorial Hospital
Veterans Affairs Medical Center (Syracuse)
Program Director:
Robert M Kellman, MD
SUNY Upstate Medical Center
700 E Adams St
Syracuse, NY 13210
315 464-4036
Length: 4 Year(s) Total Positions: 11 (GY: 0)
Program ID: 280-35-21-079

Valhalla
New York Medical College (Manhattan) Program
New York Medical College
New York Eye and Ear Infirmary
Lincoln Medical and Mental Health Center
St Vincent's Hospital and Medical Center of New York
Program Director:
Steven D Schaefer, MD
New York Eye and Ear Infirmary
310 E 14th St
New York, NY 10003
212 978-4071
Length: 4 Year(s) Total Positions: 15 (GY: 0)
Program ID: 280-35-21-072

* Updated information not provided.

Graduate Medical Education Directory
Accredited Programs in Otolaryngology

Durham
Duke University Program
Duke University Medical Center
Veterans Affairs Medical Center (Durham)
Program Director: William J Richtsmeier, MD PhD
Duke University Medical Center
PO Box 3805
Durham, NC 27710
919 668-5820
Length: 3 Year(s) Total Positions: 9 (GYT: 0)
Program ID: 280-38-21-002

Winston-Salem
Bowman Gray School of Medicine Program
North Carolina Baptist Hospital
Program Director: Robert I. Kohut, MD
Bowman Gray School of Medicine
Medical Center Blvd
Winston-Salem, NC 27157-1094
336 716-3648
Length: 4 Year(s) Total Positions: 7 (GYT: 2)
Program ID: 280-38-11-002

Ohio
Cincinnati
University of Cincinnati Hospital Group Program
University of Cincinnati Hospital
Children’s Hospital Medical Center
Veterans Affairs Medical Center (Cincinnati)
Program Director: Myles L. Pensak, MD
University of Cincinnati Medical Center
PO Box 678038
331 Bethesda Ave
Cincinnati, OH 45267-0528
513 558-4168
Length: 4 Year(s) Total Positions: 19 (GYT: 0)
Program ID: 280-38-21-003

Cleveland
Case Western Reserve University Program
University Hospitals of Cleveland
MetroHealth Medical Center
Veterans Affairs Medical Center (Cleveland)
Program Director: David W. Speigle, MD
University Hospitals of Cleveland
Dept of Oto-Head & Neck Surgery
11190 East Blvd
Cleveland, OH 44106-5045
216 644-5004
Length: 4 Year(s) Total Positions: 13 (GYT: 0)
Program ID: 280-38-21-124

Cleveland Clinic Foundation Program
Cleveland Clinic Foundation
Program Director: Gordon S Hughes, MD
Cleveland Clinic Foundation
Dept of Otolaryngology
6000 Euclid Ave 1702
Cleveland, OH 44195-5342
216 444-5690
Length: 3 Year(s) Total Positions: 15 (GYT: 3)
Program ID: 280-38-22-005

Columbus
Ohio State University Program
Ohio State University Medical Center
Children’s Hospital Program Director: David E. Schuller, MD
Ohio State University Hospital
4100 Grove Blvd Clinic
645 W 10th Ave
Columbus, OH 43210-1282
614 294-4150
Length: 4 Year(s) Total Positions: 12 (GYT: 0)
Program ID: 280-38-31-007

Oklahoma
Oklahoma City
University of Oklahoma Health Sciences Center Program
University of Oklahoma College of Medicine-Oklahoma City
Baptist Medical Center of Oklahoma
Children’s Hospital of Oklahoma
University Hospital and Clinics
Veterans Affairs Medical Center (Oklahoma City)
Program Director: Jesus E Medina, MD
University of Oklahoma Health Science Center 3SP410
PO Box 28601
Oklahoma City, OK 73106-0048
405 271-5054
Length: 4 Year(s) Total Positions: 11 (GYT: 2)
Program ID: 280-38-21-008

Oregon
Portland
Oregon Health Sciences University Program
Oregon Health Sciences University Hospital
Veterans Affairs Medical Center (Portland) Program Director: Alexander J. Schiewing, MD
Oregon Health Sciences University
2181 SW Sam Jackson Park Rd
Dept of Otolaryngology PV-01
Portland, OR 97201-3080
503 494-5674
Length: 4 Year(s) Total Positions: 10 (GYT: 2)
Program ID: 280-40-21-009

Pennsylvania
Danville
Geisinger Medical Center Program
Geisinger Medical Center Program Director: Donald P. VanBeek, MD
Geisinger Medical Center
100 N Academy Ave
Danville, PA 17822
717 571-5628
Length: 4 Year(s) Total Positions: 10 (GYT: 2)
Program ID: 280-41-12-006

Hershey
Milton S Hershey Medical Center of Pennsylvania State University Program
Penn State University Hospital-Milton S Hershey Med Ctr
Program Director: David A. Wieczorek, MD
Milton S Hershey Medical Center of Penn State Univ
Dept of Otolaryngology
PO Box 800
Hershey, PA 17033-0850
717 531-8946
Length: 4 Year(s) Total Positions: 4 (GYT: 1)
Program ID: 280-41-11-001

Philadelphia
Temple University Program
Temple University Hospital
Hahnemann University Hospital
St Christopher’s Hospital for Children
Program Director: Max L. Reins, MD
Temple University Hospital
3400 N Broad St
Philadelphia, PA 19140-5104
215 746-7065
Length: 4 Year(s) Total Positions: 8 (GYT: 2)
Program ID: 280-41-21-002

Thomas Jefferson University Program
Thomas Jefferson University Hospital
Pennsylvania Hospital
Veterans Affairs Medical Center (Wilkesboro)
Program Director: William M. Keane, MD
Louis D. Lewy, MD
Thomas Jefferson University Dept of Otolaryngology
Clinical Office Bldg
900 Walnut St 3rd Fl
Philadelphia, PA 19107-5063
215 865-6704
Length: 4 Year(s) Total Positions: 16 (GYT: 0)
Program ID: 280-41-21-003

University of Pennsylvania Program
Hospital of the University of Pennsylvania
Children’s Hospital of Philadelphia
Graduate Hospital
Veterans Affairs Medical Center (Philadelphia)
Program Director: David W. Kennedy, MD
University of Pennsylvania Medical Center Dept of Oto
500 S. Spruce St
5 2nd Floor
Philadelphia, PA 19104
215 662-5503
Length: 4 Year(s) Total Positions: 20 (GYT: 4)
Program ID: 280-41-21-004

University of Pittsburgh Program
University Health Center of Pittsburgh Program
University Health Center of Pittsburgh
Allegheny General Hospital
Children's Hospital of Pittsburgh
Presbyterian University Hospital/UPMC
Veterans Affairs Medical Center (Pittsburgh)
Program Director: Eugene N Myers, MD
The Eye & Ear Institute Building
205 Lothrop St
Suite 500
Pittsburgh, PA 15213
412 647-5110
Length: 4 Year(s) Total Positions: 23 (GYT: 0)
Program ID: 280-41-31-006

* Updated information not provided.
Puerto Rico

San Juan

University of Puerto Rico Program
University of Puerto Rico School of Medicine
San Juan City Hospital
University Hospital
Veterans Affairs Medical Center (San Juan)
Program Director: Juan Trinidad-Pinedo, MD
University of Puerto Rico School of Medicine
Dept of Otolaryngology
GPO Box 5867
San Juan, PR 00936
809-785-0240
Length: 4 Year(s) Total Positions: 9
Program ID: 280-43-31498

South Carolina

Charleston

Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
Charleston Memorial Hospital
MUSC Medical Center
Naval Hospital (Charleston)
Veterans Affairs Medical Center (Charleston)
Program Director: Warren Y Adkins, MD
Medical University of South Carolina
Dept of Oto & Communicative Science
171 Ashley Ave
Charleston, SC 29425-2942
803-792-7161
Length: 4 Year(s) Total Positions: 8 (GYI: 0)
Program ID: 280-44-21-100

Tennessee

Memphis

University of Tennessee Program
University of Tennessee College of Medicine
Baptist Hospital
Methodist Hospital-Central Unit
Regional Medical Center at Memphis
University of Tennessee College of Medicine
Veterans Affairs Medical Center (Memphis)
Program Director: Frank S Song, MD
University of Tennessee Medical Center
Dept of Otolaryngology
965 Court Ave Rm B226 Coleman
Memphis, TN 38163
901-258-586
Length: 4 Year(s) Total Positions: 12 (GYI: 0)
Program ID: 280-47-51-101

Nashville

Vanderbilt University Program
Vanderbilt University Medical Center
Veterans Affairs Medical Center (Nashville)
Program Director: Robert H Goodell, DMD MD
Vanderbilt University Medical School
Dept of Otolaryngology S2100 MC
Nashville, TN 37232-2659
615-343-7067
Length: 4 Year(s) Total Positions: 18 (GYI: 3)
Program ID: 280-47-21-135

Texas

Dallas

University of Texas Southwestern Medical School Program
University of Texas Southwestern Medical School
Children's Medical Center of Dallas
Dallas County Hospital District-Parkland Memorial Hospital
John Peter Smith Hospital (Tarrant County Hospital District)
St Paul Medical Center
Veterans Affairs Medical Center (Dallas)
Program Director: William L Myeroff, MD PhD
Univ of Texas Southwestern Medical Center
5333 Harry Hines Blvd
Dallas, TX 75235-9055
214-648-3432
Length: 4 Year(s) Total Positions: 24 (GYI: 4)
Program ID: 280-48-21-102

Fort Sam Houston

Brooke Army Medical Center Program
Brooke Army Medical Center
Program Director: Sylvester L Ramirez, MD
Brooke Army Medical Center Otolaryngology Service
Fort Sam Houston
San Antonio, TX 78234-0200
210-916-9518
Length: 3 Year(s) Total Positions: 8 (GYI: 2)
Program ID: 280-48-21-104

Galveston

University of Texas Medical Branch Hospitals Program
University of Texas Medical Branch Hospitals
Program Director: Byron J Bailey, MD
University of Texas Medical Branch Hospitals
301 University Blvd 0521
Dept of Otolaryngology
Galveston, TX 77555-0551
409-772-5623
Length: 4 Year(s) Total Positions: 16 (GYI: 3)
Program ID: 280-48-21-103

Houston

Baylor College of Medicine Program
Baylor College of Medicine
Harris County Hospital District-Ben Taub General Hospital
Methodist Hospital
Veterans Affairs Medical Center (Houston)
Program Director: Bobby R Allred, MD
Baylor College of Medicine
Dept of Otolarynology
Houston, TX 77030
713-798-5866
Length: 4 Year(s) Total Positions: 16 (GYI: 0)
Program ID: 280-48-31-104

Utah

Salt Lake City

University of Utah Program
University of Utah Medical Center
Primary Children's Medical Center
Veterans Affairs Medical Center (Salt Lake City)
Program Director: Kim K Davis, MD
University of Utah School of Medicine
Div of Otolaryngology - HNS
50 N Medical Dr Rm 2C1209
Salt Lake City, UT 84132
801-581-7114
Length: 4 Year(s) Total Positions: 8 (GYI: 2)
Program ID: 280-49-21-107

* Updated information not provided.
Accredited Programs in Otolaryngology

Vermont

Burlington

Medical Center Hospital of Vermont Program
Medical Center Hospital of Vermont
Dartmouth-Hitchcock Medical Center

Program Director:
Robert A. Sofferman, MD
Medical Center Hospital of Vermont
1 S Prospect St
Burlington, VT 05401
802 656-4635

Length: 4 Year(s)  Total Positions: 5 (GYT: 1)
Program ID: 209-59-11-108

Virginia

Charlottesville

University of Virginia Program
University of Virginia Medical Center

Program Director:
Robert W. Cantrell, MD
University of Virginia Medical Staff Residency Office
Atttn: Dr. Dalton Hockenbury
Medical Center Box 136
Charlottesville, VA 22908
804 924-5604

Length: 4 Year(s)  Total Positions: 12 (GYT: 9)
Program ID: 209-51-21-109

Norfolk

Eastern Virginia Graduate School of Medicine Program
Eastern Virginia Graduate School of Medicine
Naval Medical Center (Portsmouth)
Sentara Norfolk General Hospital

Program Director:
Michael F. Pratt, MD
Eastern Virginia Medical School
Dept of Otolaryngology-Head & Neck Surg
820 Fairfax Ave Ste 510
Norfolk Virginia, VA 23507-1912
804 446-5004

Length: 4 Year(s)  Total Positions: 8 (GYT: 2)
Program ID: 209-51-21-110

Portsmouth

Naval Medical Center (Portsmouth) Program
Naval Medical Center (Portsmouth)

Program Director:
Lorenz P. Lassen, MD
Otolaryngology-Head and Neck Surgery Dept
Naval Medical Center
630 John Paul Jones Circle
Portsmouth, VA 23708-6100
757 588-5000

Length: 3 Year(s)  Total Positions: 6 (GYT: 0)
Program ID: 209-51-31-120

Richmond

Medical College of Virginia/Virginia Commonwealth University Program*
Medical College of Virginia/Virginia Commonwealth University
Hunter Holmes McGuire VA Medical Center (Richmond)
Medical College of Virginia Hospitals

Program Director:
Aristides Siemionow, MD
MC/Virginia Commonwealth Univ
PO Box 899146
Richmond, VA 23298-5146
804 788-3065

Length: 4 Year(s)  Total Positions: 5 (GYT: 1)
Program ID: 289-51-21-111

Washington

Seattle

University of Washington Program
University of Washington School of Medicine
University of Washington Medical Center
Veterans Affairs Medical Center (Seattle)

Program Director:
Ernest A. Weintritt Jr, MD
Dept of Otolaryngology-Head and Neck Surgery RL-36
1659 NE Pacific Ave
Seattle, WA 98105
206 543-5083

Length: 4 Year(s)  Total Positions: 15 (GYT: 0)
Program ID: 209-54-21-112

Tacoma

Madigan Army Medical Center Program
Madigan Army Medical Center

Program Director:
David G. Schall, MD MPH
Madigan Army Medical Center
Otolaryngology-Head and Neck Surg.
Attn: HS8U-SFT
Tacoma, WA 98431-5000
254 966-1499

Length: 3 Year(s)  Total Positions: 7 (GYT: 0)
Program ID: 209-54-31-405

West Virginia

Morgantown

West Virginia University Program
West Virginia University Hospitals
Louis A Johnson Veterans Affairs Medical Center

Program Director:
Stephen J. Wenzore, MD
West Virginia University Dept of Otolaryngology
2222 Health Sciences S
PO Box 9208
Morgantown, WV 25606-9200
304 293-3457

Length: 4 Year(s)  Total Positions: 16 (GYT: 8)
Program ID: 250-65-11-113

Wisconsin

Madison

University of Wisconsin Program
University of Wisconsin Hospital and Clinics
Madison Hospital
William S Middleton Veterans Hospital

Program Director:
Charles N Ford, MD
University of Wisconsin Hospital
Oto Head & Neck Surgery 144710
600 Highland Ave
Madison, WI 53792-3238
608 255-7064

Length: 4 Year(s)  Total Positions: 8 (GYT: 0)
Program ID: 209-54-21-114

Milwaukee

Medical College of Wisconsin Program
Medical College of Wisconsin Affiliated Hospitals Inc
Children's Hospital of Wisconsin
Clement J Zablocki Veterans Affairs Medical Center
Frederick Memorial Lutheran Hospital

Program Director:
Bruce H. Campbell, MD
Medical College of Wisconsin Clinic at Froedtert Hospital
Dept of Otolaryngology
2500 W Wisconsin Ave
Milwaukee, WI 53226
414 456-5383

Length: 4 Year(s)  Total Positions: 15 (GYT: 3)
Program ID: 209-54-21-115

* Updated information not provided.
# Accredited Programs in Pain Management (Anesthesiology)

## Connecticut

### Hartford

**Hartford Hospital Program**
- Hartford Hospital
- Newington Children's Hospital
- **Program Director:** Jeffrey S Morrow, MD
- 80 Seymour St
- Hartford, CT 06102-5837
- **Program ID:** 048-08-21-657
- **Length:** 1 Year(s)

## District of Columbia

### Washington

**Georgetown University Program**
- Georgetown University Hospital
- NIH Warren Grant Magnuson Clinical Center
- **Program Director:** Charles A Busanell, MD
- 3800 Reservoir Rd NW
- Washington, DC 20007
- **Program ID:** 048-10-21-655
- **Length:** 1 Year(s)

## Florida

### Gainesville

**University of Florida Program**
- University of Florida College of Medicine
- Shands Hospital at the University of Florida
- **Program Director:** Jerry J Berger, MD
- 3073 SW 12th Ave
- Gainesville, FL 32610-3054
- **Program ID:** 048-11-21-648
- **Length:** 1 Year(s)

## Georgia

### Atlanta

**Emory University Program**
- Emory University School of Medicine
- Crawford Long Hospital of Emory University
- **Program Director:** Allen H Hord, MD
- Emory University
- 1365 Clifton Rd
- Atlanta, GA 30322
- **Program ID:** 048-12-21-604
- **Length:** 1 Year(s)

## Illinois

### Chicago

**McGaw Medical Center of Northwestern University Program**
- Northwestern University Medical School
- Northwestern Memorial Hospital
- **Program Director:** Honoria T Benson, MD
- Northwestern Univ Medical School
- Dept of Anesthesiology
- 303 E Superior Rm 369
- Chicago, IL 60611-3653
- **Program ID:** 048-16-21-005
- **Length:** 1 Year(s)

## San Diego

### University of California (San Diego) Program

- University of California (San Diego) Medical Center
- Veterans Affairs Medical Center (San Diego)
- **Program Director:** Harvey M Shapiro, MD
- 200 W Asher Dr
- San Diego, CA 92103-9001
- **Program ID:** 048-05-21-047
- **Length:** 1 Year(s)

## Stanford

### Stanford University Program

- Stanford University Hospital
- **Program Director:** William G Brose, MD
- Dept of Anesthesiology Pain Management Stanford Univ Sch of Medicine
- S288-A 2nd Bldg/020 Pasteur Dr
- Stanford, CA 94305
- **Program ID:** 048-05-21-059
- **Length:** 1 Year(s)

## Orange

**University of California (Irvine) Program**
- University of California (Irvine) Medical Center
- **Program Director:** Earl Anthony Hess, MD
- PO Box 14091
- Orange, CA 92631-1401
- **Program ID:** 048-05-31-002
- **Length:** 1 Year(s)

## Tampa

**University of South Florida Program**
- University of South Florida College of Medicine
- James A Haley Veterans Hospital
- **Program Director:** Majid B Deraami, MD
- USF College of Medicine
- 1201 Bruce B Downs Blvd
- MDC 50
- Tampa, FL 33612-4799
- **Program ID:** 048-11-21-650
- **Length:** 1 Year(s)
- **Total Positions:** 6

## Stanford University Program

- Stanford University Hospital
- **Program Director:** William G Brose, MD
- Dept of Anesthesiology Pain Management Stanford Univ Sch of Medicine
- S288-A 2nd Bldg/020 Pasteur Dr
- Stanford, CA 94305
- **Program ID:** 048-05-21-059
- **Length:** 1 Year(s)

* Updated information not provided.

Graduate Medical Education Directory 611
Accredited Programs in Pain Management (Anesthesiology)

Indiana

Indianapolis

Indiana University Medical Center
Program
Indiana University Medical Center
Program Director:
John B Ward, MD
Indiana Univ Med Ctr
1120 South Dr
Polaris Hall 204
Indianapolis, IN 46202-5115
317 274-6065
Length: 1 Year(s)  Total Positions: 1
Program ID: 048-17-21-039

University of Maryland Program*
University of Maryland Medical System
Program Director:
Arthur Melholland, MD
Univ of Maryland
Dept of Anesthesiology
22 S Greene St Ste 511C
Baltimore, MD 21201
410-328-5003
Length: 1 Year(s)  Total Positions: 4
Program ID: 048-23-31-009

Massachusetts

Boston

Beth Israel Hospital Program
Beth Israel Hospital
Children's Hospital
Program Director:
Carol A Warfield, MD
Beth Israel Hospital
Pain Management Center
300 Brookline Ave
Boston, MA 02215
617 736-5725
Length: 1 Year(s)  Total Positions: 6 (GYI: 0)
Program ID: 048-24-21-010

Brigham and Women's Hospital Program*
Brigham and Women's Hospital
Program Director:
P Michael Ferrante, MD
Dept of Anesthesiology/Pain Management
Brigham and Women's Hospital
75 Francis St
Boston, MA 02115
617 736-6707
Length: 1 Year(s)
Program ID: 048-24-31-043

Brigham and Women's Hospital Program*
Brigham and Women's Hospital
Program Director:
P Michael Ferrante, MD
Dept of Anesthesiology/Pain Management
Brigham and Women's Hospital
75 Francis St
Boston, MA 02115
617 736-6707
Length: 1 Year(s)  Total Positions: 6
Program ID: 048-24-31-043

Massachusetts General Hospital Program*
Massachusetts General Hospital
Program Director:
David Borosock, MD PhD
Massachusetts General Hospital
MGH Pain Center
32 Fruit St
Boston, MA 02114
617 726-3332
Length: 1 Year(s)
Program ID: 048-24-21-040

Springfield

Baystate Medical Center Program
Baystate Medical Center
Program Director:
Robert B Steinberg, PhD MD
Baystate Medical Center
Dept of Anesthesiology
759 Chestnut St
Springfield, MA 01199
413 794-3659
Length: 1 Year(s)  Total Positions: 1
Program ID: 048-24-31-011

Michigan

Ann Arbor

University of Michigan Program*
University of Michigan Hospitals
Program Director:
A Michael de Rosayro, MD
2333 Med Inn Bldg
Ann Arbor, MI 48109-0824
313 763-5469
Length: 1 Year(s)
Program ID: 048-35-31-065

Detroit

Henry Ford Hospital Program*
Henry Ford Hospital
Program Director:
Jyotessa K Shah, MD
2790 W Grand Blvd
Detroit, MI 48202
313 876-8078
Length: 1 Year(s)
Program ID: 048-25-31-061

Minnesota

Rochester

Mayo Graduate School of Medicine (Jacksonville) Program*
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Jacksonville)
St Luke's Hospital
St Mary's Hospital of Rochester
Program Director:
Tim J Lanzer, MD
Mayo Clinic
4500 San Pablo Rd
Jacksonville, FL 32224
904 296-5288
Length: 1 Year(s)
Program ID: 048-11-31-054

Mayo Graduate School of Medicine Program
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Jacksonville)
Mayo Clinic (Rochester)
Mayo Clinic (Scottsdale)
Rochester Methodist Hospital
Scottsdale Memorial Hospital
St Luke's Hospital
St Mary's Hospital of Rochester
Program Director:
Joseph M Messick Jr, MD
Mayo Anesthesiology Residency Program
Mayo Clinic
St Mary's Mary Brigh Rm 2-500
Rochester, MN 55905
507 255-4240
Length: 1 Year(s)  Total Positions: 2
Program ID: 048-20-31-012

* Updated information not provided.
Missouri

St Louis

Washington University Program
Barnes Hospital
St Louis Children's Hospital
Program Director:
Robert A Swarz, MD
Washington Univ School of Medicine
Dept of Anesthesiology
Campus Box 8054 660 S Euclid Ave
St Louis, MO 63110-1993
314 363-8820
Length: 1 Year(s) Total Positions: 2 (GTY: 0)
Program ID: 046-32-21-013

New Mexico

Albuquerque

University of New Mexico Program
University of New Mexico School of Medicine
University Hospital
Veterans Affairs Medical Center (Albuquerque)
Program Director:
Nabil M K Aa, MD
Univ of New Mexico School of Medicine
Dept of Anesthesiology
Pain Management Center
Albuquerque, NM 87131-5316
505-272-5233
Length: 1 Year(s) Total Positions: 8
Program ID: 046-34-21-015

New Hampshire

Lebanon

Dartmouth-Hitchcock Medical Center Program
Mary Hitchcock Memorial Hospital
Dartmouth-Hitchcock Medical Center
Program Director:
Dennis W Coulous, MD
Dept of Anesthesiology
Dartmouth-Hitchcock Med Ctr
One Medical Ctr Dr
Lebanon, NH 03756-6001
603 653-8680
Length: 1 Year(s) Total Positions: 2
Program ID: 046-32-21-044

New Jersey

Newark

UMDNJ-New Jersey Medical School Program
UMDNJ-New Jersey Medical School
UMDNJ-University Hospital
Program Director:
Woo-Ik Kim, MD
UMDNJ-New Jersey Med Schl
Dept of Anesthesiology
90 Bergen St Ste 5400
Newark, NJ 07103-2787
201 999-3090
Length: 1 Year(s) Total Positions: 1
Program ID: 046-32-21-014

Piscataway

UMDNJ-Robert Wood Johnson Medical School Program
UMDNJ-Robert Wood Johnson Medical School
Robert Wood Johnson University Hospital
Program Director:
Young Choi, MD
CN19
One Robert Wood Johnson Pl
New Brunswick, NJ 08903
908 847-8751
Length: 1 Year(s)
Program ID: 046-32-21-053

New York

Albany

Albany Medical Center Program*
Albany Medical Center Hospital
Program Director:
David Richlin, MD
Albany Medical Center Program
Pain Management Center
518 Central Ave
Albany, NY 12206
518 464-0039
Length: 1 Year(s)
Program ID: 046-35-21-016

Brooklyn

Brookdale Hospital Medical Center Program*
Brookdale Hospital Medical Center
Program Director:
Adel A Abdur, MD
Dept of Anesthesiology
Brookdale Hos Med Ctr
600 Pacific St
Brooklyn, NY 11205
718 230-6569
Length: 1 Year(s)
Program ID: 046-35-21-060

SUNY Health Science Center at Brooklyn Program
SUNY HSC at Brooklyn College of Medicine
Kings County Hospital Center
Long Island College Hospital
University Hospital-SUNY Health Science Center at Brooklyn
Program Director:
Mathew LeKowitsa, MD
SUNY Hlth Sc Ctr
Box 6
Brooklyn, NY 11203
718 270-1535
Length: 1 Year(s) Total Positions: 4
Program ID: 046-35-31-050

Buffalo

SUNY at Buffalo Graduate Medical-Dental Education Consortium Program
SUNY at Buffalo Grad Medical-Dental Education Consortium
Buffalo General Hospital
Roswell Park Cancer Institute
Program Director:
Gerald L Poet, MD
SUNY/Anesthesiology
150 High St
Buffalo, NY 14203
716 845-4636
Length: 1 Year(s) Total Positions: 3
Program ID: 046-35-21-017

Mount Sinai School of Medicine Program*
Mount Sinai School of Medicine
Mount Sinai Medical Center
Program Director:
Joel M Kreitzer, MD
Box 1192
One Gustave L Levy Pl
New York, NY 10029
212 241-6373
Length: 1 Year(s)
Program ID: 046-35-31-066

New York Hospital/Cornell Medical Center Program*
New York Hospital
Program Director:
Howard L Rosen, MD
Dept of Anesthesiology
The New York Hosp
525 E 68th St
New York, NY 10021
212 746-2660
Length: 1 Year(s)
Program ID: 046-35-21-049

St Luke's-Roosevelt Hospital Center Program
St Luke's-Roosevelt Hospital Center
Program Director:
Ronny Hertz, MD
St Luke's-Roosevelt Hospital Center
Dept of Anesthesiology
1000 Tenth Ave
New York, NY 10019
212 523-6367
Length: 1 Year(s) Total Positions: 2 (GTY: 0)
Program ID: 046-35-11-018

University of Rochester Program*
Strong Memorial Hospital of the University of Rochester
Moses Community Hospital
Program Director:
Frederick M Perkins, MD
Univ of Rochester Med Ctr
601 Elmwood Ave
Rochester, NY 14642
716 276-2141
Length: 1 Year(s)
Program ID: 046-35-21-051

* Updated information not provided.
Stony Brook
SUNY at Stony Brook Program*
University Hospital-SUNY at Stony Brook
Veterans Affairs Medical Center (Northport)
Program Director:
Farrok R. Maneshka, MD
Health Sciences Center L4-060
Stony Brook, NY 11794-8480
516 444-2975
Length: 1 Year(s)
Program ID: 048-35-11-007

Syracuse
St Joseph's Hospital Health Center Program*
St Joseph’s Hospital Health Center
Program Director:
Robert A. Tise, MD
Suite 1D
5100 W Taft 3d
Liverpool, NY 13088
315 452-2545
Length: 1 Year(s)
Program ID: 048-35-22-068

Valhalla
New York Medical College at Westchester County Medical Center Program
New York Medical College
Westchester County Medical Center
Program Director:
Gregory Kiselbach, MD
New York Med Coll
Dept of Anesthesiology
Grasslands Rd Macy-West
Valhalla, NY 10595
914 235-7092
Length: 1 Year(s) Total Positions: 3 (GYI: 0)
Program ID: 048-35-35-019

North Carolina
Durham
Duke University Program
Duke University Medical Center
Veterans Affairs Medical Center (Durham)
Program Director:
Bruno J Urban, MD
Duke Univ Med Center
Dept of Anesthesiology
Box 3094
Durham, NC 27710
919 684-6542
Length: 1 Year(s) Total Positions: 1
Program ID: 048-36-21-020

Winston-Salem
Bowman Gray School of Medicine Program
North Carolina Baptist Hospital
Program Director:
Richard L. Rainick, MD
Pain Control Center Medical Center Blvd
Winston-Salem, NC 27157-1077
910 716-5530
Length: 1 Year(s) Total Positions: 2
Program ID: 048-36-21-086

Ohio
Cincinnati
University of Cincinnati Hospital Group Program
University of Cincinnati Hospital
Children’s Hospital Medical Center
Program Director:
Richard V Gregg, MD
Medical Arts Bldg Ste 6100
222 Piedmont Ave
Cincinnati, OH 45219
513 475-8600
Length: 1 Year(s) Total Positions: 3 (GYI: 0)
Program ID: 048-38-21-021

Cleveland
Cleveland Clinic Foundation Program
Cleveland Clinic Foundation
Program Director:
Nagy A Mekhail, MD PhD
The Cleveland Clinic Foundation
Dept of Gen Anest Pain Medg Ctr
9500 Euclid Ave T332
Cleveland, OH 44195
216 444-5600
Length: 1 Year(s) Total Positions: 10
Program ID: 048-38-31-022

Oregon
Portland
Oregon Health Sciences University Program*
Oregon Health Sciences University Hospital
Veterans Affairs Medical Center (Portland)
Program Director:
Barbara M Fleming, MD
Oregon Health Sciences Univ
Dept of Anesthesiology
3181 SW Sam Jackson Park Rd
Portland, OR 97201
503 444-7641
Length: 1 Year(s)
Program ID: 048-49-21-023

Pennsylvania
Hershey
Milton S Hershey Medical Center of Pennsylvania State University Program
Penn State University Hospital-Milton S Hershey Med Ctr
Program Director:
Wayne K Marshall, MD
Hershey Med Ctr
Dept of Anesthesia
PO Box 850
Hershey, PA 17033
717 531-6138
Length: 1 Year(s) Total Positions: 2 (GYI: 0)
Program ID: 048-41-31-024

Philadelphia
Albert Einstein Medical Center Program
Albert Einstein Medical Center
Program Director:
Robert A Hirsh, MD
Dept of Anesthesiology
5601 Old York Rd
Tower Bldg 3rd Fl
Philadelphia, PA 19141
215 456-3815
Length: 1 Year(s) Total Positions: 2 (GYI: 0)
Program ID: 048-41-31-007

Temple University Program
Temple University Hospital
Program Director:
Timothy O’Grady, MD
Temple Univ Hosp
Dept of Anesthesiology
Broad & Ontario St
Philadelphia, PA 19140
215 707-1407
Length: 1 Year(s) (GYI: 0)
Program ID: 048-41-31-025

Thomas Jefferson University Program
Thomas Jefferson University Hospital
Program Director:
Ryan D. Frakes, MD PhD
Thomas Jefferson University
834 Chestnut St Ste 7-150
Philadelphia, PA 19107-5127
215 565-7246
Length: 1 Year(s) Total Positions: 3
Program ID: 048-41-31-041

University of Pennsylvania Program
Hospital of the University of Pennsylvania
Children's Hospital of Philadelphia
Veterans Affairs Medical Center (Philadelphia)
Program Director:
Kathleen M Veloso, MD
Univ of Pennsylvania
Dept of Anesthesiology
3400 Spruce St
Philadelphia, PA 19104-4283
215 662-3742
Length: 1 Year(s) Total Positions: 2
Program ID: 048-41-11-026

Pittsburgh
University Health Center of Pittsburgh Program
University Health Center of Pittsburgh Presbyterian-University Hospital/PFM
Program Director:
Brett R Stacey, MD
Univ Hlth Ctr of Pittsburgh
Pain Evaluation & Treatment Inst
4401 Baum Blvd
Pittsburgh, PA 15213
412 578-3100
Length: 1 Year(s) Total Positions: 2
Program ID: 048-41-35-027

* Updated information not provided.
South Carolina

Columbia

Richland Memorial Hospital-University of South Carolina School of Medicine Program
Richland Memorial Hospital-Univ of South Carolina Sch of Med
Program Director:
Ralph J. Delong, MD PACPM
Richland Memorial Hosp-Univ of South Carolina Sch of Med
Dept of Anesthesiology
Five Richland MedicalPk
Columbia, SC 29023
803-792-0000
Length: 1 Year(s) Total Positions: 4
Program ID: 046-45-31-028

Tennessee

Nashville

Vanderbilt University Program*
Vanderbilt University Medical Center
Program Director:
Winston C. Harris, MD
1211 21st Ave S
Medical Arts Bldg Ste 324
Nashville, TN 37222
615-343-7017
Length: 1 Year(s) Program ID: 046-47-21-038

Texas

Dallas

University of Texas Southern Medical School Program*
University of Texas Southern Medical School Dallas County Hospital District-Parkland Memorial Hospital
Texas Scottish Rite Hospital for Children Zale-Lipshy University Hospital
Program Director:
Darrell L. Tseudian, MD
University of Texas Southern Medical Center
3523 Harry Hines Blvd
Dallas, TX 75355-9008
214-598-5489
Length: 1 Year(s) Program ID: 046-48-21-052

Houston

Baylor College of Medicine Program*
Baylor College of Medicine Methodist Hospital
Program Director:
William P. Chilcote, MD
Dept of Anesthesiology Baylor Coll of Med
Smith Tower Ste 1000
6555 Fannin
Houston, TX 77030
713-798-7356
Length: 1 Year(s) Program ID: 046-48-21-045

University of Texas at Houston Program
University of Texas Medical School at Houston Hermann Hospital
Program Director:
Gordon A. Irving, MD
Univ of Texas Medical School at Houston Dept of Anesthesiology
5431 Fannin MSB 5-500
Houston, TX 77030
713-798-7232
Length: 1 Year(s) Total Positions: 2 (GYI: 0) Program ID: 046-48-21-029

Lubbock

Texas Tech University (Lubbock) Program
Texas Tech University Health Sciences Center at Lubbock University Medical Center
Program Director:
Gabor B. Racz, MD
Texas Tech Univ (Lubbock)
Dept of Anesthesiology
3901 Fourth St
Lubbock, TX 79430
806-743-3112
Length: 1 Year(s) Total Positions: 4 (GYI: 0) Program ID: 046-48-21-080

San Antonio

University of Texas Health Science Center at San Antonio Program
University of Texas Medical School at San Antonio Audie L. Murphy Memorial Weaner's Hospital (San Antonio)
University Hospital-South Texas Medical Center Wilford Hall USAF Medical Center (SG)
Program Director:
Som finishing Ramanathan, MD
Univ of Texas Health Science Center at San Antonio Dept of Anesthesiology/Pain Mgmt
7003 Floyd Curl Dr
San Antonio, TX 78284-5538
210-567-4543
Length: 1 Year(s) Total Positions: 2 Program ID: 046-48-21-061

Vermont

Burlington

Medical Center Hospital of Vermont Program*
Medical Center Hospital of Vermont
Program Director:
James S. Sathnell, MD
111 Colchester Ave
Burlington, VT 05401
802-658-2415
Length: 1 Year(s) Program ID: 046-50-31-069

Virginia

Portsmouth

Naval Medical Center (Portsmouth) Program*
Naval Medical Center (Portsmouth)
Program Director:
William L. Little Jr, DO
Naval Hosp
Dept of Anesthesiology
Portsmouth, VA 23708-6110
804-385-7336
Length: 1 Year(s) Program ID: 046-51-21-092

Richmond

Medical College of Virginia/Virginia Commonwealth University Program*
Medical College of Virginia/Virginia Commonwealth University Medical College of Virginia Hospitals
Program Director:
Amir Rafidi, MD
MCV/Virginia Commonwealth Univ PO Box 90016
Richmond, VA 23298-0516
804-786-0182
Length: 1 Year(s) Program ID: 046-51-31-003

Washington

Seattle

University of Washington Program
University of Washington School of Medicine University of Washington Medical Center Veterans Affairs Medical Center (Seattle)
Program Director:
John D. Looser, MD
Univ of Washington Multidisciplinary Pain Ctr RC 06
1950 NE Pacific
Seattle, WA 98195
206-548-4403
Length: 1 Year(s) Total Positions: 4 Program ID: 046-84-21-034

Virginia Mason Medical Center Program
Virginia Mason Medical Center
Program Director:
Gale B. Thompson, MD
Virginia Mason Clinic B2 AN
1100 Ninth Ave PO Box 900
Seattle, WA 98111
206-597-6900
Length: 1 Year(s) Total Positions: 32 (GYI: 4) Program ID: 046-54-21-063

* Updated information not provided.
Wisconsin
Milwaukee
Medical College of Wisconsin Program
Medical College of Wisconsin Affiliated Hospitals Inc
J. D. J. W. Medical Center
Program Director:
Stephen E. Abram, MD
Medical College of Wisconsin Affiliated Hospitals
Dept of Anesthesiology
870 W Wisconsin Ave
Milwaukee, WI 53226
414 278-2589
Length: 1 Year(s)  Total Positions: 2
Program ID: 648-06-51-642

Pathology-Anatomic and Clinical

Alabama

Birmingham

Birmingham Baptist Medical Centers Program
Birmingham Baptist Medical Centers Inc.
Birmingham Baptist Medical Center-Montclair
Birmingham Baptist Medical Center-Princeville
Program Director:
Paul J. Bixas, MD
Baptist Medical Center-Princeton Dept of Pathology
701 Princeton Ave SW
Birmingham, AL 35211
205 738-3340
Length: 4 Year(s)  Total Positions: 8 (GY: 2)
Program ID: 360-01-21-197

University of Alabama Medical Center Program
University of Alabama Hospital
Veterans Affairs Medical Center (Birmingham)
Program Director:
C. Bruce Alexander, MD
University of Alabama at Birmingham
Dept of Pathology WP 2222
University Station
Birmingham, AL 35293-7331
205 874-5892
Length: 4 Year(s)  Total Positions: 22 (GY: 4)
Subspecialties: BKK,CP
Program ID: 360-01-61-818

Mobile

University of South Alabama Program
University of South Alabama Medical Center
Program Director:
J. Allan T. Carter, MD
University of Alabama College of Medicine
Dept of Pathology
2461 Piling St
Mobile, AL 36617
205 471-7789
Length: 4 Year(s)  Total Positions: 12 (GY: 3)
Program ID: 360-06-11-619

Arizona

Phoenix

St Joseph's Hospital and Medical Center Program
St Joseph's Hospital and Medical Center
Program Director:
William D. Anderson, MD
St Joseph's Hospital and Medical Center
Dept of Pathology
PO Box 2971
Phoenix, AZ 85013-2971
602 469-3402
Length: 4 Year(s)  Total Positions: 8 (GY: 1)
Program ID: 309-06-12-222

Tucson

University of Arizona Program
University of Arizona College of Medicine
University Medical Center
Veterans Affairs Medical Center (Tucson)
Program Director:
Richard E. Sobolny, MD
University of Arizona Health Sciences Center
Dept of Pathology
1541 N Campbell Ave
Tucson, AZ 85714-0001
602 261-3100
Length: 4 Year(s)  Total Positions: 17 (GY: 4)
Program ID: 360-03-21-693

Arkansas

Little Rock

University of Arkansas for Medical Sciences Program
University of Arkansas College of Medicine
Arkansas Children's Hospital
John L. McClellan Memorial Veterans Hospital
University Hospital of Arkansas
Program Director:
Aubrey J. Good, MD
University of Arkansas Medical Sciences Dept of Pathology
4301 W Markham St 617
Little Rock, AR 72205-7199
501 686-5170
Length: 4 Year(s)  Total Positions: 16 (GY: 5)
Subspecialties: BKK,CP,CP
Program ID: 360-04-21-824

California

Loma Linda

Loma Linda University Program
Loma Linda University Medical Center
J. M. L. Petkus Memorial Veterans Hospital
Program Director:
Brian A. B. Bull, MD
Jeffrey D. Cao, MD
Loma Linda University Medical Center
Dept of Pathology RM 216
11234 Anderson St
Loma Linda, CA 92354
909 824-4490
Length: 4 Year(s)  Total Positions: 14 (GY: 4)
Program ID: 309-06-12-028

Los Angeles

Cedars-Sinai Medical Center Program
Cedars-Sinai Medical Center
Program Director:
Stephen A. Gelzser, MD
Cedars-Sinai Medical Center
9700 Beverly Blvd
Dept of Pathology & Lab Med
Los Angeles, CA 90048
310 855-6622
Length: 4 Year(s)  Total Positions: 5 (GY: 5)
Subspecialties: BKK,CP,CP
Program ID: 309-06-12-030

* Updated information not provided.

616 Graduate Medical Education Directory
Sacramento
University of California (Davis) Program
University of California (Davis) Medical Center
Program Director:
Robert E. Cardiff, MD
University of California (Davis) Program
Dept of Pathology
2815 Stockton Blvd
Sacramento, CA 95817-2289
916-734-2336
Length: 4 Year(s) Total Positions: 10 (GY: 1)
Program ID: 300-05-11-025

San Diego
Naval Medical Center (San Diego) Program
Naval Medical Center (San Diego)
Program Director:
Frank W. Hummel, MD
Naval Medical Center
34800 Bob Wilson Dr
San Diego, CA 92134-5000
619-532-2200
Length: 4 Year(s) Total Positions: 8 (GY: 0)
Program ID: 300-05-12-011

University of California (San Diego) Program
University of California (San Diego) Medical Center
Veterans Affairs Medical Center (San Diego)
Program Director:
David N. Bailey, MD
University of California San Diego Medical Center
200 W Arbor Dr
San Diego, CA 92103-8330
619-543-6286
Length: 4 Year(s) Total Positions: 18 (GY: 4)
Program ID: 300-05-21-040

San Francisco
University of California (San Francisco) Program
University of California (San Francisco) School of Medicine
San Francisco General Hospital Medical Center
University of California (San Francisco) Medical Center
Veterans Affairs Medical Center (San Francisco)
Program Director:
Carolyn K. Montgomery, MD
C. Diana Nicoll, MD PhD
University of California (San Francisco)
Dept of Pathology
513 Parnassus Ave
San Francisco, CA 94143-0506
415-476-9192
Length: 4 Year(s) Total Positions: 9 (GY: 4)
Program ID: 300-05-21-044

San Jose
Santa Clara Valley Medical Center Program
Santa Clara Valley Medical Center
Program Director:
Randy B大的 King, MD
Santa Clara Valley Medical Center
761 stainless ave
San Jose, CA 95128-2699
408-885-1400
Length: 4 Year(s) Total Positions: 4 (GY: 0)
Program ID: 300-05-12-045

Stanford
Stanford University Program
Stanford University Hospital
California Pacific Medical Center
Veterans Affairs Medical Center (Palo Alto)
Program Director:
Klaus G. Bensch, MD
Stanford University School of Medicine
Dept of Pathology L-205
Stanford, CA 94305-5324
415-723-7975
Length: 4 Year(s) Total Positions: 21 (GY: 7)
Program ID: 300-05-21-046

Torrance
Los Angeles County-Harbor-UCLA Medical Center Program
Los Angeles County-Harbor-UCLA Medical Center
Program Director:
Samuel W. French, MD
Harbor-UCLA of California Los Angeles Medical Center
Dept of Pathology
1000 W Carson St
Torrance, CA 90508-2010
310-223-2301
Length: 4 Year(s) Total Positions: 20 (GY: 4)
Program ID: 300-05-11-947

Colorado
Colorado Springs
Penrose-St Francis Healthcare System Program
Penrose-St Francis Healthcare System
Program Director:
Tobias Kircher, MD
Donald L. Dawson, MD
Penrose Hospital
Dept of Pathology
PO Box 7021
Colorado Springs, CO 80933
719-633-5816
Length: 4 Year(s) Total Positions: 5 (GY: 0)
Program ID: 300-07-12-948

Denver
University of Colorado Program
University of Colorado Health Sciences Center
Denver Health and Hospitals
Veterans Affairs Medical Center (Denver)
Program Director:
Janet K. Stephens, MD PhD
University of Colorado Health Sciences Center
Dept of Pathology Box 216
4200 E Ninth Ave
Denver, CO 80262
303-270-5117
Length: 4 Year(s) Total Positions: 26 (GY: 4)
Program ID: 300-07-21-066

* Updated information not provided.
Connecticut

Danbury

Danbury Hospital Program
Danbury Hospital
Program Director: Ramon N Krammer, MD
Danbury Hospital
Dept of Pathology
21 Hospital Ave
Danbury, CT 06810
203.797.7398
Length: 4 Year(s) Total Positions: 7 (GY: 0)
Program ID: 300-08-11-057

Georgetown University Program
Georgetown University Hospital
Program Director: David P Garcia, MD
David Lachere, MD
Georgetown University Hospitals
3900 Reservoir Rd NW
Washington, DC 20007-2197
202.987.3279
Length: 4 Year(s) Total Positions: 16 (GY: 6)
Subspecialties: Bk
Program ID: 300-10-11-058

Howard University Program
Howard University Hospital
Program Director: Josephina J Marshall, MD
Howard University Hospital
Dept of Pathology
2041 Georgia Ave NW
Washington, DC 20066
202.868.6818
Length: 4 Year(s) Total Positions: 8 (GY: 5)
Subspecialties: Fm
Program ID: 300-10-11-059

Jacksonville

University of Florida Health Science Center/Jacksonville Program
University Medical Center (EITFSF/J)
Program Director: Shahla Masood, MD
Ronald M Shatigan, MD
Uni of Florida Health Sciences Center/Jacksonville
Dept of Pathology
665 W 8th St
Jacksonville, FL 32206-6511
904.549.6397
Length: 4 Year(s) Total Positions: 10 (GY: 3)
Subspecialties: Pcp
Program ID: 300-11-31-074

Miami

University of Miami-Jackson Memorial Medical Center Program
University of Miami-Jackson Memorial Medical Center
Veterans Affairs Medical Center (Miami)
Program Director: Gerald J Byrne Jr, MD
Mehrdad Nadji, MD
Department of Pathology
Jackson Memorial Hospital
1611 NW 12th Ave E Tower Rm 2053
Miami, FL 33136
305.598.7043
Length: 4 Year(s) Total Positions: 21 (GY: 5)
Subspecialties: Fm/Ps/Pf
Program ID: 300-11-31-075

New Haven

Yale-New Haven Medical Center Program*
Yale-New Haven Hospital
Veterans Affairs Medical Center (West Haven)
Program Director: Jose Costa, MD
Yale-New Haven Medc Divmt Center
Dept of Pathology
310 Cedar St
New Haven, CT 06510
203.785.4520
Length: 4 Year(s) Total Positions: 28 (GY: 8)
Program ID: 300-08-21-062

Washington

District of Columbia

George Washington University Program
George Washington University School of Medicine
Children's National Medical Center
George Washington University Hospital
Veterans Affairs Medical Center (Washington DC)
Program Director: Hemali Sidransky, MD
George Washington University Hospital
2300 I St NW
Washington, DC 20037
202.994.3994
Length: 4 Year(s) Total Positions: 26 (GY: 5)
Subspecialties: Pcp
Program ID: 300-10-31-069

Florida

Gainesville

University of Florida Program
University of Florida College of Medicine
St Andrews Hospital at the University of Florida
Veterans Affairs Medical Center (Gainesville)
Program Director: William O'Connor, MD
Univ of Florida College of Medicine Dept of Pathology
Box 100215 JIMHIC
1600 SW Archer Rd
Gainesville, FL 32610-0215
305.838.0111
Length: 4 Year(s) Total Positions: 5 (GY: 3)
Subspecialties: Fm/Ps/Pf
Program ID: 300-11-31-072

Orlando

Orlando Regional Healthcare System Program
Orlando Regional Medical Center
Program Director: Gary S Pearl, MD
Orlando Regional Healthcare System
Dept of Pathology
1414 Munn Rd
Orlando, FL 32806
407.841.5111
Length: 4 Year(s) Total Positions: 9 (GY: 1)
Program ID: 300-11-12-078

* Updated information not provided.
Tampa
University of South Florida Program
University of South Florida College of Medicine
Bayfront Medical Center
H. Lee Moffitt Cancer Center
James A. Haley Veterans Hospital
Tampa General Healthcare
Program Director:
Philip F. Fouli, MD
Paul Ranney MD
University of South Florida College of Medicine
Dept of Pathology and Lab Medicine
i2001 Bruce B Downs Blvd Box 11
Tampa, FL 33612-4799
813 974-3253
Length: 4 Year(s) Total Positions: 22 (GY: 2)
Program ID: 300-11-31-078

Hawaii
Honolulu
University of Hawaii Program
University of Hawaii John A Burns School of Medicine
Kaiser Foundation Hospital (Moanalua)
Koolau Medical Center
Queen's Medical Center
St Francis Medical Center
Program Director:
John M. Hardman, MD
John A Burns School of Medicine Dept of Pathology
1960 East-West Rd
Blended Tower 515-B
Honolulu, HI 96822
808 955-9270
Length: 4 Year(s) Total Positions: 10 (GY: 2)
Program ID: 300-11-21-085

Tripler AMC
Tripler Army Medical Center Program
Tripler Army Medical Center
Program Director:
Robert B. Hill, MD
Tripler Army Med Ctr
Dept of Pathology
Attn: HSHK-IIP
Honolulu, HI 96859-5000
808 433-4006
Length: 4 Year(s) Total Positions: 10 (GY: 3)
Program ID: 300-11-12-006

Illinois
Chicago
Cook County Hospital Program*
Cook County Hospital
Mount Sinai Hospital Medical Center of Chicago
Program Director:
Marc G. Boyes, MD
Cook County Hospital
Dept of Pathology
312 S Wood St
Chicago, IL 60612
312-633-7166
Length: 4 Year(s) Total Positions: 10 (GY: 2)
Program ID: 300-11-21-088

McGaw Medical Center of Northwestern University (Evans st) Program*
Northwestern University Medical School
Evans Hospital
Program Director:
Aries G Brodin, MD
Evans Hospital
Dept of Pathology
2550 Ridge Ave
Evanston, IL 60201-1785
708 577-2776
Length: 4 Year(s) Total Positions: 10 (GY: 2)
Program ID: 300-11-21-412

McGaw Medical Center of Northwestern University Program
Northwestern University Medical School
Children's Memorial Medical Center
Northwestern Memorial Hospital
Veterans Affairs Lakeside Medical Center (Chicago)
Program Director:
Lodan C Peterson, MD
Northwestern University Medical School
Pathology Div WARD 6-204
330 E Chicago Ave
Chicago, IL 60611-3008
312 503-5144
Length: 4 Year(s) Total Positions: 23 (GY: 4)
Subspecialties: MM,PCP
Program ID: 300-11-21-094

Rush Medical College Program
Rush Presbyterian-St Luke's Medical Center Program Director:
Melvin M Schwartz, MD
Rush Presbyterian-St Luke's Medical Center
1603 W Congress Plwy
Dept of Pathology
Chicago, IL 60611-3833
312 925-5202
Length: 4 Year(s) Total Positions: 20 (GY: 4)
Program ID: 300-11-21-096

University of Chicago Program
University of Chicago Hospitals
Program Director:
Wendy Recant, MD
Univ of Chicago Hospitals
5841 S Maryland Ave MC3003
Chicago, IL 60637-1470
312 734-0967
Length: 4 Year(s) Total Positions: 25 (GY: 5)
Subspecialties: BBR,HHM/IP
Program ID: 300-11-21-097

University of Illinois College of Medicine at Chicago Metropolitan Group Hospitals Program
University of Illinois College of Medicine at Chicago
Illinois Masonic Medical Center
Mercy Hospital and Medical Center
Program Director:
Douglas P Shone, MD
Metropolitan Group Hospitals Residency in Pathology
836 W Wellington Ave
Rm 1521
Chicago, IL 60657-5193
312 297-7033
Length: 4 Year(s) Total Positions: 14 (GY: 5)
Program ID: 300-11-21-109

University of Illinois College of Medicine at Chicago Program
University of Illinois College of Medicine at Chicago
Michael Reese Hospital and Medical Center
University of Illinois Hospital and Clinics
Veterans Affairs Northwest Medical Center (Chicago)
Program Director:
Wellington Tao, MD
University of Illinois Hospital
Dept of Pathology (MC 847)
1819 W Polk St
Chicago, IL 60612-7735
312 996-7312
Length: 4 Year(s) Total Positions: 25 (GY: 6)
Subspecialties: IMP
Program ID: 300-11-21-098

* Updated information not provided.

Graduate Medical Education Directory
Maywood
Loyola University Program
Poster G McGraw Hospital-Loyola University of Chicago
Edward J Hines Jr Veterans Affairs Hospital
Program Director:
Ralph P Leitacner, MD
Loyola University Medical Center
2160 S First Ave
Maywood, IL 60153
708 216-3549
Length: 4 Year(s) Total Positions: 22 (GYI: 4)
Subspecialties: PCP
Program ID: 300-16-21-394

Park Ridge
Lutheran General Hospital Program
Lutheran General Hospital
Program Director:
Jonas Valalias, MD
Lutheran General Hospital
1755 Dempster Ave
Park Ridge, IL 60068
708 696-7548
Length: 4 Year(s) Total Positions: 7 (GYI: 1)
Program ID: 300-16-21-389

Indiana
Indianapolis
Indiana University Medical Center Program
Indiana University Medical Center
Richard Roudebush Veterans Affairs Medical Center
William N Wishard Memorial Hospital
Program Director:
Thomas E Davis, MD PhD
Wishard Memorial Hospital
Dept of Pathology
1001 W 10th St
Indianapolis, IN 46202-2879
317 639-6301
Length: 4 Year(s) Total Positions: 18 (GYI: 3)
Subspecialties: BBK/HMP/PCP
Program ID: 300-17-21-111

Methodist Hospital of Indiana Program
Methodist Hospital of Indiana
Program Director:
Carol J Pilemone, MD
Methodist Hospital of Indianapolis
1-45 at 21st St
PO Box 1367
Indianapolis, IN 46206-1367
317 920-6602
Length: 4 Year(s) Total Positions: 11 (GYI: 2)
Program ID: 300-17-21-112

Muncie
Ball Memorial Hospital Program
Ball Memorial Hospital
Program Director:
Douglas A Triplett, MD
Ball Memorial Hospital
2401 University Ave
Muncie, IN 47303-3480
317 747-5245
Length: 4 Year(s) Total Positions: 8 (GYI: 2)
Program ID: 300-17-21-114

Iowa
Iowa City
University of Iowa Hospitals and Clinics Program
University of Iowa Hospitals and Clinics
Veterans Affairs Medical Center (Iowa City)
Program Director:
Steven A Moore, MD PhD
University of Iowa Hospitals and Clinics
Dept of Pathology & Laboratory Med
Iowa City, IA 52242-1181
218 336-2515
Length: 4 Year(s) Total Positions: 20 (GYI: 4)
Subspecialties: HHK/HMP/PCP
Program ID: 300-16-21-119

Kansas
Kansas City
University of Kansas Medical Center Program
University of Kansas School of Medicine
University of Kansas Medical Center
Veterans Affairs Medical Center (Kansas City)
Program Director:
Osama W Tawfik, MD PhD
University of Kansas Medical Center
Dept of Pathology & Laboratory Med
3801 Rainbow Blvd
Kansas City, KS 66160-7410
913 586-1168
Length: 4 Year(s) Total Positions: 19 (GYI: 4)
Program ID: 300-19-21-117

Kentucky
Lexington
University of Kentucky Medical Center Program
University of Kentucky Medical Center
Veterans Affairs Medical Center (Lexington)
Program Director:
William N O’Connor, MD
University of Kentucky
Dept of Pathology
800 Rose St MCC Bldg CC 452
Lexington, KY 40536-0003
606 253-3183
Length: 4 Year(s) Total Positions: 16 (GYI: 3)
Subspecialties: PCP
Program ID: 300-20-21-120

Louisville
University of Louisville Program
University of Louisville School of Medicine
Kosair Children’s Hospital (Alliant Health System)
Norton Hospital (Alliant Health System)
University of Louisville Hospital
Veterans Affairs Medical Center (Louisville)
Program Director:
Walter L Broghammer Jr, MD
University of Louisville School of Medicine
Dept of Pathology
University of Louisville
Louisville, KY 40292
502 852-5290
Length: 4 Year(s) Total Positions: 16 (GYI: 2)
Subspecialties: FOP/HMP/PCP
Program ID: 300-20-21-121

Louisiana
New Orleans
Alton Ochsner Medical Foundation Program
Alton Ochsner Medical Foundation
Program Director:
Edwin N Beckman, MD
Alton Ochsner Medical Foundation
Dept of Graduate Med Education
101 Jefferson Hwy
New Orleans, LA 70121
504 841-3250
Length: 4 Year(s) Total Positions: 10 (GYI: 3)
Program ID: 300-21-21-124

Louisiana State University Program
Louisiana State University School of Medicine
Medical Center of Louisiana at New Orleans-LSU Division
Veterans Affairs Medical Center-LSU Service (New Orleans)
Program Director:
Gary E Lipscomb, MD
Louisiana State University School of Medicine
Dept of Pathology
1001 Perdido St
New Orleans, LA 70112-1303
504 556-6031
Length: 4 Year(s) Total Positions: 17 (GYI: 5)
Subspecialties: HHK
Program ID: 300-21-21-123

Tulane University Program
Tulane University School of Medicine
Medical Center of Louisiana at New Orleans-Tulane Division
Program Director:
John B Erume, MD
Tulane University
Dept of Pathology
1430 Tulane Ave/Bldg 6519
New Orleans, LA 70112-2699
504 588-5224
Length: 4 Year(s) Total Positions: 14 (GYI: 3)
Subspecialties: DAM
Program ID: 300-21-21-122

Shreveport
Louisiana State University (Shreveport) Program
Louisiana State University Medical Center-Shreveport
Overton Brooks Veterans Affairs Medical Center
Program Director:
Warren D Graffon, MD
Louisiana State University Medical Center Hospital
Medical Education Dept (Pathology)
PO Box 33632 1501 Kings Hwy
Shreveport, LA 71130-3932
318 675-5895
Length: 4 Year(s) Total Positions: 11 (GYI: 2)
Program ID: 300-21-21-126

* Updated information not provided.
Maryland

Baltimore

Johns Hopkins University Program
Johns Hopkins University School of Medicine
Johns Hopkins Hospital
Program Director:
Risa B Mann, MD
Robert E Miller, MD
The Johns Hopkins Hospital
Dept of Pathology
600 N Wolfe St
Baltimore, MD 21287-6417
410 955-5429
Length: 4 Year(s) Total Positions: 31 (GY1: 7)
Subspecialties: BKK, JPR, JPP
Program ID: 300-23-11-129

University of Maryland Program
University of Maryland Medical System
Veterans Affairs Medical Center (Baltimore)
Program Director:
Seena C Aimer, MD
University of Maryland Medical System
Dept of Pathology
22 S Greene St
Baltimore, MD 21201
410 328-5555
Length: 4 Year(s) Total Positions: 13 (GY1: 2)
Program ID: 300-29-31-135

Bethesda

National Institutes of Health Clinical Center Program*
NIH Warren Grant Magnuson Clinical Center
Program Director:
Lanze A Lister, MD PhD
Elaine S Jaffe, MD
National Institutes of Health Clinical Center
Dept of Pathology NCI
Bldg 10 Rm 2A3H
Bethesda, MD 20892
301 480-3165
Length: 3 Year(s) Total Positions: 9 (GY1: 3)
Program ID: 300-23-12-015

National Naval Medical Center (Bethesda) Program*
National Naval Medical Center (Bethesda)
Program Director:
William D Wurtzel, MD
Laboratory Medicine Dept
National Naval Medical Center
Bethesda, MD 20889-5000
301 295-1562
Length: 4 Year(s) Total Positions: 9 (GY1: 0)
Subspecialties: PEP
Program ID: 300-23-12-012

Massachusetts

Boston

Beth Israel Hospital Program
Beth Israel Hospital
Program Director:
Donald A Antonioli, MD
Beth Israel Hospital
330 Brookline Ave
Boston, MA 02215-5491
617 735-4943
Length: 4 Year(s) Total Positions: 18 (GY1: 5)
Subspecialties: HMP, JPC
Program ID: 300-26-11-138

Boston University Program*
Boston City Hospital
Boston University Medical Center-Veterans Affairs Medical Center (Boston)
Program Director:
Carl O'Hara, MD
Mallory Institute of Pathology
784 Massachusetts Ave
Boston, MA 02118
617 534-5809
Length: 4 Year(s) Total Positions: 16 (GY1: 5)
Subspecialties: PEP
Program ID: 300-24-21-139

Brigham and Women's Hospital Program
Brigham and Women's Hospital
Brookline-West Roxbury Veterans Affairs Medical Center
Program Director:
Ramsi S Cotran, MD
Brigham and Women's Hospital
76 Francis St
Boston, MA 02115
617 732-7614
Length: 4 Year(s) Total Positions: 37 (GY1: 12)
Subspecialties: HMP, PEP
Program ID: 300-24-21-146

Massachusetts General Hospital Program
Massachusetts General Hospital
Program Director:
E Tessa Beeby-Wyke, MD
Massachusetts General Hospital
Dept of Pathology
14 Fruit St
Boston, MA 02114-3206
617 726-5174
Length: 4 Year(s) Total Positions: 32 (GY1: 4)
Subspecialties: BKK, JPR, JPP
Program ID: 300-24-31-143

New England Deaconess Hospital Program
New England Deaconess Hospital
Labey Clinic
Program Director:
Harvey Goldman, MD
New England Deaconess Hospital
135 Pilgrim Rd
Boston, MA 02215
617 632-4037
Length: 4 Year(s) Total Positions: 23 (GY1: 8)
Subspecialties: PEP
Program ID: 300-24-21-144

New England Medical Center Hospitals Program*
New England Medical Center Hospitals
Program Director:
Ronald A DeLellis, MD
New England Medical Center
Dept of Pathology
780 Washington St Box 802
Boston, MA 02111
617 956-5608
Length: 4 Year(s) Total Positions: 16 (GY1: 3)
Program ID: 300-24-21-145

Pittsfield

Berkshire Medical Center Program
Berkshire Medical Center
Program Director:
Rebecca L Johnson, MD
Berkshire Medical Center
725 North St
Pittsfield, MA 01201
413 447-2056
Length: 4 Year(s) Total Positions: 2 (GY1: 2)
Program ID: 300-30-12-138

Springfield

Baystate Medical Center Program
Baystate Medical Center
Program Director:
Shirin V Nazif, MD
Baystate Medical Center
Dept of Pathology
750 Chestnut St
Springfield, MA 01199
413 794-5085
Length: 4 Year(s) Total Positions: 10 (GY1: 2)
Program ID: 300-24-21-148

Worcester

University of Massachusetts Medical Center Program*
University of Massachusetts Medical Center
Medical Center of Central Massachusetts
Program Director:
Frank B Reale, MD
University of Massachusetts Medical Center
55 Lake Ave N
Worcester, MA 01605
508 856-4856
Length: 4 Year(s) Total Positions: 16 (GY1: 4)
Program ID: 300-24-21-400

Michigan

Ann Arbor

University of Michigan Program
University of Michigan Hospitals
Veterans Affairs Medical Center (Ann Arbor)
Program Director:
Joseph C Pantone III, MD
University of Michigan Hospitals
1500 E Medical Center Dr
262 332-0054
Ann Arbor, MI 48109-0054
734 836-1888
Length: 4 Year(s) Total Positions: 24 (GY1: 7)
Subspecialties: PEP
Program ID: 300-25-21-156

Detroit

Henry Ford Hospital Program
Henry Ford Hospital
Program Director:
Kenneth A Greenwald, MD PhD
Henry Ford Hospital
2799 W Grand Blvd
Dept of Pathology
Detroit, MI 48202
313 876-3134
Length: 4 Year(s) Total Positions: 19 (GY1: 4)
Subspecialties: PEP
Program ID: 300-26-21-160

St John Hospital and Medical Center Program
St John Hospital and Medical Center
Program Director:
Bruce A Jones, MD
St John Hospital and Medical Center
Dept of Medical Education
22101 Morroco Rd
Detroit, MI 48236
313 943-3875
Length: 4 Year(s) Total Positions: 10 (GY1: 2)
Program ID: 300-26-12-162

* Updated information not provided.

Graduate Medical Education Directory 621
Wayne State University/Detroit Medical Center Program
Wayne State University School of Medicine
Children's Hospital of Michigan
Detroit Receiving Hospital and University Health Center
Harper Hospital
Hutzel Hospital
Program Director:
Daniel Sheahan, MD
Wayne State University School of Medicine
540 E Canfield
Detroit, MI 48201
313 746-5145
Length: 4 Year(s)  Total Positions: 11 (GY: 3)
Subspecialties: PCP
Program ID: 300-25-21-185

Flint
Hurley Medical Center/Michigan State University Program
Hurley Medical Center
Program Director:
Willis P Mueller Jr, MD
Hurley Medical Center
One Hurley Plaza
Flint, MI 48503-5690
810 267-1911
Length: 4 Year(s)  Total Positions: 8 (GY: 3)
Program ID: 300-25-21-1481

Grand Rapids
Grand Rapids Area Medical Education Center/ Michigan State University Program
Grand Rapids Area Medical Education Center
Blodgett Memorial Medical Center
Butterworth Hospital
St Mary's Health Services
Program Director:
Robert H Knappe, MD
Grand Rapids Area Medical Education Center
246 Cherry St SE
Grand Rapids, MI 49503
616 735-8232
Length: 4 Year(s)  Total Positions: 8 (GY: 3)
Program ID: 300-25-21-1688

Royal Oak
William Beaumont Hospital Program
William Beaumont Hospital
Program Director:
Rebecca C Hankin, MD
William Beaumont Hospital
3601 W 13 Mile Rd
Royal Oak, MI 48073
810 555-9060
Length: 4 Year(s)  Total Positions: 12 (GY: 3)
Subspecialties: IMP, PCH, PCH
Program ID: 300-25-21-179

Minnesota
Minneapolis
Hennepin County Medical Center Program
Hennepin County Medical Center
Abbott-Northwestern Hospital
Program Director:
John T Grossen, MD
Hennepin County Medical Center
701 Park Ave S
Minneapolis, MN 55415
612 347-3010
Length: 4 Year(s)  Total Positions: 11 (GY: 3)
Subspecialties: PFP
Program ID: 300-26-21-405

University of Minnesota Program
University of Minnesota Medical Center
University Hospital and Clinic
Veterans Affairs Medical Center (Minneapolis)
Program Director:
Sue Bartow, MD
University of Minnesota
Box 168 UMHIC
420 Delaware St SE
Minneapolis, MN 55455-0385
612 626-3176
Length: 4 Year(s)  Total Positions: 31 (GY: 8)
Subspecialties: HEM, PCH
Program ID: 300-26-21-178

Rochester
Mayo Graduate School of Medicine Program
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Rochester)
Rochester Methodist Hospital
St Mary's Hospital of Rochester
Program Director:
Alvaro A Pineda, MD
MGM Application Processing Center
Mayo Graduate School of Medicine
200 First St SW
Rochester, MN 55905
507 284-3898
Length: 4 Year(s)  Total Positions: 28 (GY: 5)
Subspecialties: MM, MP
Program ID: 300-26-21-179

St Paul
St Paul-Ramsey Medical Center Program* St Paul-Ramsey Medical Center
Program Director:
Edward Haus, MD MDPhD
640 Jackson St
St Paul, MN 55101
612 221-8550
Length: 4 Year(s)  Total Positions: 8 (GY: 1)
Program ID: 300-26-21-180

Mississippi
Jackson
University of Mississippi Medical Center Program
University of Mississippi School of Medicine
University Hospital
Veterans Affairs Medical Center (Jackson)
Program Director:
Sherman R EUck, MD
University of Mississippi Medical Center
2500 N State St
Jackson, MS 39216-4566
661 984-1540
Length: 4 Year(s)  Total Positions: 12 (GY: 3)
Program ID: 300-27-21-182

Missouri
Columbia
University of Missouri-Columbia Program
University of Missouri-Columbia School of Medicine
Harry S Truman Memorial Veterans Hospital
University and Children's Hospital
Program Director:
John F Townsend, MD
University of Missouri Health Sciences Center
One Hospital Dr
M 263 Medical Science Bldg
Columbia, MO 65212
314 882-1201
Length: 4 Year(s)  Total Positions: 16 (GY: 4)
Program ID: 300-28-21-115

Kansas City
University of Missouri at Kansas City Program
University of Missouri-Kansas City School of Medicine
Children's Mercy Hospital
St Luke's Hospital
Truman Medical Center-West
Program Director:
Peter J Krage, MD
Truman Medical Center Dept of Pathology
2301 Holmes St
Kansas City, MO 64108
816 566-3212
Length: 4 Year(s)  Total Positions: 10 (GY: 2)
Program ID: 300-28-21-408

St Louis
St John's Mercy Medical Center Program
St John's Mercy Medical Center
Program Director:
Fredrick K Kraus, MD
St John's Mercy Medical Center
Dept of Pathology
615 S New Ballas Rd
St Louis, MO 63141-8221
314 566-5813
Length: 4 Year(s)  Total Positions: 8 (GY: 1)
Program ID: 300-28-21-190

* Updated information not provided.
St Louis University Group of Hospitals Program
St Louis University School of Medicine
Cardinal Glennon Children's Hospital
St Louis University Hospital
St Mary's Health Center
Veterans Affairs Medical Center (St Louis)
Program Director:
Carole A Vogler, MD
St Louis University School of Medicine
Pathology Dept
1402 S Grand Blvd
St Louis, MO 63104
314 577-5046
Length: 4 Year(s) Total Positions: 15 (GYI: 5)
Subspecialties: MM, PCP
Program ID: 300-28-21-192

Washington University Program
Barnes Hospital
Jewish Hospital of St Louis
Program Director:
Emil R Uzan, MD
Joseph P Mietlich, MD PhD
Dept of Pathology
560 S Euclid Ave
Box 8118
St Louis, MO 63110
314 362-7440
Length: 4 Year(s) Total Positions: 45 (GYI: 12)
Subspecialties: HMP
Program ID: 380-28-11-183

Nebraska
Omaha
Creighton University Program
Creighton/Nebraska University Health Foundation
AMR St Joseph Hospital at Creighton Univ Medical Center
Veterans Affairs Medical Center (Omaha)
Program Director:
Leeana G Hauer, MD
Dept of Pathology
St Joseph Hospital
601 N 30th St
Omaha, NE 68131-2197
402 449-4664
Length: 4 Year(s) Total Positions: 10 (GYI: 2)
Program ID: 300-30-21-195

University of Nebraska Program
University of Nebraska Medical Center
Bishop Clarkson Memorial Hospital
Program Director:
James L Wisecarver, MD PhD
University of Nebraska Hospital and Clinics
600 S 42nd St
Omaha, NE 68198-3135
402 559-4616
Length: 4 Year(s) Total Positions: 17 (GYI: 4)
Program ID: 300-30-21-197

New Hampshire
Lebanon
Dartmouth-Hitchcock Medical Center Program
Mary Hitchcock Memorial Hospital
Veterans Affairs Medical Center (White River Junction)
Program Director:
James P Aniseehem, MD
Dartmouth-Hitchcock Medical Center
One Medical Center Dr
Lebanon, NH 03756-0011
603 650-8633
Length: 4 Year(s) Total Positions: 14 (GYI: 5)
Program ID: 300-35-21-198

New Jersey
Long Branch
Monmouth Medical Center Program
Monmouth Medical Center
Program Director:
Louis J Zinterhofer, MD
Monmouth Medical Center
300 Second Ave
Long Branch, NJ 07740-9996
908 870-0320
Length: 4 Year(s) Total Positions: 8 (GYI: 0)
Program ID: 300-35-21-207

Newark
UMDNJ-New Jersey Medical School Program
UMDNJ-New Jersey Medical School
Dept of Veterans Affairs Medical Center (East Orange)
Newark Beth Israel Medical Center
St Barnabas Medical Center
UMDNJ-University Hospital
Program Director:
Kenneth M Klein, MD
UMDNJ-New Jersey Medical School
Dept of Lab Medicine & Pathology
166 S Orange Ave
Newark, NJ 07103-2714
201 999-4716
Length: 4 Year(s) Total Positions: 30 (GYI: 4)
Program ID: 300-35-21-301

Piscataway
UMDNJ-Robert Wood Johnson Medical School Program
UMDNJ-Robert Wood Johnson Medical School
Children's Hospital of Philadelphia
Robert Wood Johnson University Hospital
St Peter's Medical Center
Program Director:
Peter A Ammend, MD PhD
UMDNJ-Robert Wood Johnson Medical School
Dept of Pathology MEB 224
New Brunswick, NJ 08903-0019
908 246-7641
Length: 4 Year(s) Total Positions: 13 (GYI: 3)
Subspecialties: FIP
Program ID: 300-35-21-215

New Mexico
Albuquerque
University of New Mexico Program
University of New Mexico School of Medicine
University Hospital
Veterans Affairs Medical Center (Albuquerque)
Program Director:
Patricia J McFeeley, MD
James C McLaughlin, PhD
Office of Medical Investigator
University of New Mexico School of Medicine
Albuquerque, NM 87131-5091
505 277-3653
Length: 4 Year(s) Total Positions: 20 (GYI: 5)
Subspecialties: BBK
Program ID: 300-35-21-218

New York
Albany
Albany Medical College Program
Albany Medical College
Veterans Affairs Medical Center (Albany)
Program Director:
Jeffrey S Ross, MD
Albany Medical Center Hospital A-81
47 New Scotland Ave
Albany, NY 12208-3479
518 262-5697
Length: 4 Year(s) Total Positions: 15 (GYI: 3)
Program ID: 300-35-21-179

Bronx
Albert Einstein College of Medicine Program
Albert Einstein College of Medicine of Yeshiva University
Bronx Municipal Hospital Center
Montefiore Medical Center-Henry and Lucy Moses Division
Montefiore Medical Center-Weiler Hospital
North Central Bronx Hospital
Program Director:
Anna S Kasib, MD
Albert Einstein College of Medicine
Pathology Dept I-221
1300 Merrick Park Ave
Bronx, NY 10461
718 478-1177
Length: 4 Year(s) Total Positions: 30 (GYI: 8)
Program ID: 300-35-21-230

Bronx-Lebanon Hospital Center Program
Bronx-Lebanon Hospital Center
Program Director:
Young J Choi, MD
Bronx-Lebanon Hospital Center
1650 Grand Concourse
Bronx, NY 10457
718 518-0147
Length: 4 Year(s) Total Positions: 10 (GYI: 1)
Program ID: 300-35-12-233

* Updated information not provided.
Accredited Programs in Pathology-Anatomic and Clinical

Brooklyn
Brooklyn Hospital Center Program
Brooklyn Hospital Center
Lutheran Medical Center
Wyckoff Heights Medical Center
Program Director:
Robert D. Kaltzer, MD
The Brooklyn Hospital Center
121 DeKalb Ave
Brooklyn, NY 11201
718 258-9397
Length: 4 Year(s) Total Positions: 12 (GYI: 4)
Program ID: 300-35-11-335

Long Island College Hospital Program
Long Island College Hospital
New York Methodist Hospital
Program Director:
John K. Kim, MD
Long Island College Hospital
Dept of Pathology
340 Henry St
Brooklyn, NY 11201: 6525
718 258-1080
Length: 4 Year(s) Total Positions: 7 (GYI: 0)
Program ID: 300-35-12-244

Maine Medical Center Program
Maine Medical Center
Program Director:
Charles T. Ladoullis, MD
Maine Medical Center
482 W 13th Ave
Brooklyn, NY 11219
718 258-7281
Length: 4 Year(s) Total Positions: 7 (GYI: 4)
Program ID: 300-35-11-548

SUNY Health Science Center at Brooklyn Program
SUNY HSC at Brooklyn College of Medicine
Kings County Hospital Center
University Hospital-SUNY Health Science Center at Brooklyn
Program Director:
Anthony D. Niesati, MD
SUNY Health Science Center at Brooklyn
450 Old Slip Ave
Brooklyn, NY 11203
718 258-1669
Length: 4 Year(s) Total Positions: 20 (GYI: 3)
Subspecialties: NP
Program ID: 300-35-21-360

Buffalo
SUNY at Buffalo Graduate Medical-Dental Education Consortium Program
SUNY at Buffalo Grad Medical-Dental Education Consortium
Buffalo General Hospital
Erie County Medical Center
Roswell Park Cancer Institute
Veterans Affairs Medical Center (Buffalo)
Program Director:
Reid H. Heffner, MD
Dept of Pathology
SUNY at Buffalo
204 Farber Hall
Buffalo, NY 14214
716 822-3093
Length: 4 Year(s) Total Positions: 19 (GYI: 4)
Subspecialties: NP
Program ID: 300-35-21-224

East Meadow
Nassau County Medical Center Program
Nassau County Medical Center
Program Director:
Richard J. Stenger, MD
Nassau County Medical Center
Dept of Pathology & Laboratories
201 Henry St
East Meadow, NY 11554-1854
516 572-3201
Length: 4 Year(s) Total Positions: 10 (GYI: 2)
Subspecialties: NP
Program ID: 300-35-21-225

Flushing
New York Hospital Medical Center of Queens Program
New York Hospital Medical Center of Queens
Cornell University Medical College
Program Director:
John T. Ellis, MD
Maulin & Mowery Laboratories
The New York Hospital Medical Center of Queens
56-46 Main St
Flushing, NY 11355
718 675-5634
Length: 4 Year(s) Total Positions: 7 (GYI: 0)
Program ID: 300-35-11-232

Manhasset
North Shore University Hospital Program
North Shore University Hospital
Program Director:
John D. Browne, MD
North Shore University Hospital
390 Community Dr
Manhasset, NY 11030
516 563-4180
Length: 4 Year(s) Total Positions: 12 (GYI: 1)
Program ID: 300-35-11-228

Mineola
Winthrop-University Hospital Program
Winthrop-University Hospital
Program Director:
Stanley Lippert, MD
Winthrop-University Hospital
251 First St
Mineola, NY 11501
516 663-2450
Length: 4 Year(s) Total Positions: 10 (GYI: 2)
Program ID: 300-35-12-229

New Hyde Park
Albert Einstein College of Medicine at Long Island Jewish Medical Center Program
Long Island Jewish Medical Center
Flushing Hospital Medical Center
Program Director:
Leonard B. Kahn, MD
Long Island Jewish Medical Center
Dept of Pathology
New Hyde Park, NY 11040-1833
718 479-7451
Length: 4 Year(s) Total Positions: 10 (GYI: 2)
Program ID: 300-35-21-245

New York
Albert Einstein College of Medicine at Beth Israel Medical Center Program
Beth Israel Medical Center
Program Director:
Carl Teplatz, MD
Beth Israel Medical Center
First Ave at 16th St
New York, NY 10030
212 213-6300
Length: 4 Year(s) Total Positions: 18 (GYI: 4)
Subspecialties: HP
Program ID: 300-35-11-231

Harlem Hospital Center Program
Harlem Hospital Center
Program Director:
Carlos Navarro, MD
MLK Pavilion 8th Fl Rm B115
500 Lenox Ave & 135th St
New York, NY 10037
212 998-9360
Length: 4 Year(s) Total Positions: 10 (GYI: 2)
Program ID: 300-35-11-239

Lenox Hill Hospital Program
Lenox Hill Hospital
Program Director:
Harry L. Lozachan, MD
Dept of Pathology
Lenox Hill Hospital
100 E 77th St
New York, NY 10021-1873
212 244-2330
Length: 4 Year(s) Total Positions: 9 (GYI: 3)
Program ID: 300-35-11-243

Mount Sinai School of Medicine Program
Mount Sinai School of Medicine
Elmhurst Hospital Center
Mount Sinai Services
Mount Sinai Medical Center
Queens Hospital Center
Veterans Affairs Medical Center (Bronx)
Program Director:
James A. Strauss, MD
Mount Sinai Medical Center
One Gustave L Levy Pl
Box 1154
New York, NY 10029-8747
212 998-8019
Length: 4 Year(s) Total Positions: 32 (GYI: 5)
Subspecialties: NP/COP
Program ID: 300-35-21-231

New York Hospital/Cornell Medical Center Program
New York Hospital
Program Director:
Daniel M. Knowles, MD
The New York Hosp/Cornell Med Ctr
Dept of Pathology/Rm C-206
250 E 68th St
New York, NY 10021
212 746-6464
Length: 4 Year(s) Total Positions: 19 (GYI: 4)
Subspecialties: COP
Program ID: 300-35-11-253

* Updated information not provided.
New York University Medical Center Program
New York University Medical Center
Bellevue Hospital Center
Veterans Affairs Medical Center (Manhattan)
Program Director:
Gloria Gallow, MD
New York University Medical Center
655 First Ave
New York, NY 10016
212 263-5472
Length: 4 Year(s)  Total Positions: 26  (GYI: 5)
Subspecialties: FIP
Program ID: 300-05-21-265

Presbyterian Hospital in the City of New York Program
Presbyterian Hospital in the City of New York
Program Director:
Heidrun Bollert, MD
Presbyterian Hospital in The City of New York
200 West 63rd St VC 14-349
New York, NY 10025
212 659-6607
Length: 4 Year(s)  Total Positions: 19  (GYI: 4)
Subspecialties: NP
Program ID: 300-36-11-237

St Luke’s-Roosevelt Hospital Center Program
St Luke’s-Roosevelt Hospital Center
St Luke’s-Roosevelt Hospital Center-Roosevelt Division
St Luke’s-Roosevelt Hospital Center-St Luke’s Division
Program Director:
Stephen R. Ryan, MD
St Luke’s-Roosevelt Hospital Center
111 Amsterdam Ave
New York, NY 10025
212 523-5794
Length: 4 Year(s)  Total Positions: 12  (GYI: 4)
Program ID: 300-36-21-998

Rochester University of Rochester Program
Strong Memorial Hospital of the University of Rochester
Program Director:
James M. Powers, MD
Strong Memorial Hospital Dept of Pathology and Lab Medicine
2300 Crittenden Blvd
Rochester, NY 14642
585 275-5952
Length: 4 Year(s)  Total Positions: 21  (GYI: 7)
Subspecialties: FOP/NPCPC
Program ID: 300-65-21-263

Stony Brook SUNY at Stony Brook Program
University Hospital-SUNY at Stony Brook
Program Director:
Dennis P. Lane, MD
SUNY at Stony Brook Health Science Center
Dept of Pathology
University Hospital
SUNY Stony Brook
Stony Brook, NY 11794-7025
516 444-2224
Length: 4 Year(s)  Total Positions: 12  (GYI: 3)
Program ID: 300-36-21-396

Syracuse SUNY Health Science Center at Syracuse Program
University Hospital-SUNY Health Science Center at Syracuse
Community General Hospital of Greater Syracuse
Crouse-Irving Memorial Hospital
Veterans Affairs Medical Center (Syracuse)
Program Director:
George Collins, MD
SUNY Health Science Center at Syracuse
Dept of Pathology
750 E Adams St
Syracuse, NY 13210
315 464-5700
Length: 4 Year(s)  Total Positions: 16  (GYI: 4)
Subspecialties: HMP/PCP
Program ID: 300-36-21-265

Valhalla New York Medical College (Metropolitan) Program
New York Medical College
Metropolitan Hospital Center
Lincoln Medical and Mental Health Center
Program Director:
Vicente C. Tcherkoff, MD
Metropolitan Hospital Center
1901 First Ave
New York, NY 10029
212 423-7760
Length: 4 Year(s)  Total Positions: 12  (GYI: 3)
Program ID: 300-36-21-264

New York Medical College at St Vincent's Hospital and Medical Center Program
New York Medical College
St Vincent’s Hospital and Medical Center of New York
Program Director:
John F. Gillioze, MD
St Vincent’s Hospital and Medical Center of New York
153 W 11th St
New York, NY 10011
212 604-5384
Length: 4 Year(s)  Total Positions: 8  (GYI: 2)
Program ID: 300-05-21-265

New York Medical College at Westchester County Medical Center Program
New York Medical College
Westchester County Medical Center
Program Director:
Myron R. Melamed, MD
New York Medical College
Dept of Pathology
Basic Science Bldg Rm 411
Valhalla, NY 10595
914 995-4500
Length: 4 Year(s)  Total Positions: 11  (GYI: 5)
Subspecialties: FCP
Program ID: 300-36-11-266

North Carolina Chapel Hill University of North Carolina Hospitals Program
University of North Carolina Hospitals
Program Director:
Thomas W. Bouldin, MD
University of North Carolina School of Medicine
Dept of Pathology
Brinkman-Bullard Bldg CB #7535
Chapel Hill, NC 27599-7535
919 966-4676
Length: 4 Year(s)  Total Positions: 20  (GYI: 4)
Subspecialties: FOP/HMP/MM,MM,POI,PCP/PCP
Program ID: 300-36-11-307

Durham Duke University Program
Duke University Medical Center
Veterans Affairs Medical Center (Durham)
Program Director:
William D. Bradfield, MD
Duke University Medical Center Dept of Pathology
Box 3712
Durham, NC 27710
919 696-5112
Length: 4 Year(s)  Total Positions: 34  (GYI: 6)
Subspecialties: MM
Program ID: 300-36-21-269

Greenville East Carolina University Program
East Carolina University School of Medicine
Pitt County Memorial Hospital
Program Director:
H Thomas Norris, MD
Pitt County Memorial Hospital
PO Box 5025
2100 Stantonburg Rd
Greenville, NC 27835
919 216-4681
Length: 4 Year(s)  Total Positions: 16  (GYI: 3)
Subspecialties: FCP
Program ID: 300-36-21-454

Winston-Salem Bowman Gray School of Medicine Program
North Carolina Baptist Hospital
Program Director:
Robert W. Pritchard, MD
Bowman Gray School of Medicine
Dept of Pathology
Medical Center Blvd
Winston-Salem, NC 27157-1072
336 716-3945
Length: 4 Year(s)  Total Positions: 21  (GYI: 4)
Program ID: 300-36-11-270

* Updated information not provided.
Ohio

Akron

Akron City Hospital (Summa Health System)/NEOUCOM Program
Akron City Hospital (Summa Health System)
Children's Hospital Medical Center of Akron
Program Director: Raymond E Clarke, MD
Akron City Hospital
Dept of Pathology
525 E Market St
Akron, OH 44308
216 395-6565
Length: 4 Year(s)  Total Positions: 3  (GYI: 2)
Subspecialties: ECP
Program ID: 300-38-11-272

Cincinnati

University of Cincinnati Hospital Group Program
University of Cincinnati Hospital
Veterans Affairs Medical Center (Cincinnati)
Program Director: Cecilia M Pennington-Preiser, MD
University of Cincinnati Medical Center
Dept of Pathology
PO Box 670829 231 Bethesda Ave
Cincinnati, OH 45267-0539
513 558-7113
Length: 4 Year(s)  Total Positions: 21  (GYI: 4)
Subspecialties: HMP, ECP
Program ID: 300-38-21-375

Cleveland

Case Western Reserve University (MetroHealth) Program
MetroHealth Medical Center
Program Director: Jerome Kleinerman, MD
MetroHealth Medical Center
2500 MetroHealth Dr
Cleveland, OH 44109-1908
216 469-5781
Length: 4 Year(s)  Total Positions: 15  (GYI: 3)
Subspecialties: HMP, ECP
Program ID: 300-38-11-279

Case Western Reserve University Program*
University Hospitals of Cleveland
Program Director: Michael E Laum, MD
University Hospitals of Cleveland
3074 Abington Rd
Cleveland, OH 44106
216 844-7022
Length: 4 Year(s)
Subspecialties: BKK, HMP
Program ID: 300-38-21-277

Cleveland Clinic Foundation Program
Cleveland Clinic Foundation
Program Director: Robert E Petras, MD
Cleveland Clinic Foundation
9600 Euclid Ave 7TS
Dept of Pathology
Cleveland, OH 44195-6342
216 444-5860
Length: 4 Year(s)  Total Positions: 27  (GYI: 6)
Subspecialties: MM
Program ID: 300-38-12-278

Mount Sinai Medical Center of Cleveland Program*
Mount Sinai Medical Center of Cleveland
Program Director: Richard Lau, MD
Mount Sinai Medical Center of Cleveland
One Mt Sinai Dr
Cleveland, OH 44106-4198
216 432-4400
Length: 4 Year(s)  Total Positions: 6  (GYI: 3)
Program ID: 300-38-11-240

Columbus

Ohio State University Program
Ohio State University Medical Center
Program Director: Daniel D Sedman, MD
Ohio State University
130 Hamilton Ball
1646 Neil Ave
Columbus, OH 43210
614 292-4692
Length: 4 Year(s)  Total Positions: 17  (GYI: 3)
Subspecialties: BKK, HMP
Program ID: 300-38-21-296

Dayton (Kettering)

Wright State University Program
Kettering Medical Center
Program Director: Paul G Koles, MD
Kettering Medical Center
3636 Southern Blvd
Kettering, OH 45429-1298
513 296-7849
Length: 4 Year(s)  Total Positions: 8  (GYI: 2)
Program ID: 300-38-11-288

Toledo

Medical College of Ohio at Toledo Program
Medical College of Ohio Hospital
Mercy Hospital of Toledo
Program Director: Peter J Goldhaber, MD
Medical College of Ohio Dept of Pathology
PO Box 10028
3000 Arlington Ave
Toledo, OH 43609-0028
419 381-3476
Length: 4 Year(s)  Total Positions: 6  (GYI: 3)
Program ID: 300-38-11-290

Youngstown

Western Reserve Care System/NEOUCOM Program
Western Reserve Care System
Northshire Medical Center
Southside Medical Center
Program Director: Ludwig M Deppisch, MD
Western Reserve Care System
Dept of Laboratory
500 Gypsy Ln
Youngstown, OH 44501
216 740-3815
Length: 4 Year(s)  Total Positions: 8  (GYI: 2)
Program ID: 300-38-11-292

Oklahoma

Oklahoma City

University of Oklahoma Health Sciences Center Program
University of Oklahoma College of Medicine-Oklahoma City
Baptist Medical Center of Oklahoma
Children's Hospital of Oklahoma
University Hospital and Clinics
Veterans Affairs Medical Center (Oklahoma City)
Program Director: Barbara L. Bane, MD
University of Oklahoma Health Sciences Center
Dept of Pathology
PO Box 26691 (BMSB 451)
Oklahoma City, OK 73190
405 771-2422
Length: 4 Year(s)  Total Positions: 22  (GYI: 4)
Subspecialties: NP
Program ID: 300-39-21-295

Oregon

Portland

Oregon Health Sciences University Program
Oregon Health Sciences University Hospital
Good Samaritan Hospital and Medical Center
Veterans Affairs Medical Center (Portland)
Program Director: Waldemar A Schmidt, MD
Margaret E Berghoff, MD
Oregon Health Sciences University
3181 SW Sam Jackson Park Rd 3113
Portland, OR 97201-3098
503 494-9276
Length: 4 Year(s)  Total Positions: 17  (GYI: 3)
Program ID: 300-40-11-392

St Vincent Hospital and Medical Center Program
St Vincent Hospital and Medical Center
Program Director: Randal Joengel, MD
St Vincent Hospital
Dept of Pathology
9205 SW Barnes Rd
Portland, OR 97225
503 291-2590
Length: 4 Year(s)  Total Positions: 7  (GYI: 2)
Program ID: 300-40-12-301

Pennsylvania

Danville

Geisinger Medical Center Program
Geisinger Medical Center
Program Director: Steven C Meschter, MD
Geisinger Medical Center
N Academy Ave
Danville, PA 17822
717 271-6388
Length: 4 Year(s)  Total Positions: 11  (GYI: 2)
Program ID: 300-41-12-308

* Updated information not provided.

Graduate Medical Education Directory
Hershey
Million S Hershey Medical Center of Pennsylvania State University Program
Penn State University Hospital-Milton S Hershey Med Ctr
Program Director: Richard J Zaino, MD
500 University Dr
PO Box 859
Hershey, PA 17033
717 531-8551
Length: 4 Year(s) Total Positions: 11 (GYI: 3)
Program Id: 300-41-11-368

Johnstown
Conemaugh Valley Memorial Hospital Program
Conemaugh Valley Memorial Hospital
Temple University Hospital
Program Director: Sidney A Goldblatt, MD
Conemaugh Hospital
1006 Franklin St
Johnstown, PA 15905-4398
814 533-8817
Length: 4 Year(s) Total Positions: 10 (GYI: 2)
Program Id: 300-41-31-397

Philadelphia
MCNHi/Medical College of Pennsylvania Hospital Program
Medical College of Pennsylvania Hospital
Veterans Affairs Medical Center (Philadelphia)
Program Director: James M England, MD PhD
Medical College of Pennsylvania
Dept of Pathology
3300 Henry Ave
Philadelphia, PA 19129
215 842-7074
Length: 4 Year(s) Total Positions: 25 (GYI: 3)
Subspecialties: PFP
Program Id: 300-41-11-316

Pennsylvania Hospital Program
Program Director: Helen M Haupt, MD
Pennsylvania Hospital
Ayer Laboratories
8th & Spruce Sts
Philadelphia, PA 19107
215 829-3584
Length: 4 Year(s) Total Positions: 10 (GYI: 1)
Program Id: 300-41-11-518

Temple University Program
Temple University Hospital
Program Director: James G Caya, MD
Temple University Hospital
Dept of Pathology & Lab Medicine
3401 N Broad St
Philadelphia, PA 19140
215 707-4994
Length: 4 Year(s) Total Positions: 12 (GYI: 2)
Program Id: 300-41-11-321

Thomas Jefferson University Program
Thomas Jefferson University Hospital
Program Director: Robert O Peterson, MD PhD
Thomas Jefferson University Hospital
Dept of Pathology
204 Pavilion 125 S 11th St
Philadelphia, PA 19107
215 866-6974
Length: 4 Year(s) Total Positions: 15 (GYI: 4)
Subspecialties: BBK, PFP
Program Id: 300-41-11-322

University of Pennsylvania Program
Hospital of the University of Pennsylvania
Program Director: James E Wheeler, MD
Hospital of the University of Pennsylvania
Dept of Pathology
3400 Spruce St
Philadelphia, PA 19104-4283
215 662-6506
Length: 4 Year(s) Total Positions: 37 (GYI: 9)
Subspecialties: BBK, PFP
Program Id: 300-41-12-314

Pittsburgh
MCPHi/Allegheny General Hospital Program
Allegheny General Hospital
Program Director: Robert J Hartsock, MD
Dept of Pathology
Allegheny General Hospital
320 E North Ave
Pittsburgh, PA 15212-9086
412 392-4014
Length: 4 Year(s) Total Positions: 9 (GYI: 2)
Subspecialties: BMP
Program Id: 300-41-12-323

Shadyside Hospital Program
Shadyside Hospital
Program Director: William T Smith Jr, MD
Shadyside Hospital
Dept of Pathology
5250 Center Ave
Pittsburgh, PA 15232
412 623-2381
Length: 4 Year(s) Total Positions: 7 (GYI: 2)
Program Id: 300-41-11-326

University Health Center of Pittsburgh Program
University Health Center of Pittsburgh
Children's Hospital of Pittsburgh
Magee-Womens Hospital
Montefiore University Hospital (UPMC)
Presbyterian University Hospital/UPMC
Veterans Affairs Medical Center (Pittsburgh)
Program Director: Samuel A Yousem, MD
UPMC-NUIH NWG33
Dept of Pathology
200 Lothrop St
Pittsburgh, PA 15213-2581
412 648-6875
Length: 4 Year(s) Total Positions: 5 (GYI: 6)
Subspecialties: PFP
Program Id: 300-41-21-324

Wynnewood
Lankenau Hospital Program
Lankenau Hospital
Program Director: Gary S Daum, MD
Lankenau Hospital
100 Lancaster Ave
Wynnewood, PA 19096
610 645-2615
Length: 4 Year(s) Total Positions: 10 (GYI: 2)
Subspecialties: PFP
Program Id: 300-41-12-315

Puerto Rico
San Juan
University of Puerto Rico Program
University of Puerto Rico School of Medicine
San Juan City Hospital
University Hospital
Veterans Affairs Medical Center (San Juan)
Program Director: Roman Velez Rosario, MD
University of Puerto Rico School of Medicine
GPO Box 5067
San Juan, PR 00906
809 758-2525
Length: 4 Year(s)
Program Id: 300-41-12-385

Rhode Island
Providence
Brown University Program
Rhode Island Hospital
Memorial Hospital of Rhode Island
Miriam Hospital
Roger Williams Medical Center
Women and Infants Hospital of Rhode Island
Program Director: Don B Singer, MD
Rhode Island Hospital
383 Eddy St
Providence, RI 02903
401 444-5151
Length: 4 Year(s) Total Positions: 20 (GYI: 5)
Program Id: 300-41-12-414

South Carolina
Charleston
Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
MUSC Medical Center
Veterans Affairs Medical Center (Charleston)
Program Director: A Julian Garvin, MD PhD
Medical University of South Carolina Pathology/Lab
Medicine
171 Ashley Ave
Charleston, SC 29425-0701
803 792-3121
Length: 4 Year(s) Total Positions: 25 (GYI: 4)
Subspecialties: PFP
Program Id: 300-41-21-392

* Updated information not provided.
South Dakota
Sioux Falls
University of South Dakota Program
University of South Dakota School of Medicine
Royal C. Johnson Veterans Affairs Medical Center
Sioux Valley Hospital
Program Director:
Karen G. Peterson, MD
PO Box 5017
Sioux Falls, SD 57117-5017
605-339-1212
Length: 4 Year(s) Total Positions: 5 (GY: 2)
Program ID: 300-44-21-333

Tennessee
Johnson City
East Tennessee State University Program
James H. Quillen College of Medicine
Johnson City Medical Center Hospital
Veterans Affairs Medical Center (Mountain Home)
Program Director:
Philip S. Coogan, MD
East Tennessee State University College of Medicine
Dept of Pathology
PO Box 70568
Johnson City, TN 37614-0568
615-529-6210
Length: 4 Year(s) Total Positions: 8 (GY: 1)
Program ID: 300-44-21-399

Knoxville
University of Tennessee Medical Center Program
University of Tennessee Graduate School of Medicine
University of Tennessee College of Medicine
Program Director:
Frances K. Paterson, MD
The University of Tennessee
Graduate Sch of Medicine
1924 Alcoa Hwy
Knoxville, TN 37920
615-544-9080
Length: 4 Year(s) Total Positions: 10 (GY: 0)
Program ID: 300-44-11-335

Memphis
University of Tennessee Program
University of Tennessee College of Medicine
Baptist Memorial Hospital
Regional Medical Center at Memphis
Veterans Affairs Medical Center (Memphis)
Program Director:
Thomas M. Crenshaw, MD
Dept of Pathology
University of Tennessee at Memphis
800 Madison Ave
Memphis, TN 38146
901-448-5344
Length: 4 Year(s) Total Positions: 17 (GY: 5)
Subspecialties: FOP
Program ID: 300-44-12-336

Nashville
Vanderbilt University Program
Vanderbilt University Medical Center
St Thomas Hospital
Veterans Affairs Medical Center (Nashville)
Program Director:
Joyce E. Johnson, MD
Vanderbilt University Hospital
Dept of Pathology C-3221 MCN
1161 21st Ave S
Nashville, TN 37232-3109
615-343-0603
Length: 4 Year(s) Total Positions: 22 (GY: 6)
Subspecialties: BBS
Program ID: 300-44-21-341

Texas
Dallas
Baylor University Medical Center Program
Baylor University Medical Center
Program Director:
Glenn W. Tillery, MD
Dept of Pathology
3500 Gaston Ave
Dallas, TX 75246
214-630-2031
Length: 4 Year(s) Total Positions: 16 (GY: 2)
Program ID: 300-44-12-343
University of Texas Southwestern Medical School Program
University of Texas Southwestern Medical School
Dallas County Hospital District-Parkland Memorial Hospital
Veterans Affairs Medical Center (Dallas)
Program Director:
Arthur G. Weinberg, MD
Dept of Pathology
5325 Harry Hines Blvd
Dallas, TX 75390-0072
214-640-2224
Length: 4 Year(s) Total Positions: 44 (GY: 8)
Subspecialties: HP
Program ID: 300-44-11-345

El Paso
William Beaumont Army Medical Center Program
William Beaumont Army Medical Center
Program Director:
Col Mohammad A. Nadjem, MD
William Beaumont Army Medical Center
Dept of Pathology
El Paso, TX 79902-5001
915-668-2500
Length: 4 Year(s) Total Positions: 8 (GY: 2)
Program ID: 300-44-12-007

Fort Sam Houston
Brooke Army Medical Center Program
Brooke Army Medical Center
Program Director:
Hansa B. Rawal, MD
Brooke Army Medical Center Pathology Residency Program
A/1/5-Cobal Pathology Program Director
1956 Stanley Road Blvd 2376
Fort Sam Houston, TX 78234-0296
210-672-0441
Length: 4 Year(s) Total Positions: 9 (GY: 0)
Subspecialties: CPB
Program ID: 300-44-12-008

Galveston
University of Texas Medical Branch Hospitals Program
University of Texas Medical Branch Hospitals
Program Director:
Benjamin B. Galen, MD
University of Texas Medical Branch at Galveston
Dept of Pathology
5190 Pathology Blvd
Galveston, TX 77556-0900
409-772-2870
Length: 4 Year(s) Total Positions: 25 (GY: 5)
Program ID: 300-44-11-349

Houston
Baylor College of Medicine Program
Baylor College of Medicine
Harrington County Hospital District-Ben Taub General Hospital
Methodist Hospital
Texas Children's Hospital
Veterans Affairs Medical Center (Houston)
Program Director:
Mary B. Schwartz, MD
Baylor College of Medicine
One Baylor Plaza
Houston, TX 77030
713-798-4661
Length: 4 Year(s) Total Positions: 6 (GY: 6)
Subspecialties: BBS, KMM, PCP
Program ID: 300-44-11-350
University of Texas at Houston Program
University of Texas Medical School at Houston
Hermann Hospital
Lyndon B. Johnson General Hospital
Program Director:
Margaret Okonkwo, MD
Texas Medical Center
6431 Fannin 2120
Houston, TX 77030
713-793-5000
Length: 4 Year(s) Total Positions: 30 (GY: 5)
Program ID: 300-44-11-352

Lackland AFB
Wilford Hall USAF Medical Center Program
Wilford Hall USAF Medical Center (SG)
Program Director:
Dennis M. Drehner, DO
Wilford Hall Medical Center
Dept of Pathology (PSL)
2250 Bergquist Dr Ste 1
San Antonio, TX 78236-5300
210-672-0741
Length: 4 Year(s) Total Positions: 15 (GY: 3)
Subspecialties: CPB
Program ID: 300-44-11-001

* Updated information not provided.
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<th>Location</th>
<th>Program Name</th>
<th>Program Type</th>
<th>Program Details</th>
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<tbody>
<tr>
<td>Lubbock</td>
<td>Texas Tech University (Lubbock) Program*</td>
<td>Accredited</td>
<td>University Health Sciences Center at Lubbock</td>
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<td></td>
<td>University Medical Center</td>
<td>Program Director: Dale M Dunn, MD</td>
<td>Dept of Pathology</td>
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<td>University Medical Center</td>
<td>Length: 4 Year(s)</td>
<td>Program ID: 300-48-31-415</td>
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<td>San Antonio</td>
<td>University of Texas Health Science Center at San Antonio Program</td>
<td>Accredited</td>
<td>University of Texas Medical School at San Antonio</td>
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<td></td>
<td>Baptist Memorial Hospital System</td>
<td>Program Director: Philip L Valentine, MD</td>
<td>Dept of Pathology</td>
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<td></td>
<td>University Hospital-South Texas Medical Center</td>
<td>Length: 4 Year(s)</td>
<td>Program ID: 300-48-21-366</td>
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<td>Virginia</td>
<td>University of Virginia Program</td>
<td>Accredited</td>
<td>University of Virginia Medical Center</td>
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<td>Charlottesville</td>
<td>University of Virginia Program</td>
<td>Program Director: Thomas W Tillack, MD</td>
<td>Dept of Pathology</td>
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<td></td>
<td>University of Virginia</td>
<td>Length: 4 Year(s)</td>
<td>Program ID: 300-51-11-362</td>
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<td>Falls Church</td>
<td>Program Director: C Bartle Cook, MD</td>
<td>Dept of Pathology</td>
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<td></td>
<td>Fairfax Hospital Program</td>
<td>Length: 4 Year(s)</td>
<td>Program ID: 300-51-12-364</td>
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<td>American Medical Laboratories</td>
<td>Program Director: C Bartle Cook, MD</td>
<td>Dept of Pathology</td>
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<td></td>
<td>Falls Church</td>
<td>Length: 4 Year(s) Total Positions: 1 (GY: 1)</td>
<td>Program ID: 300-51-12-304</td>
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<td>Eastern Virginia Graduate School of Medicine Program</td>
<td>Program Director: Richard P Moriarty, MD</td>
<td>Department of Pathology</td>
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<td></td>
<td>Eastern Virginia Graduate School of Medicine</td>
<td>Length: 4 Year(s) Total Positions: 6 (GY: 1)</td>
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<td></td>
<td>Children’s Hospital of the King’s Daughters</td>
<td>Program Director: Richard P Moriarty, MD</td>
<td>Department of Pathology</td>
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<td></td>
<td>Sentara Norfolk General Hospital</td>
<td>Length: 4 Year(s)</td>
<td>Program ID: 300-51-21-305</td>
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<td></td>
<td>Veterans Affairs Medical Center (Hampton)</td>
<td>Program Director: Richard P Moriarty, MD</td>
<td>Department of Pathology</td>
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<td></td>
<td>University of Virginia</td>
<td>Length: 4 Year(s) Total Positions: 10 (GY: 2)</td>
<td>Program ID: 300-51-12-304</td>
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<td>Scott and White Memorial Hospital</td>
<td>Program Director: Robert S Beisner, MD</td>
<td>Dept of Pathology</td>
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<td>Olin E Teague Veterans Center</td>
<td>Length: 4 Year(s) Total Positions: 10 (GY: 2)</td>
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<td>Texas A&amp;M College of Medicine-Scott and White</td>
<td>Program Director: Robert S Beisner, MD</td>
<td>Dept of Pathology</td>
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<td>Scott and White Memorial Hospital</td>
<td>Program Director: Robert S Beisner, MD</td>
<td>Dept of Pathology</td>
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<td>Dept of Pathology</td>
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<td>Scott and White Memorial Hospital</td>
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<td>Dept of Pathology</td>
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<td>Olin E Teague Veterans Center</td>
<td>Length: 4 Year(s) Total Positions: 10 (GY: 2)</td>
<td>Program ID: 300-48-21-366</td>
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*Updated information not provided.
West Virginia

Huntington

Marshall University School of Medicine Program
Marshall University School of Medicine
Cabell Huntington Hospital
Charleston Area Medical Center
St Mary's Hospital
Veterans Affairs Medical Center (Huntington)

Program Director:
Ernest M Walker, MD PhD
Marshall University School of Medicine
Dept of Pathology
1642 Spring Valley Br
Huntington, WV 25704-9888
304 696-7346

Length: 4 Year(s) Total Positions: 10 (GYI: 1)
Program ID: 300-55-31-372

Morgantown

West Virginia University Program
West Virginia University Hospitals

Program Director:
Mary Ann Sens, MD PhD
West Virginia University Hospital
Dept of Pathology
PO Box 9203
Morgantown, WV 26506-9203
304 293-3212

Length: 4 Year(s) Total Positions: 8 (GYI: 3)
Subspecialties: NP
Program ID: 300-55-11-373

Wisconsin

Madison

University of Wisconsin Program
University of Wisconsin Hospital and Clinics
Mertzer Hospital
William S Middleton Veterans Hospital

Program Director:
John Weiss, MD PhD
University of Wisconsin Hospital and Clinics
855/56 Clinical Sci Ctr
600 Highland Ave
Madison, WI 53792-3224
608 263-8888

Length: 4 Year(s) Total Positions: 20 (GYI: 4)
Subspecialties: BBP,PCP
Program ID: 300-56-31-376

Milwaukee

Medical College of Wisconsin Program
Medical College of Wisconsin Affiliated Hospitals Inc
Clement J Zablocki Veterans Affairs Medical Center
 Froedtert Memorial Lutheran Hospital
John J Doyne Hospital

Program Director:
Richard A Komorowicz, MD
John J Doyne Hospital
Dept of Pathology
5700 W Wisconsin Ave
Milwaukee, WI 53226
414 257-9021

Length: 4 Year(s) Total Positions: 15 (GYI: 3)
Program ID: 300-56-31-377

St Luke's Medical Center Program
St Luke's Medical Center

Program Director:
Wiletta G Doon, MD
Charles Beekhoff, MD
Dept of Laboratory Medicine
2900 W Oklahoma Ave
PO Box 2961
Milwaukee, WI 53201-3901
414 648-7333

Length: 4 Year(s) Total Positions: 7 (GYI: 3)
Program ID: 300-06-12-380

Pediatrics

Alabama

Birmingham

University of Alabama Medical Center Program
University of Alabama Hospitals/Children's Hospital of Alabama
Program Director:
Sergio Stagno, MD
Children's Hospital of Alabama
1600 Seventh Ave S
Ste 604-ACC
Birmingham, AL 35233-1711
205 834-5004

Length: 3 Year(s) Total Positions: 47 (GYI: 15)
Subspecialties: CCP,PE,PG,PED,PHO
Program ID: 320-01-21-017

Mobile

University of South Alabama Program
University of South Alabama Medical Center
Program Director:
Franklin Tritum, MD
University of South Alabama
1504 Spring Hill Ave
PO Drawer 40130
Mobile, AL 36640-0130
205 434-3561

Length: 3 Year(s) Total Positions: 21 (GYI: 7)
Subspecialties: PHO
Program ID: 320-01-21-019

Arizona

Phoenix

Phoenix Hospitals Program
Phoenix Children's Hospital
Maricopa Medical Center
Program Director:
Melvin L Cohen, MD
Phoenix Children's Hospital
Medical Education Dept
900 E Brill St
Phoenix, AZ 85006-2514
602 238-8588

Length: 3 Year(s) Total Positions: 36 (GYI: 13)
Program ID: 330-03-21-020

St Joseph's Hospital and Medical Center Program
St Joseph's Hospital and Medical Center
Program Director:
John Olsen, MD
St Joseph's Hospital and Medical Center
Children's Hlt Ctr
PO Box 2071
Phoenix, AZ 85061-2071
602 406-3122

Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 330-03-21-071

* Updated information not provided.
Accredited Programs in Pediatrics

Tucson
University of Arizona Program
University of Arizona College of Medicine
Tucson Medical Center
University Medical Center
Program Director:
Leslie L Barton, MD
The University of Arizona Health Sciences Center
Dept of Pediatrics
1501 N Campbell Ave
Tucson, AZ 85724
602-257-7644
Length: 3 Year(s)  Total Positions: 58 (GY: 12)
Subspecialties: CCNPNM,FDP
Program ID: 320-03-21-021

Arkansas
Little Rock
University of Arkansas for Medical Sciences Program
University of Arkansas College of Medicine
Arkansas Children's Hospital
University Hospital of Arkansas
Program Director:
Chris E Smith, MD
Dept of Pediatrics
800 Marshall St
Little Rock, AR 72202-3691
501-320-1878
Length: 3 Year(s)  Total Positions: 56 (GY: 16)
Subspecialties: CCNPNM,FDP,PG
Program ID: 330-04-21-022

California
Fresno
University of California (San Francisco)/Fresno Program
UCSF Fresno Medical Education Program
Valley Children's Hospital
Valley Medical Center of Fresno
Program Director:
Rjens W Wilson, MD
Valley Medical Center of Fresno
Dept of Pediatrics
465 S Cedar Ave
Fresno, CA 93722
209-458-6741
Length: 3 Year(s)  Total Positions: 21 (GY: 7)
Program ID: 320-06-11-024

Loma Linda
Loma Linda University Program
Loma Linda University Medical Center
Riverside General Hospital-University Medical Center
Program Director:
Richard E Chinnoch, MD
Loma Linda University Medical Center
11234 Anderson St Rm 106 WH
PO Box 2000
Loma Linda, CA 92354
909 384-1147
Length: 3 Year(s)  Total Positions: 54 (GY: 20)
Subspecialties: CCNPNM,FN
Program ID: 320-05-1-026

Los Angeles
Cedars-Sinai Medical Center Program
Cedars-Sinai Medical Center
Program Director:
Lee Todd Miller, MD
Cedars Sinai Medical Center
Dept of Pediatrics Rm 4310
3450 Every Ave
Los Angeles, CA 90049-0750
310 855-6467
Length: 3 Year(s)  Total Positions: 17 (GY: 9)
Subspecialties: NPM,PN
Program ID: 320-05-31-227

Charles R Drew University Program
Charles R Drew University of Medicine and Science
LAC-King/Drew Medical Center
Program Director:
Glenda Lindsey, MD
Martin Luther King Jr.Drew Medical Center
12021 S Wilmington Ave
Los Angeles, CA 90059
310 656-4469
Length: 3 Year(s)  Total Positions: 48 (GY: 12)
Program ID: 320-05-11-001

Childrens Hospital of Los Angeles Program*
Children's Hospital of Los Angeles
Program Director:
Eyal Ben-Itzack, MD
Children's Hospital of Los Angeles
4550 Sunset Blvd
Mailstop #69
Los Angeles, CA 90027
213 681-2123
Length: 3 Year(s)  Total Positions: 81 (GY: 28)
Subspecialties: CCNPNM,FDC,FDP,FDP,PH,FN
Program ID: 320-05-11-028

UCLA Medical Center Program
UCLA School of Medicine
LAC-Olive View Medical Center
UCLA Medical Center
Program Director:
Stuart Slavin, MD
University of California Los Angeles School of Medicine
Dept of Pediatrics
10833 Le Conte Ave
Los Angeles, CA 90024-1752
310 794-2169
Length: 3 Year(s)  Total Positions: 57 (GY: 19)
Subspecialties: CCNPNM,FDC,FDP,FDP,PH,FN
Program ID: 320-05-06-1-022

University of Southern California Program
Los Angeles County-USC Medical Center
Program Director:
Lawrence M Opas, MD
Los Angeles County University of Southern California
Med Cir
Women's & Children's Hospital
1240 N Mission Rd Rm L-916
Los Angeles, CA 90033-1084
213 266-3691
Length: 3 Year(s)  Total Positions: 33 (GY: 11)
Subspecialties: NPM,PHO
Program ID: 320-04-1-030

White Memorial Medical Center Program
White Memorial Medical Center
Program Director:
Anthony T Hirsch, MD
White Memorial Medical Center
17300 Cesar E Chavez Ave
Los Angeles, CA 90033
213 263-8856
Length: 3 Year(s)  Total Positions: 12 (GY: 4)
Program ID: 320-05-11-003

Oakland
Children's Hospital Medical Center of Northern California Program
Children's Hospital Medical Center of Northern California
Program Director:
Iyya Kutsches, MD
Children's Hospital Oakland
747 52nd St
Oakland, CA 94609
510 885-2780
Length: 3 Year(s)  Total Positions: 68 (GY: 24)
Subspecialties: PHO
Program ID: 320-05-31-034

Kaiser Permanente Medical Group (Northern California) Program
Kaiser Permanente Medical Group (Northern California)
Kaiser Permanente Medical Center (Oakland)
Program Director:
Frederick T Shun, MD
Kaiser Permanente Medical Center
Dept of Pediatrics
280 W MacArthur Blvd
Oakland, CA 94611-5805
510 596-6126
Length: 3 Year(s)  Total Positions: 16 (GY: 5)
Program ID: 320-05-12-038

Kaiser Permanente Medical Group (Northern California) Program
Kaiser Permanente Medical Group (Northern California)
Kaiser Foundation Hospital (San Francisco)
Kaiser Medical Center (Oakland)
Program Director:
Thomas F Mohr, MD
Dept of Pediatrics
2200 O'Farrell St
San Francisco, CA 94115
415 303-3506
Length: 3 Year(s)  Total Positions: 6 (GY: 3)
Program ID: 320-05-12-038

Orange
Children's Hospital of Orange County Program*
Children's Hospital of Orange County
St Joseph Hospital
Program Director:
David J Lang, MD
Children's Hospital of Orange County
Dept of Pediatrics
455 S Main St
Orange, CA 92868
714 352-8338
Length: 3 Year(s)  Total Positions: 20 (GY: 8)
Subspecialties: PHO
Program ID: 320-05-21-386

University of California (Irvine) Program
University of California (Irvine) Medical Center
Children's Hospital of Orange County
Long Beach Memorial Medical Center
Program Director:
Jennifer Johnson, MD
University of California Irvine Medical Center
Dept of Pediatrics 4402
PO Box 14091 Bldg 27 Rt 81
Orange, CA 92613-1401
714 652-6105
Length: 3 Year(s)  Total Positions: 54 (GY: 18)
Subspecialties: NPM,PDP
Program ID: 320-05-21-225

* Updated information not provided.

Graduate Medical Education Directory


Waterbury
Yale University (Waterbury) Program
Waterbury Hospital Health Center
St Mary’s Hospital
Program Director: Richard A Ehrenkranz, MD
Waterbury Hospital Health Center
64 Robbins St
Waterbury, CT 06701
203 573-6158
Length: 3 Year(s) Total Positions: 16 (GY: 5)
Program ID: 320-08-21-047

District of Columbia
Washington
George Washington University Program
George Washington University School of Medicine
Children’s National Medical Center
Program Director: Bernhard J. Woeltermann, MD
Children’s National Medical Center
111 Michigan Ave NW
Ste W3-5-000
Washington, DC 20010-2870
202 344-3659
Length: 3 Year(s) Total Positions: 78 (GY: 20)
Subspecialties: CCP/PFM, PCD, PG, PHO, FN
Program ID: 320-10-21-001
Georgetown University Program
Georgetown University Hospital
Fairfax Hospital
Program Director: Dorothy A Richmond, MD
Georgetown University Hospital
Dept of Pediatrics
3800 Reservoir Rd NW
Washington, DC 20007
202 687-8882
Length: 3 Year(s) Total Positions: 43 (GY: 14)
Subspecialties: CCP/PFM, PCD, GPE, FN
Program ID: 320-10-21-050
Howard University Program*
Howard University Hospital
District of Columbia General Hospital
Program Director: John W Downing Jr, MD
Howard University Hospital
Dept of Pediatrics and Child Health
2041 Georgia Ave NW
Washington, DC 20050
202 365-1052
Length: 3 Year(s) Total Positions: 45 (GY: 16)
Program ID: 320-10-21-049
Walter Reed Army Medical Center Program
Walter Reed Army Medical Center
Program Director: John R Pierce, MD
Chief Dept of Pediatrics
Walter Reed Army Medical Center
6825 16th St NW
Washington, DC 20307-5001
202 576-1249
Length: 3 Year(s) Total Positions: 18 (GY: 7)
Subspecialties: NFM, PDE, PG, PHO
Program ID: 320-10-11-006

Florida
Gainesville
University of Florida Program
University of Florida College of Medicine
Shands Hospital at the University of Florida
Program Director: Joel M. Andres, MD
University of Florida Shands Hospital
Pediatric Housestaff Office Box 100196
Gainesville, FL 32610-0196
904 395-0451
Length: 3 Year(s) Total Positions: 45 (GY: 15)
Subspecialties: CCP/PFM, PCD, PG, PHO, FN
Program ID: 320-11-11-003
Jacksonville
University of Florida Health Science Center/Jacksonville Program
University Medical Center (UFHSC/J)
Baptist Medical Center (UFHSC/J)
Nemours Children’s Clinic (UFHSC/J)
Program Director: Ronald P. Carroll, MD
Office of Medical Education
655 W Eight St
Jacksonville, FL 32206-1611
904 546-3049
Length: 3 Year(s) Total Positions: 33 (GY: 11)
Subspecialties: CCP
Program ID: 320-11-21-055

Miami
Miami Children’s Hospital Program*
Miami Children’s Hospital
Program Director: Ramon Rodriguez-Torres, MD
Miami Children’s Hospital
6125 SW 31st St
Miami, FL 33155-3008
305 666-2563
Length: 3 Year(s) Total Positions: 45 (GY: 18)
Subspecialties: CCP
Program ID: 320-11-21-007
University of Miami-Jackson Memorial Medical Center Program
University of Miami-Jackson Memorial Medical Center
Program Director: R Rodney Howell, MD
Univ of Miami School of Medicine
Dept of Pediatrics
PO Box 014660 (R1311)
Miami, FL 33101-0600
305 355-6012
Length: 3 Year(s) Total Positions: 64 (GY: 21)
Subspecialties: CCP/PFM, PCD, PHO
Program ID: 320-11-11-056

Orlando
Orlando Regional Healthcare System Program
Arnold Palmer Hospital for Children and Women
Orlando Regional Medical Center
Program Director: Michael J Masternak, MD
Orlando Regional Healthcare System
Medical Education/Pediatrics
450 W Miller St Ste 303
Orlando, FL 32806
407 841-6143
Length: 3 Year(s) Total Positions: 24 (GY: 8)
Program ID: 320-11-31-058

Pensacola
Sacred Heart Hospital of Pensacola Program
Sacred Heart Hospital of Pensacola
Program Director: Robert K Wilson Jr, MD
Sacred Heart Children’s Hospital
5151 N Nine Ave
Pensacola, FL 32504
904 474-7568
Length: 3 Year(s) Total Positions: 14 (GY: 5)
Program ID: 320-11-21-059

Tampa
University of South Florida (All Children’s) Program
University of South Florida College of Medicine
All Children’s Hospital
Program Director: Martin R Klemperer, MD
All Children’s Hospital
801 South St S
PO Box 34020
St Petersburg, FL 33701-8020
813 992-4108
Length: 3 Year(s) Total Positions: 38 (GY: 10)
Program ID: 320-11-21-009
University of South Florida Program
University of South Florida College of Medicine
Tampa General Healthcare
Program Director: Jennifer M Jutle, MD
University of South Florida College of Medicine
17 Davis Blvd 2nd Fl
Rm 215
Tampa, FL 33606
813 272-2272
Length: 3 Year(s) Total Positions: 31 (GY: 10)
Subspecialties: NFM, PDE
Program ID: 320-11-21-060

Georgia
Atlanta
Emory University Program
Emory University School of Medicine
Grady Memorial Hospital
Hollis Egleston Hospital for Children
Program Director: Susie Bucher, MD
Emory University School of Medicine
Dept of Pediatrics
60 Butler St SE
Atlanta, GA 30303-2007
404 616-5133
Length: 3 Year(s) Total Positions: 56 (GY: 18)
Subspecialties: CCP/PFM, PCD, PDE, PHO
Program ID: 320-12-21-061

*Updated information not provided.
Accredited Programs in Pediatrics

Augusta
Medical College of Georgia Program
Medical College of Georgia Hospital and Clinics
University Hospital
Program Director:
David B Plavney, MD
Medical College of Georgia Dept of Pediatrics
1129 15th St
Room BG-121
Augusta, GA 30912-3706
706 721-6440
Length: 3 Year(s) Total Positions: 30 (GYI: 10)
Specialties: CCP, NPM, PDC
Program ID: 320-12-21-062

Macon
Mercer University School of Medicine Program
Medical Center of Central Georgia
Program Director:
Marcia B Guzman, MD
The Medical Center of Central Georgia
777 Hemlock St
Hospital Box 42
Macon, GA 31201
912 633-7800
Length: 3 Year(s) Total Positions: 12 (GYI: 4)
Program ID: 320-12-21-288

Hawaii
Honolulu
University of Hawaii Program
University of Hawaii John A Burns School of Medicine
Kapiolani Medical Center for Women and Children
Program Director:
Sherrel L Haiman, MD
Kapiolani Medical Center for Women and Children
1319 Punahou St
Honolulu, HI 96826
808 946-5879
Length: 3 Year(s) Total Positions: 27 (GYI: 9)
Specialties: NPM
Program ID: 320-14-21-063

Trailer
Trailer Army Medical Center Program
Trailer Army Medical Center
Program Director:
Donald A Person, MD
Trailer Army Medical Center
Dept of Pediatrics
Honolulu, HI 96808-6000
808 833-2074
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 320-14-21-007

Illinois
Chicago
Columbus Hospital Program
Columbus Hospital
Cabrini Hospital
Program Director:
Howard Weiss, MD
Dept of Pediatrics
Columbus Hospital
2520 N Lakeview Ave
Chicago, IL 60614
312 885-5000
Length: 3 Year(s) Total Positions: 13 (GYI: 4)
Program ID: 320-16-31-061

Cook County Hospital Program
Cook County Hospital
Program Director:
David Spollin, MD
Cook County Children's Hospital
700 S Wood St
Rm 131
Chicago, IL 60612
312 563-6500
Length: 3 Year(s) Total Positions: 47 (GYI: 16)
Specialties: NPM
Program ID: 320-16-11-065

McGaw Medical Center of Northwestern University Program
Northwestern University Medical School
Children's Memorial Medical Center
Evanston Hospital
Program Director:
Sharon M Unu, MD
Children's Memorial Hospital
2300 Children's Plaza # 18
Chicago, IL 60614-3500
312 880-4302
Length: 3 Year(s) Total Positions: 70 (GYI: 24)
Specialties: CCP, PDC, PDE, PHO
Program ID: 320-16-21-070

Rush Medical College Program
Rush-Presbyterian-St Luke's Medical Center
Program Director:
Samuel P Gotoff, MD
1652 West Congress Pl
Jones Bldg Rm 770
Chicago, IL 60612-3844
312 942-8828
Length: 3 Year(s) Total Positions: 42 (GYI: 13)
Specialties: CCP
Program ID: 320-16-31-069

University of Chicago Program
University of Chicago Hospitals
Wyller Children's Hospital at the University of Chicago
Program Director:
Patrick T Horn, MD
University of Chicago Hospitals
5841 S Maryland Ave MC1051
Chicago, IL 60637-1470
312 702-6444
Length: 3 Year(s) Total Positions: 74 (GYI: 23)
Specialties: CCP, PDC, PDE, PHO
Program ID: 320-16-11-473

University of Illinois College of Medicine at Chicago Program*
University of Illinois College of Medicine at Chicago
Michael Reese Hospital and Medical Center
University of Illinois Hospital and Clinics
Program Director:
George R Honig, MD
University of Illinois Hospital
940 S Wood St MC 856
Chicago, IL 60612
312 996-8297
Length: 3 Year(s) Total Positions: 51 (GYI: 17)
Specialties: NPM
Program ID: 320-16-11-074

University of Illinois College of Medicine at Chicago/Christ Hospital Program
University of Illinois College of Medicine at Chicago
EHS Christ Hospital and Medical Center
Program Director:
Laurie M Roy, MD
Christ Hospital & Medical Center
4440 W 95th St
Oak Lawn, IL 60453
708 546-5692
Length: 3 Year(s) Total Positions: 27 (GYI: 9)
Specialties: PDC
Program ID: 320-18-21-382

Maywood
Loyola University Program
Foster G McCaw Hospital-Loyola University of Chicago
Program Director:
Craig L Anderson, MD
Foster G McCaw Hospital
Dept of Pediatrics
2160 S First Ave
Maywood, IL 60153-6015
708 227-0412
Length: 3 Year(s) Total Positions: 28 (GYI: 10)
Specialties: NPM
Program ID: 320-16-21-075

Park Ridge
Lutheran General Hospital Program
Lutheran General Hospital
Program Director:
Jerome R Kraut, MD
Lutheran General Children's Hospital
1775 Dempster St
Park Ridge, IL 60068-1174
800 866-2210
Length: 3 Year(s) Total Positions: 31 (GYI: 10)
Specialties: CCP, NPM
Program ID: 320-16-12-077

Peoria
University of Illinois College of Medicine at Peoria Program
University of Illinois College of Medicine at Peoria
St Francis Medical Center
Program Director:
Jalayne M Lapko, MD
University of Illinois College of Medicine at Peoria
St Francis Medical Center
530 NE Glen Oak
Peoria, IL 61604
309 966-7337
Length: 3 Year(s) Total Positions: 12 (GYI: 4)
Program ID: 320-16-21-079

* Updated information not provided.
Springfield
Southern Illinois University Program
Southern Illinois University School of Medicine
St. John's Hospital
Program Director:
Thomas W. Loew, MD
Southern Illinois University School of Medicine
PO Box 18330
301 N Eighth St
Springfield, IL 62704-0230
217-786-1657
Length: 3 Year(s) Total Positions: 12 (GYI: 4)
Program ID: 320-18-24-079

Kansas
Kansas City
University of Kansas Medical Center
Program
University of Kansas School of Medicine
University of Kansas Medical Center
Program Director:
Carol B. Lindseth, MD
Univ of Kansas Med Ctr
Dept of Pediatrics
3001 Rainbow Blvd
Kansas City, KS 66160-7330
913 586-6517
Length: 3 Year(s) Total Positions: 28 (GYI: 8)
Program ID: 320-19-11-094

Wichita
University of Kansas (Wichita) Program
University of Kansas School of Medicine (Wichita)
Wesley Medical Center
Program Director:
Katherine J. McIver, MD
University of Kansas (Wichita)
Dept of Pediatrics
1011 N Kansas
Wichita, KS 67214-3189
316 261-3031
Length: 3 Year(s) Total Positions: 12 (GYI: 6)
Program ID: 320-19-21-086

Iowa
Des Moines
Iowa Methodist Medical Center Program
Iowa Methodist Medical Center
Program Director:
William G. Bartlett, DC
Raymond Boek Memorial Hospital for Children
1200 Pleasant St
Des Moines, IA 50309
515 241-4467
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 320-18-31-082

Iowa City
University of Iowa Hospitals and Clinics Program
University of Iowa Hospitals and Clinics
Program Director:
Gal A. McGuinness, MD
University of Iowa Hospitals and Clinics
Dept of Pediatrics
Iowa City, IA 52242-1069
319 356-5688
Length: 3 Year(s) Total Positions: 30 (GYI: 13)
Subspecialties: NPM,FDC,FDP,P/PHO
Program ID: 320-18-11-083

* Updated information not provided.

Graduate Medical Education Directory 635

Accredited Programs in Pediatrics

Baton Rouge
Louisiana State University (Baton Rouge) Program
Earl K. Long Medical Center
Program Director:
Judith Fishbein, MD
Earl K. Long Medical Center
Dept of Pediatrics
5365 Airline Hwy
Baton Rouge, LA 70805-2488
504 358-1063
Length: 3 Year(s) Total Positions: 12 (GYI: 4)
Program ID: 320-21-11-099

New Orleans
Louisiana State University Program
Louisiana State University School of Medicine
Children's Hospital
Medical Center of Louisiana at New Orleans-LSU Division
Program Director:
Russell Steele, MD
Louisiana State University School of Medicine
Dept of Pediatrics
1542 Tulane Ave
New Orleans, LA 70112-2822
504 588-6311
Length: 3 Year(s) Total Positions: 44 (GYI: 16)
Subspecialties: NPM,PHO
Program ID: 320-21-21-090

Tulane University Program
Tulane University School of Medicine
Alton Ochsner Medical Foundation
Medical Center of Louisiana at New Orleans-Tulane Division
Tulane University Hospital and Clinics
Program Director:
Hosea J. Duceit III, MD
Tulane University Medical Center
1430 Tulane Ave
Department of Pediatrics
New Orleans, LA 70112
504 588-5458
Length: 3 Year(s) Total Positions: 36 (GYI: 12)
Subspecialties: FDC,FDP,PHO
Program ID: 320-21-21-082

Shreveport
Louisiana State University Program (Shreveport)
Louisiana State University Medical Center-Shreveport
Program Director:
Joseph A. Boccia Jr, MD
Louisiana State University Medical Center Hospital
Medical Education Pediatrics
1501 Kings Hwy PO Box 33932
Shreveport, LA 71138-3032
318 675-4073
Length: 3 Year(s) Total Positions: 17 (GYI: 7)
Subspecialties: NPM
Program ID: 320-21-11-093
Maine

**Portland**

**Maine Medical Center Program**
Maine Medical Center
Program Director: Barbara A Chalmondeley, MD
Maine Medical Center
Dept of Pediatrics
22 Bramhall St
Portland, ME 04102-3175
207 871-2353
Length: 3 Year(s) Total Positions: 17 (GY: 5)
Program ID: 320-23-11-404

Massachusetts

**Boston**

**Boston City Hospital Program**
Boston City Hospital
Program Director: Robert J Vinci, MD
Dept of Pediatrics
Boston City Hospital
818 Harrison Ave
Boston, MA 02118
617 334-5177
Length: 3 Year(s) Total Positions: 23 (GY: 11)
Subspecialties: NFM
Program ID: 320-24-21-191

**Harvard Medical School Program**
Children’s Hospital
Program Director: David G Nathan, MD
Children’s Hospital
300 Longwood Ave
Boston, MA 02115
617 735-7684
Length: 3 Year(s) Total Positions: 23 (GY: 27)
Subspecialties: CDPNP, PDC, PDP, PG, PHO, PNM
Program ID: 320-24-11-102

**Massachusetts General Hospital Program**
Massachusetts General Hospital
Program Director: Donald N Medearis Jr, MD
Massachusetts General Hospital
Children’s Service Ellison 1904
Boston, MA 02114-2686
617 732-5901
Length: 3 Year(s) Total Positions: 27 (GY: 12)
Subspecialties: CCP, PDE, PG, PNM
Program ID: 320-24-31-103

**New England Medical Center Hospitals**

**Program**
New England Medical Center Hospitals
Program Director: Lynne Karston, MD
New England Medical Center
750 Washington St Box 286
Boston, MA 02111
617 636-6256
Length: 3 Year(s) Total Positions: 54 (GY: 17)
Subspecialties: PG
Program ID: 320-24-21-104

Springfield

**Baystate Medical Center Program**
Baystate Medical Center
Program Director: Barbara W Steenberg, MD
Baystate Medical Center
Dept of Pediatrics
769 Chestnut St
Springfield, MA 01199
800 869-4202
Length: 3 Year(s) Total Positions: 21 (GY: 7)
Subspecialties: PHO
Program ID: 320-25-12-106

**Worcester**

**University of Massachusetts Medical Center Program**
University of Massachusetts Medical Center
Program Director: Kenneth B Roberts, MD
University of Massachusetts Medical Center
55 Lake Ave N
Worcester, MA 01655
508 856-3000
Length: 3 Year(s) Total Positions: 23 (GY: 7)
Subspecialties: PFM
Program ID: 320-24-21-107

Maryland

**Baltimore**

**Johns Hopkins University Program**
Johns Hopkins University School of Medicine
Johns Hopkins Hospital
Program Director: Julia A McMillan, MD
Johns Hopkins Hospital
CMSC 2-124
600 N Wolfe St
Baltimore, MD 21287-2224
410 614-5527
Length: 3 Year(s) Total Positions: 50 (GY: 23)
Subspecialties: CDPNP, PDC, PDP, PG, PNM, PHO
Program ID: 320-23-11-406

**Sinai Hospital of Baltimore**
Sinai Hospital of Baltimore
Program Director: Charles R Medani, MD
Sinai Hospital at Baltimore
Medical Staff/Education Office
2401 W Belvedere Ave
Baltimore, MD 21215
410 365-5522
Length: 3 Year(s) Total Positions: 22 (GY: 6)
Program ID: 320-33-11-999

**University of Maryland Program**
University of Maryland Medical System
Maryland Medical Center
Program Director: Carol L Caracacino, MD
22 S Greene Street Room N5W56
Baltimore, MD 21201
410 522-3213
Length: 3 Year(s) Total Positions: 53 (GY: 15)
Subspecialties: PFM, PDE
Program ID: 320-23-11-100

Bethesda

**National Naval Medical Center (Bethesda) Program**
National Naval Medical Center (Bethesda)
Program Director: Capt Richard A Moraridy, MD
National Naval Medical Center (Bethesda)
8601 Wisconsin Ave
Bethesda, MD 20814-5011
301 295-4624
Length: 3 Year(s) Total Positions: 5 (GY: 15)
Subspecialties: PHO
Program ID: 320-23-11-413

**Michigan**

**Ann Arbor**

**University of Michigan Program**
University of Michigan Hospitals
Program Director: Janet E Gildersleve, MD
University of Michigan Medical Center
2300 S Medical Center Dr
Ann Arbor, MI 48109-7018
734 764-5173
Length: 3 Year(s) Total Positions: 51 (GY: 11)
Subspecialties: CCNP, PDC, PDP, PG, PHO, PNM
Program ID: 320-25-21-109

**Detroit**

**Henry Ford Hospital Program**
Henry Ford Hospital
St Joseph Mercy Community HealthCare System
Program Director: Jeffery M Devries, MD MPH
Dept of Pediatrics
2789 W Grand Blvd
Detroit, MI 48202
313 876-3003
Length: 3 Year(s) Total Positions: 83 (GY: 20)
Program ID: 320-25-31-102

**St John Hospital and Medical Center**

**Program**
St John Hospital Medical Center
Program Director: Douglas K Ziegler, MD
St John Hospital and Medical Center
Department of Med Educ
22101 Moross Rd
Detroit, MI 48205-2172
313 343-4381
Length: 3 Year(s) Total Positions: 12 (GY: 4)
Program ID: 320-26-11-113

**Wayne State University/Detroit Medical Center Program**
Wayne State University School of Medicine
Children’s Hospital of Michigan
Program Director: Herman B Gray Jr, MD
Children’s Hospital of Michigan
3901 Beaubien Blvd
Detroit, MI 48201-2196
313 745-5523
Length: 3 Year(s) Total Positions: 76 (GY: 26)
Subspecialties: CCNP, PDC, PG, PHO
Program ID: 320-25-21-110

* Updated information not provided.
East Lansing
Michigan State University Program*
Michigan State University Clinical Center Sparrow Hospital
Program Director:
John A Germack, MD
Michigan State University
Dept of Pediatrics
311 Jones St Ste 6
Lansing, MI 48912-1837
517 438-2366
Length: 3 Year(s)  Total Positions: 15  (GYI: 5)
Subspecialties: NFM
Program ID: 320-25-21-114

Flint
Hurley Medical Center/Michigan State University Program
Hurley Medical Center
Program Director:
Tanur Suman, MD
Hurley Medical Center
One Hurley Plaza
Flint, MI 48503-5963
810 267-0293
Length: 3 Year(s)  Total Positions: 15  (GYI: 5)
Program ID: 320-25-31-115

Grand Rapids
Butterworth Hospital/Michigan State University Program
Butterworth Hospital
Program Director:
Gary M Kirk, MD
Butterworth Hospital
100 Michigan St NE MC #11
Grand Rapids, MI 49503
616 735-3670
Length: 3 Year(s)  Total Positions: 22  (GYI: 7)
Program ID: 320-25-21-116

Kalamazoo
Kalamazoo Center for Medical Studies/Michigan State University Program
Kalamazoo Center for Medical Studies
Bronson Methodist Hospital
Program Director:
Donald E Freytag, MD
Michigan State University-Kalamazoo Ctr for Medical Studies
Dept of Pediatrics
1000 Oakland Dr
Kalamazoo, MI 49008
616 337-6493
Length: 3 Year(s)  Total Positions: 12  (GYI: 4)
Program ID: 320-25-21-391

Royal Oak
William Beaumont Hospital Program
William Beaumont Hospital
Program Director:
M Jeffrey Maisels, MD
William Beaumont Hospital
3801 W 13 Mile Rd
Royal Oak, MI 48073-6769
810 551-0413
Length: 3 Year(s)  Total Positions: 15  (GYI: 5)
Program ID: 320-25-12-119

Mississippi
Jackson
University of Mississippi Medical Center Program
University of Mississippi School of Medicine
University Hospital
Program Director:
John E Millett, MD
University of Mississippi Medical Center
2500 N State St
Jackson, MS 39216-4500
601 947-8809
Length: 3 Year(s)  Total Positions: 33  (GYI: 10)
Subspecialties: NFM,PHO
Program ID: 320-27-12-122

Keesler FAB
Keesler Medical Center Program
Keesler Medical Center
Program Director:
Col George S Katchmar Jr, MD
81st Medical Group/SCSMC
301 Fisher St Ste 102
Keesler FAB, MS 30504-2300
601 377-6020
Length: 3 Year(s)  Total Positions: 23  (GYI: 7)
Program ID: 320-27-12-002

Missouri
Columbia
University of Missouri-Columbia Program
University of Missouri-Columbia School of Medicine
University and Children's Hospital
Program Director:
Sara V Sokropulos, MD
Missouri University School of Medicine
One Hospital Dr
Columbia, MO 65212
573 882-0445
Length: 3 Year(s)  Total Positions: 23  (GYI: 8)
Subspecialties: NFM
Program ID: 320-28-11-123

Kansas City
University of Missouri at Kansas City Program
University of Missouri-Kansas City School of Medicine
Children's Mercy Hospital
Program Director:
Sharon M Heimms, MD
Medical Education
Children's Mercy Hospital
2401 Gillham Rd
Kansas City, MO 64108-8898
816 234-3371
Length: 3 Year(s)  Total Positions: 48  (GYI: 17)
Subspecialties: NFM,PDE,PHO,PN
Program ID: 320-28-11-124

St Louis
St Louis University School of Medicine
Program
St Louis University School of Medicine
Cardinal Glennon Children's Hospital
Program Director:
Richard C Barry, MD
Allan D Friedman, MD MPH
Cardinal Glennon Children's Hospital
1465 S Grand Blvd
St Louis, MO 63104
314 577-5634
Length: 3 Year(s)  Total Positions: 41  (GYI: 13)
Subspecialties: NFM,PDE,PG
Program ID: 320-28-21-127

Washington University Program*
St Louis Children's Hospital
Program Director:
James P Keating, MD
Children's Hospital at Washington University Medical Center
400 S Kingshighway
St Louis, MO 63110
314 454-5006
Length: 3 Year(s)  Subspecialties: CCNPMP,FDC,PDE,PDP,PG,PHO,PN,PHO,PN
Program ID: 320-28-11-125

* Updated information not provided.
Nebraska

Omaha

University of Nebraska/Creston University Program
University of Nebraska Medical Center
AMU St. Joseph Hospital at Creighton UMC Medical Center
Children's Hospital

Program Director:
Terence L. Corley, MD
University of Nebraska Medical Center
Dept of Pediatrics
600 S 42nd St.
Omaha, NE 68098-2186
402 559-5389

Length: 3 Year(s) Total Positions: 40 (GY: 11)
Subspecialties: PG
Program ID: 220-30-21-383

New Hampshire

Lebanon

Dartmouth-Hitchcock Medical Center Program
Mary Hitchcock Memorial Hospital

Program Director:
John G. Brown, MD
Dept of Pediatrics
Dartmouth-Hitchcock Medical Center
One Medical Center Dr
Lebanon, NH 03756-0001
603 656-5475

Length: 3 Year(s) Total Positions: 15 (GY: 5)
Subspecialties: NFM
Program ID: 220-32-22-190

New Jersey

Camden

UMDNJ-Robert Wood Johnson Medical School (Camden) Program
Cooper Hospital-University Medical Center

Program Director:
Ernest M. Post, MD
UMDNJ-Robert Wood Johnson Medical School (Camden) Program
Cooper Hosp Univ Med Ctr
Three Cooper Plaza, Ste 500
Camden, NJ 08103-1489
609 342-2250

Length: 3 Year(s) Total Positions: 24 (GY: 8)
Subspecialties: CPP
Program ID: 220-33-21-221

Long Branch

Monmouth Medical Center Program
Monmouth Medical Center

Program Director:
Howard A. Fox, MD
Monmouth Medical Center
300 Second Ave
Long Branch, NJ 07740
908 879-3575

Length: 3 Year(s) Total Positions: 18 (GY: 6)
Program ID: 220-33-11-133

Morristown

Morristown Memorial Hospital Program
Morristown Memorial Hospital
Program Director:
John T. Truman, MD
Morristown Memorial Hospital
100 Madison Ave
PO Box 1406
Morristown, NJ 07962-1856
201 971-5160

Length: 3 Year(s) Total Positions: 14 (GY: 4)
Program ID: 220-33-21-138

Neptune

Jersey Shore Medical Center Program
Jersey Shore Medical Center
Program Director:
Anna Marie Senso, MD MPH
Jersey Shore Medical Center
1445 Rte 22
Neptune, NJ 07754
908 775-4527

Length: 3 Year(s) Total Positions: 16 (GY: 6)
Program ID: 220-33-11-134

Newark

UMDNJ-New Jersey Medical School (Beth Israel) Program
UMDNJ-New Jersey Medical School
Elizabeth General Medical Center
Newark Beth Israel Medical Center
Program Director:
Jules A. Torella, MD
Newark Beth Israel Medical Center
901 Lyons Ave
Newark, NJ 07112
973 926-7200

Length: 3 Year(s) Total Positions: 34 (GY: 12)
Program ID: 220-33-21-382

UMDNJ-New Jersey Medical School Program
UMDNJ-New Jersey Medical School
Children's Hospital of New Jersey
UMDNJ University Hospital
Program Director:
Susan M. Tannenbaum, MD
Children's Hospital of New Jersey
15 S Ninth St
Newark, NJ 07107
201 698-6015

Length: 3 Year(s) Total Positions: 74 (GY: 22)
Subspecialties: CPP
Program ID: 220-33-11-135

Fiscataway

UMDNJ-Robert Wood Johnson Medical School Program
UMDNJ-Robert Wood Johnson Medical School
Robert Wood Johnson University Hospital
St Peter's Medical Center
Program Director:
Barbara K Snyder, MD
UMDNJ-Robert Wood Johnson Med Sch Dept of Pediatrics
One Robert Wood Johnson Plaza
New Brunswick, NJ 08903-0019
908 235-7885

Length: 3 Year(s) Total Positions: 36 (GY: 11)
Subspecialties: NFM
Program ID: 220-33-21-136

South Orange

Seton Hall University School of Graduate Medical Education (Jersey City) Program
Seton Hall University School of Graduate Medical Education
Jersey City Medical Center
Program Director:
Steven J. Piscopo, MD
Jersey City Medical Center
50 Baldwin Ave
Jersey City, NJ 07304
201 651-2055

Length: 3 Year(s) Total Positions: 24 (GY: 12)
Program ID: 220-33-21-131

Seton Hall University School of Graduate Medical Education Program
Seton Hall University School of Graduate Medical Education
St. Joseph's Hospital and Medical Center
Program Director:
Thomas E. Potter, MD
St. Joseph's Hospital at St. Joseph's
200 Main St
Paterson, NJ 07506
201 977-2190

Length: 3 Year(s) Total Positions: 22 (GY: 9)
Program ID: 220-33-21-384

Summit

Overlook Hospital Program
Overlook Hospital
Program Director:
H. Lawrence Waterhouse, MD
Overlook Hospital Children's Medical Center
99 Boornow Ave
PO Box 223
Summit, NJ 07901-0220
973 522-4679

Length: 3 Year(s) Total Positions: 18 (GY: 6)
Program ID: 220-33-11-137

New Mexico

Albuquerque

University of New Mexico Program
University of New Mexico School of Medicine
University Hospital
Program Director:
E. Clark Hanford, MD
University of New Mexico School of Medicine
Dept of Pediatrics
Ambulatory Care-Sr 3rd Fl
Albuquerque, NM 87131-5311
505 272-5551

Length: 3 Year(s) Total Positions: 28 (GY: 10)
Subspecialties: NFM, PED
Program ID: 220-34-11-138

* Updated information not provided.
New York

Albany

Albany Medical Center Program
Albany Medical Center Hospital
Program Director: Allan W. Geis, MD
Albany Medical College A-88
Dept of Pediatrics A-621
Albany, NY 12208
518 262-6926
Length: 3 Year(s) Total Positions: 20 (GYI: 9)
Subspecialties: NPM
Program ID: 320-35-21-159

Interfaith Medical Center Program
Interfaith Medical Center
Program Director: Abdul J. Khan, MD
Interfaith Medical Center
Dept of Pediatrics
1545 Atlantic Ave
Brooklyn, NY 11213
718 694-9200
Length: 3 Year(s) Total Positions: 21 (GYI: 7)
Program ID: 323-35-31-385

Long Island College Hospital Program
Long Island/College Hospital
Program Director: Mary F. Kauffman, MD
Long Island College Hospital
940 Henry St Rm 401 A
Brooklyn, NY, 11201
718 790-1146
Length: 3 Year(s) Total Positions: 31 (GYI: 10)
Program ID: 320-35-11-154

Maineonesides Medical Center Program
Maineonesides Medical Center
Coney Island Hospital
Program Director: Pima Lifshitz, MD
Maineonesides Medical Center
8920 10th Ave
Brooklyn, NY 11219
718 383-2560
Length: 3 Year(s) Total Positions: 50 (GYI: 21)
Subspecialties: PDR
Program ID: 320-35-21-157

New York Methodist Hospital Program
New York Methodist Hospital
New York Hospital
Program Director: Reem S Nangia, MD
New York Methodist Hospital
556 Sixth St
Brooklyn, NY 11215-9008
718 380-5061
Length: 3 Year(s) Total Positions: 10 (GYI: 6)
Program ID: 320-35-11-138

SUNY Health Science Center at Brooklyn Program
SUNY HSC at Brooklyn College of Medicine
King's County Hospital Center
Program Director: Laurence Fineberg, MD
Children's Medical Center of Brooklyn
450 Clarkson Ave Box #49
Brooklyn, NY 11203
718 270-1105
Length: 3 Year(s) Total Positions: 88 (GYI: 29)
Subspecialties: NPM, PDR, PDP, PHO
Program ID: 320-35-21-173

Woodhull Medical and Mental Health Center Program
Woodhull Medical and Mental Health Center
Program Director: John W. Mood, MD
Woodhull Medical & Mental Health Center
Dept of Pediatrics
700 Broadway
Brooklyn, NY 11206-6331
718 983-7969
Length: 3 Year(s) Total Positions: 36 (GYI: 12)
Program ID: 320-35-33-387

Buffalo

SUNY at Buffalo Graduate Medical-Dental Education Consortium Program
SUNY at Buffalo Grad Medical-Dental Education Consortium
Children's Hospital of Buffalo
Program Director: Gerald E. Dalgard, MD
Pediatrie Med Educa
Children's Hospital of Buffalo
218 Bryant St
Buffalo, NY 14222
716 878-7355
Length: 3 Year(s) Total Positions: 50 (GYI: 17)
Subspecialties: CCEP, PDR, PHO
Program ID: 320-35-21-140

East Meadow

Nassau County Medical Program
Nassau County Medical Center
Program Director: Stephen P. Katz, MD
Nassau County Medical Center
2291 Hempstead Turnpike
East Meadow, NY 11554-5400
516 572-6177
Length: 3 Year(s) Total Positions: 31 (GYI: 9)
Program ID: 320-35-21-141

Manhasset

North Shore University Hospital Program
North Shore University Hospital
Program Director: Harvey Albue, MD
North Shore University Hospital
330 Community Drive
Manhasset, NY 11030
516 562-6140
Length: 3 Year(s) Total Positions: 61 (GYI: 15)
Subspecialties: NPM, PDC, PDR, PG
Program ID: 320-35-21-160

Mineola

Winthrop-University Hospital Program
Winthrop-University Hospital
Program Director: Joseph Greenshet, MD
Winthrop-University Hospital
259 First St
Mineola, NY 11501
516 563-2298
Length: 3 Year(s) Total Positions: 39 (GYI: 10)
Subspecialties: PDR
Program ID: 320-35-11-143

New Hyde Park

Albert Einstein College of Medicine at Long Island Jewish Medical Center Program
Long Island Jewish Medical Center
Schneider Children's Hospital (Long Island Jewish Med Ctr)
Program Director: Philip Laskowski, MD
Schneider Children's Hospital
Long Island Jewish Medical Center
Dept of Pediatrics
New Hyde Park, NY 11040
718 470-3201
Length: 3 Year(s) Total Positions: 69 (GYI: 23)
Subspecialties: CCEP, PDC, PDR, PHO
Program ID: 320-35-21-155

* Updated information not provided.
New York
Albert Einstein College of Medicine at Beth Israel Medical Center Program
Beth Israel Medical Center
Program Director: Richard J Bonforte, MD
First Ave at 16th St
New York, NY 10003
212-420-4085
Length: 3 Year(s) Total Positions: 36 (GYI: 10)
Program ID: 320-35-11-145

Harlem Hospital Center Program
Harlem Hospital Center
Program Director: Margaret C Hegarty, MD
Harlem Hospital Center
506 Lenox Ave
New York, NY 10037
212-938-4912
Length: 3 Year(s) Total Positions: 30 (GYI: 10)
Program ID: 320-35-11-151

Mount Sinai School of Medicine (Elmhurst) Program
Mount Sinai School of Medicine
Elmhurst Hospital Center-Mount Sinai Services Mount Sinai Medical Center
Program Director: Melvin Gertzer, MD
Elmhurst Hospital Center-Mount Sinai Services
79-01 Broadway
Elmhurst, NY 11107
718-334-3380
Length: 3 Year(s) Total Positions: 38 (GYI: 10)
Program ID: 320-35-11-162

Mount Sinai School of Medicine Program
Mount Sinai School of Medicine Mount Sinai Medical Center
Program Director: Scott A Barnett, MD
Mount Sinai Medical Center
Dept of Pediatrics
One Gustave L Levy Blvd 1513
New York, NY 10029
112-24-3664
Length: 3 Year(s) Total Positions: 48 (GYI: 18)
Subspecialties: NPM, PDC, PDE, PDP, PG, PHO, PN
Program ID: 320-35-11-164

New York Hospital/Cornell Medical Center Program
New York Hospital
Program Director: Mauro C Cooper, MD
Valerie Johnsen, MD
New York Hospital/Cornell Medical Center
Dept of Pediatrics North 465
256 E 58th St
New York, NY 10021
212-146-5381
Length: 3 Year(s) Total Positions: 55 (GYI: 18)
Subspecialties: CCF, NPM, PDC, PDE, PHO, PN
Program ID: 320-35-11-149

New York University Medical Center Program
New York University Medical Center
Bethesda Hospital Center
Program Director: Wade P Parks, PhD MD
New York University Medical Center
Dept of Pediatrics
550 First Ave
New York, NY 10016
212-263-5425
Length: 3 Year(s) Total Positions: 58 (GYI: 20)
Subspecialties: NPM, PDC, PDE, PHO
Program ID: 320-35-21-166

Presbyterian Hospital in the City of New York Program
Presbyterian Hospital in the City of New York
Program Director: John M Driscoll Jr, MD
Presbyterian Hospital in the City of New York
622 W 168th St
New York, NY 10032-3784
212-365-2284
Length: 3 Year(s) Total Positions: 51 (GYI: 17)
Subspecialties: NPM, PDC, PDE, PDP, PHO
Program ID: 320-35-11-167

St Luke's-Roosevelt Hospital Center Program
St Luke's-Roosevelt Hospital Center
St Luke's-Roosevelt Hospital Center-Roosevelt Division
St Luke's-Roosevelt Hospital Center-St Luke's Division
Program Director: Louis Z Cooper, MD
St Luke's-Roosevelt Hospital Center
1000 Tenth Ave
New York, NY 10019
212-253-3565
Length: 3 Year(s) Total Positions: 36 (GYI: 12)
Program ID: 320-35-11-168

Staten Island
St Vincent's Medical Center/New York University Medical Center Program
St Vincent's Medical Center of Richmond
Program Director: Albina A Chaps, MD
St Vincent's Medical Center of Richmond
355 Bard Ave
Staten Island, NY 10310-1669
718-236-4038
Length: 3 Year(s) Total Positions: 17 (GYI: 6)
Program ID: 320-35-11-171

Stony Brook
SUNY at Stony Brook Program
University Hospital at Stony Brook
Program Director: Sharon L Linkes, MD
State University of New York at Stony Brook
School of Medicine
Dept of Pediatrics
Stony Brook, NY 11794-8111
516-444-2032
Length: 3 Year(s) Total Positions: 33 (GYI: 11)
Subspecialties: NPM, PDE, PN
Program ID: 320-35-21-365

Syracuse
SUNY Health Science Center at Syracuse Program
University Hospital at SUNY Health Science Center at Syracuse
Crouse-Irving Memorial Hospital
Program Director: Ann S Bordon, MD
SUNY Health Science Center at Syracuse
770 E Adams St
Syracuse, NY 13210
315-464-5800
Length: 3 Year(s) Total Positions: 35 (GYI: 14)
Subspecialties: NPM, PDC, PDE, PHO
Program ID: 320-35-21-175

Valhalla
New York Medical College (Lincoln) Program
New York Medical College
Lincoln Medical and Mental Health Center
Program Director: Concepcion Santes, MD
Lincoln Medical and Mental Health Center
Dept of Pediatrics
204 E 140th St
Bronx, N.Y. 10451
718-679-5800
Length: 3 Year(s) Total Positions: 62 (GYI: 24)
Program ID: 320-35-11-194

New York Medical College (Metropolitan) Program
New York Medical College
Metropolitan Hospital Center
Program Director: Satar Iqbal, MD
Metropolitan Hospital Center
Dept of Pediatrics Room 325
1801 First Ave
New York, NY 10029
212-290-8256
Length: 3 Year(s) Total Positions: 33 (GYI: 12)
Program ID: 320-35-21-303

New York Medical College at St. Vincent's Hospital and Medical Center of New York Program
New York Medical College
St Vincent's Hospital and Medical Center of New York
Program Director: Jayne D Rivas, MD
St Vincent's Hospital and Medical Center of New York
Dept of Pediatrics
180 W 22nd St
New York, NY 10011
212-604-3787
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 320-35-11-179

* Updated information not provided.
New York Medical College at Westchester County Medical Center
Program
New York Medical College
Our Lady of Mercy Medical Center
Westchester County Medical Center
Program Director:
Paul K. Woolf, MD
New York Medical College
Dept of Pediatrics
Munger Pavilion Room 129
Valhalla, NY 10595
914 233-1166
Length: 3 Year(s) Total Positions: 10 (GYI: 10)
Subspecialties: NPM, PDP, PG
Program ID: 320-36-11-176

North Carolina

Chapel Hill
University of North Carolina Hospitals Program
University of North Carolina Hospitals
Program Director:
Harvey J. Hscrnick, MD
University of North Carolina School of Medicine
Dept of Pediatrics
Old Clinic Bldg CB 7583
Chapel Hill, NC 27599-7583
919 847-3172
Length: 3 Year(s) Total Positions: 44 (GYI: 36)
Subspecialties: CCP, NPM, PDR, PDP, PG, PHO
Program ID: 320-36-21-178

Charlotte
Carolinas Medical Center Program
Carolinas Medical Center
Program Director:
Michael E. Norman, MD
Carolinas Medical Center
Dept of Pediatrics PO Box 32861
Charlotte, NC 28223-32861
704 355-3156
Length: 3 Year(s) Total Positions: 21 (GYI: 7)
Program ID: 320-36-11-179

Greenville
East Carolina University Program
East Carolina University School of Medicine
Pitt County Memorial Hospital
Program Director:
Samuel R. Parnell, MD
East Carolina University School of Medicine
Dept of Pediatrics Brodie 3E422D
University Med Ctr of East Carolina
Greenville, NC 27858-4354
919 866-4162
Length: 3 Year(s) Total Positions: 25 (GYI: 8)
Subspecialties: NPM
Program ID: 320-36-12-182

Winston-Salem
Bowman Gray School of Medicine Program
North Carolina Baptist Hospital
Program Director:
David Berry, MD
Bowman Gray School of Medicine
Dept of Pediatrics
Medical Center Blvd
Winston-Salem, NC 27157
910 716-4343
Length: 3 Year(s) Total Positions: 34 (GYI: 11)
Subspecialties: NPM
Program ID: 320-36-11-183

Cleveland
Case Western Reserve University (MetroHealth) Program
MetroHealth Medical Center
Program Director:
David D. Roberta, MD
MetroHealth Medical Center
Dept of Pediatrics
2560 MetroHealth Dr
Cleveland, OH 44109-1998
216 453-5000
Length: 3 Year(s) Total Positions: 24 (GYI: 8)
Subspecialties: NPM
Program ID: 320-38-31-369

Case Western Reserve University Program
University Hospitals of Cleveland
Program Director:
Carolyn M. Keromos, MD
Rainbow Babies and Children's Hospital
1110 Euclid Ave
Cleveland, OH 44106-6902
216 844-3641
Length: 3 Year(s) Total Positions: 65 (GYI: 18)
Subspecialties: CCP, NPM, PDR, PDP, PG, PHO
Program ID: 320-38-21-367

Cleveland Clinic Foundation Program
Cleveland Clinic Foundation
Program Director:
Michael J. McGillic, MD
Cleveland Clinic Foundation
9500 Euclid Ave TT32
Dept of Pediatrics
Cleveland, OH 44106-5342
216 444-5600
Length: 3 Year(s) Total Positions: 20 (GYI: 7)
Subspecialties: CCP, PG, FN
Program ID: 320-38-31-189

Ohio

Akron
Children's Hospital Medical Center of Akron/NEOUCOM Program
Children's Hospital Medical Center of Akron
Program Director:
John D. Krahmer, MD
Children's Hospital Medical Center of Akron
One Perkins Sq
Akron, OH 44308-1062
216 375-8200
Length: 3 Year(s) Total Positions: 33 (GYI: 11)
Program ID: 320-38-11-184

Cincinnati
University of Cincinnati Hospital Group Program
Children's Hospital Medical Center
Program Director:
Michael K. Farrell, MD
Children's Hospital Medical Center
3333 Burnet Ave
Mail Location: 7th FL CH
Cincinnati, OH 45229-3039
513 559-4014
Length: 3 Year(s) Total Positions: 70 (GYI: 20)
Subspecialties: NPM, PDP, FDP, PG, PHO, FN
Program ID: 320-36-21-185

Dayton
Wright State University Program
Wright State University School of Medicine
Children's Medical Center
USAF Medical Center (Wright-Patterson)
Program Director:
Julie A. Lindahl, MD
The Children's Medical Center
One Children's Plaza
Dayton, OH 45404-1815
513 263-8423
Length: 3 Year(s) Total Positions: 36 (GYI: 12)
Program ID: 320-38-21-202

* Updated information not provided.
Accredited Programs in Pediatrics

Toledo
Medical College of Ohio at Toledo Program
Medical College of Ohio Hospital
Toledo Hospital
Program Director: Donald T Washk, MD
Medical College of Ohio at Toledo PO Box 10089
419 388-6264
Length: 3 Year(s) Total Positions: 25 (GY: 8)
Program ID: 320-38-21-194

Youngstown
Western Reserve Care System/NEOUCOM Program
Western Reserve Care System Tod Children’s Hospital
Program Director: Kurt J Weigner, MD
Tod Children’s Hospital Western Reserve Care System 500 Gypsy Ln
Youngstown, OH 44501
116 749-3988
Length: 3 Year(s) Total Positions: 22 (GY: 7)
Program ID: 320-38-21-195

Oregon
Portland
Oregon Health Sciences University Program
Oregon Health Sciences University Hospital
Program Director: Joseph T Gilbody, MD
Dept of Pediatrics
Oregon Health Sciences University 3181 SW Sam Jackson Park Rd
Portland, OR 97201
503 494-6631
Length: 3 Year(s) Total Positions: 23 (GY: 12)
Subspecialties: NPM,PDC,PDE,PD
Program ID: 320-40-12-199

Pennsylvania
Danville
Geisinger Medical Center Program
Geisinger Medical Center
Program Director: Robert McGregory, MD
Geisinger Medical Center
Dept of Pediatrics
Danville, PA 17822-1220
717 271-5506
Length: 3 Year(s) Total Positions: 18 (GY: 6)
Program ID: 320-41-11-200

Hershey
Milton S Hershey Medical Center of Pennsylvania State University Program
Penn State University Hospital-Milton S Hershey Medical Center
Program Director: Steven J Waaner, MD
PO Box 850
University Dr
Hershey, PA 17033
717 531-4906
Length: 3 Year(s) Total Positions: 22 (GY: 10)
Subspecialties: CCP,NPM,PDC
Program ID: 320-41-21-972

Philadelphia
Albert Einstein Medical Center Program
Albert Einstein Medical Center
Program Director: Robert S Wamser, MD
Albert Einstein Medical Center
1001 N Oxford Rd
Philadelphia, PA 19122-3008
215 456-5805
Length: 3 Year(s) Total Positions: 22 (GY: 7)
Subspecialties: NPM
Program ID: 320-41-11-204

MCPH/Hahnemann University Hospital Program
Hahnemann University Hospital
Program Director: James C Demarco, MD
Hahnemann University Dept of Pediatrics
Broad & Vine St
Mail Stop 402
Philadelphia, PA 19102-1192
215 739-8967
Length: 3 Year(s) Total Positions: 27 (GY: 10)
Program ID: 320-41-21-206

St Christopher’s Hospital for Children Program
St Christopher’s Hospital for Children
Program Director: Charles R Reed, MD
St Christopher’s Hospital for Children
Erie Ave at Front St Philadelphia, PA 19134-1095
215 427-5127
Length: 3 Year(s) Total Positions: 48 (GY: 24)
Subspecialties: NPM,PDC,PDE,PD,PD,PD,PD
Program ID: 320-41-12-209

Thomas Jefferson University Hospital Program
Thomas Jefferson University Hospital
Alfred I duPont Institute of the Nemours Foundation
The Medical Center of Delaware
Program Director: Robert S Walter, MD
Delaware Children’s Health Center
A I duPont Institute
PO Box 269
Wilmington, DE 19899
302 651-6374
Length: 3 Year(s) Total Positions: 55 (GY: 18)
Subspecialties: NPM
Program ID: 320-41-31-310

University of Pennsylvania Program
Children’s Hospital of Philadelphia
Program Director: Walter W Thurston, Jr, MD
Children’s Hospital of Philadelphia
34th St & Civic Center Blvd
Philadelphia, PA 19104
215 699-3420
Length: 3 Year(s) Total Positions: 193 (GY: 30)
Subspecialties: CCP,NPM,PDC,PDE,PD
Program ID: 320-41-21-306

Pittsburgh
Mercy Hospital of Pittsburgh Program
Mercy Hospital of Pittsburgh
Program Director: Bradley J Bradford, MD
Mercy Hospital of Pittsburgh Dept of Pediatrics
1515 Locust St
Pittsburgh, PA 15219-5166
412 322-7388
Length: 3 Year(s) Total Positions: 15 (GY: 5)
Program ID: 320-41-11-212

University Health Center of Pittsburgh Program
University Health Center of Pittsburgh
Children’s Hospital of Pittsburgh Magee-Womens Hospital
Program Director: J Carlton Gartner, Jr, MD
Children’s Hospital of Pittsburgh
3705 Fifth Ave
Pittsburgh, PA 15213-3683
412 692-5107
Length: 3 Year(s) Total Positions: 54 (GY: 18)
Subspecialties: CCP,NPM,PDC,PRS,PDP,PD,PD,PD
Program ID: 320-41-21-211

* Updated information not provided.
Puerto Rico

Bayamon

Universidad Central del Caribe Program
University Hospital Ramon Ruiz Arnu
Program Director:
Frank Rodriguez-Martinez, MD
University Hospital Ramon Ruiz Arnu
Dept of Pediatrics
Ave Laurel Santa Juanita
Bayamon, PR 00965
908 787-5151
Length: 3 Year(s) Total Positions: 24 (GYI: 8)
Program ID: 320-42-21-255

Caguas

Caguas Regional Hospital Program
Caguas Regional Hospital
Program Director:
Angel L Senquiz, MD
Caguas Regional Hospital
Dept of Pediatrics
Caguas, PR 00725
908 744-3187
Length: 3 Year(s) Total Positions: 26 (GYI: 8)
Program ID: 320-42-21-313

Mayaguez

Ramon E Betances Hospital-Mayaguez Medical Center Program*
Dr Ramon E Betances Hospital-Mayaguez Medical Center
Program Director:
Arturo M Lopez, MD
Mayaguez Medical Center Box 1888
Highway #2 KM 157 2 Bs Sabalos
Mayaguez, PR 00704
908 834-8886
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 320-42-12-214

Ponce

Ponce Regional Hospital Program
Ponce Regional Hospital
Program Director:
Ivonette Villafane, MD
Ponce Regional Hospital
Barrio Machuero
Ponce, PR 00711
908 841-4155
Length: 3 Year(s) Total Positions: 21 (GYI: 7)
Program ID: 320-42-11-215

Rio Piedras

San Juan City Hospital Program
San Juan City Hospital
Program Director:
Eleanor Jimenes, MD
San Juan Municipal Hospital
GPO Box 70964
Calle Medico Mall Station #128
San Juan, PR 00906-7094
908 760-7618
Length: 2 Year(s) Total Positions: 36 (GYI: 9)
Program ID: 320-42-11-216

San Juan

University of Puerto Rico Program
University of Puerto Rico School of Medicine
University Pediatric Hospital
Program Director:
Marta Valcarcel, MD
University of Puerto Rico Medical Sciences Campus
GPO Box 50467
San Juan, PR 00906
908 764-6475
Length: 3 Year(s) Total Positions: 42 (GYI: 14)
Subspecialities: NPM,EP,FQ,PHO
Program ID: 320-42-11-217

Rhode Island

Providence

Brown University Program
Rhode Island Hospital
Women and Infants Hospital of Rhode Island
Program Director:
William Oh, MD
Rhode Island Hospital
503 Eddy St
Providence, RI 02902-4923
401 444-5545
Length: 3 Year(s) Total Positions: 40 (GYI: 10)
Subspecialities: NFM,EP,FQ,PHO
Program ID: 320-42-11-218

South Carolina

Charleston

Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
MUSC Medical Center
Program Director:
Walton L Ector, MD
Medical University of South Carolina
Dept of Pediatrics CH654
171 Ashley Ave
Charleston, SC 29425-2248
803 792-8072
Length: 3 Year(s) Total Positions: 37 (GYI: 12)
Subspecialties: NFM,FQ,FQ,FQ
Program ID: 320-45-11-219

Columbia

Richland Memorial Hospital-University of South Carolina School of Medicine Program
Richland Memorial Hospital-Univ of South Carolina Sch of Med
Program Director:
Roger C Taylor, MD
USC School of Medicine Children's Hospital
Dept of Pediatrics
5 Richland Medical Pk ACCS Area K
Columbia, SC 29103
803 777-4011
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Subspecialties: PQH
Program ID: 320-45-21-220

Greenville

Greenville Hospital System Program
Greenville Hospital System
Program Director:
John F Matthews Jr, MD
Greenville Hospital System
701 Grove Rd
Greenville, SC 29603-4295
803 545-7850
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 320-45-13-221

Tennessee

Chattanooga

University of Tennessee College of Medicine at Chattanooga Program
University of Tennessee College of Medicine-Chattanooga
T C Thompson Children's Hospital Medical Center
Program Director:
Billy S Arrant, MD
Chattanooga Unit-University of Tennessee College of Medicine
T C Thompson Children's Hospital
910 Blackford St
Chattanooga, TN 37403
423 776-6215
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 320-47-11-222

Johnston City

East Tennessee State University Program
James H Quillen College of Medicine
Johnson City Medical Center Hospital
Program Director:
Festus O Adebowo, MD
James H Quillen College of Medicine
East Tennessee State University
PO Box 70578
Johnson City, TN 37614-0578
423 247-5272
Length: 3 Year(s) Total Positions: 12 (GYI: 4)
Program ID: 320-47-21-318

Knoxville

University of Tennessee Medical Center at Knoxville Program
University of Tennessee Graduate School of Medicine
University of Tennessee Medical Hospital
Program Director:
Patricia A Mohr, MD
University of Tennessee Graduate School of Medicine
Dept of Pediatrics
1044 Alcoa Hwy
Knoxville, TN 37920
865 544-9320
Length: 3 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 320-47-21-396

* Updated information not provided.
Memphis
University of Tennessee Program
University of Tennessee College of Medicine
Le Bonheur Children's Medical Center
Regional Medical Center at Memphis
St. Jude Children's Research Hospital
Program Director:
Russell W. Cheeney, MD
Le Bonheur Children's Medical Center
50 N Dunlap
Memphis, TN 38103-2803
610 672-6400
Length: 3 Year(s) Total Positions: 58 (GYI: 14)
Subspecialties: CCH, PDP, PDA, FPD, PA, PPD, PN
Program ID: 204-47-31-357

Nashville
Vanderbilt University Program
Vanderbilt University Medical Center
Metropolitan Nashville General Hospital
Program Director:
Rachel L. Mace, MD
Vanderbilt University Hospital
Dept of Pediatrics
AA-4266 MCN
Nashville, TN 37232-3574
615 932-5877
Length: 3 Year(s) Total Positions: 55 (GYI: 16)
Subspecialties: CCEPNM, PDP, PDA, FPD, PN
Program ID: 204-47-31-357

Texas
Amarillo
Texas Tech University (Amarillo) Program
Texas Tech University Health Sciences Center at Amarillo
Northwest Texas Health Care System
Program Director:
Marsha A. Sheehan, MD
Texas Tech University Health Sciences Center
Dept of Pediatrics
1460 Wallace Blvd
Amarillo, TX 79106
806 354-6433
Length: 3 Year(s) Total Positions: 4 (GYI: 4)
Program ID: 204-48-21-370

Austin
Central Texas Medical Foundation Program
Central Texas Medical Foundation
Brackenridge Hospital
Program Director:
George A. Edwards, MD
Children's Hospital of Austin
Dept of Pediatrics
601 E 15th St
Austin, TX 78701
512 440-2445
Length: 3 Year(s) Total Positions: 20 (GYI: 6)
Program ID: 204-48-31-328

Corpus Christi
Driscoll Children's Hospital Program
Driscoll Children's Hospital
Program Director:
Don P Wilson, MD
Driscoll Children's Hospital
5500 S Alameda
PO Drawer 6530
Corpus Christi, TX 78466-6530
512 560-5465
Length: 3 Year(s) Total Positions: 20 (GYI: 12)
Program ID: 204-48-41-229

Dallas
University of Texas Southwest Medical School Program
University of Texas Southwest Medical School
Children's Medical Center of Dallas
Dallas County Hospital District- Parkland Memorial Hospital
Program Director:
Charles H. Ginsburg, MD
University of Texas Southwest Medical School
5223 Harry Hines Blvd
Dallas, TX 75232-0003
614 662-3500
Length: 3 Year(s) Total Positions: 14 (GYI: 16)
Subspecialties: CCNP, PM, PDC, PDA, FPD, PN
Program ID: 204-46-21-320

El Paso
Texas Tech University (El Paso) Program
Texas Tech University Health Sciences Center at El Paso
R E Thomason General Hospital
Program Director:
Gilbert A. Harold, MD
Texas Tech University Health Sciences Center
4850 Alberta
El Paso, TX 79905
915 546-6717
Length: 3 Year(s) Total Positions: 30 (GYI: 10)
Program ID: 204-48-14-234

William Beaumont Army Medical Center Program*
William Beaumont Army Medical Center
Program Director:
Robert P. Martinez, MD
Pediatic Part
Braun Bldg
El Paso, TX 79902-5900
915 569-5589
Length: 3 Year(s) Total Positions: 19 (GYI: 5)
Program ID: 204-48-14-1006

Fort Sam Houston
Brooke Army Medical Center Program
Brooke Army Medical Center
Program Director:
Col John D Rosewall, MD
Brooke Army Medical Center
Atn: BSHC DF
1900 Starkey Rd
Fort Sam Houston, TX 78234-5020
210 916-9924
Length: 3 Year(s) Total Positions: 12 (GYI: 4)
Program ID: 204-48-12-009

Galveston
University of Texas Medical Branch Hospitals Program
University of Texas Medical Branch Hospitals
Program Director:
Susan E. Keener, MD
The University of Texas Medical Branch Hospitals
Children's Hospital
5618 F.M. 646
Galveston, TX 77550-0004
409 749-6534
Length: 3 Year(s) Total Positions: 21 (GYI: 15)
Subspecialties: CCNP, PDC, PN
Program ID: 204-48-11-367

Houston
Baylor College of Medicine Program
Baylor College of Medicine
Harris County Hospital District-Ben Taub General Hospital
Texas Children's Hospital
Program Director:
Ralph D. Pugliesi, MD
Dept of Pediatrics
One Baylor Plaza
Houston, TX 77030
713 796-1170
Length: 3 Year(s) Total Positions: 34 (GYI: 16)
Subspecialties: CCNP, PDC, PDA, FPD, PN
Program ID: 204-48-31-232

University of Texas at Houston Program
University of Texas Medical School at Houston
Hermann Children's Hospital at Houston
Lyndon B. Johnson General Hospital
Program Director:
Sharon S. Crandell, MD
University of Texas Health Science Center at Houston
6451 Fannin St MSB 3B44
Houston, TX 77030
713 796-5000
Length: 3 Year(s) Total Positions: 45 (GYI: 15)
Subspecialties: CCNP, PDC, PDD, FPD, PN
Program ID: 204-48-21-233

Lackland AFB
Wilford Hall USAF Medical Center Program
Wilford Hall USAF Medical Center (SG)
Program Director:
Col James R. Smallfield, MD
Wilford Hall Medical Center
Lackland AFB
San Antonio, TX 78235-6300
212 759-7347
Length: 3 Year(s) Total Positions: 22 (GYI: 5)
Subspecialties: CCNP
Program ID: 204-48-21-003

Lubbock
Texas Tech University (Lubbock) Program
Texas Tech University Health Sciences Center at Lubbock
University Medical Center
Program Director:
Surenkaha K. Varma, MD
Texas Tech University Health Sciences Center
Dept of Pediatrics
Lubbock, TX 79430
806 741-3223
Length: 3 Year(s) Total Positions: 15 (GYI: 5)
Program ID: 204-48-51-360

* Updated information not provided.
San Antonio
University of Texas Health Science Center at San Antonio Program
University of Texas Medical School at San Antonio
Santa Rosa Health Care Corporation
University Hospital-South Texas Medical Center
Program Director:
Robert J Nolan Jr, MD
University of Texas Health Science Center
Dept of Pediatrics
7703 Floyd Curl Dr
San Antonio, TX 78284-7816
210 687-6955
Length: 3 Year(s)  Total Positions: 49  (GYI: 17)
Subspecialties: PEDIATRICS
Program ID: 320-48-21-235
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Virginia
Charlottesville
University of Virginia Program
University of Virginia Medical Center
Program Director:
Richard W Kosler, MD
University of Virginia Hospitals Dept of Pediatrics
Box 698
Charlottesville, VA 22908
804 982-2257
Length: 3 Year(s)  Total Positions: 32  (GYI: 10)
Subspecialties: CPPNP, PDC, PDE, PHN
Program ID: 320-51-11-239
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Norfolk
Eastern Virginia Graduate School of Medicine Program
Eastern Virginia Graduate School of Medicine
Children's Hospital of the King's Daughters
Program Director:
Clarence W Bowyer Jr, MD
Children's Hospital of The King's Daughters
Eastern Virginia Medical School
601 Children's Ln
Norfolk, VA 23507
804 668-7293
Length: 3 Year(s)  Total Positions: 43  (GYI: 16)
Program ID: 320-51-21-240
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Portsmouth
Naval Medical Center (Portsmouth) Program
Naval Medical Center (Portsmouth)
Program Director:
Capt David M Norris, MD
Dept of Pediatrics
Naval Hospital
Portsmouth, VA 23704-5000
804 386-7358
Length: 3 Year(s)  Total Positions: 19  (GYI: 7)
Program ID: 320-51-21-014
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Richmond
Medical College of Virginia/Virginia Commonwealth University Program
Medical College of Virginia/Virginia Commonwealth University
Medical College of Virginia Hospitals
Program Director:
Richard M Schieck, MD
MC/Virginia Commonwealth Univ
PO Box 980046
Richmond, VA 23298-0464
804 828-9602
Length: 3 Year(s)  Total Positions: 47  (GYI: 16)
Subspecialties: CPPNP, PDC, PHN
Program ID: 320-51-21-241
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West Virginia
Charleston
West Virginia University (Charleston Division) Program
Charleston Area Medical Center
Program Director:
Kathleen V Prewill, MD
Dept of Pediatrics
3060 Kanawha Blvd
Charleston, WV 25302
304 342-8752
Length: 3 Year(s)  Total Positions: 12  (GYI: 4)
Program ID: 320-51-21-243
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Huntington
Marshall University School of Medicine Program
Marshall University School of Medicine
Cambridge Huntington Hospital
Program Director:
James M Wadeck, MD
Marshall University School of Medicine
Dept of Pediatrics
Huntington, WV 25755-9440
304 696-7065
Length: 3 Year(s)  Total Positions: 12  (GYI: 4)
Program ID: 320-51-21-289

* Updated information not provided.
Pediatric Cardiology
(Pediatrics)

California

Los Angeles

Children's Hospital of Los Angeles Program

Program Director:
Alan B. Lewis, MD
Children's Hospital of Los Angeles
PO Box 54700
Los Angeles, CA 90064

Length: 2 Year(s) Total Positions: 1
Program ID: 325-08-11-001

UCLA Medical Center Program

UCLA Medical Center

Program Director:
Samuel Kaplan, MD
University of California Los Angeles
Dept of Pediatrics
Div of Cardiology
Los Angeles, CA 90024-1735

Length: 2 Year(s) Total Positions: 10
Program ID: 325-08-21-002

San Diego

University of California (San Diego) Medical Center

Program Director:
Abraham Rothman, MD
University of California (San Diego) Medical Center
8445
200 W Arbor Dr
San Diego, CA 92103

Length: 2 Year(s) Total Positions: 3
Program ID: 325-08-11-003

San Francisco

University of California (San Francisco) Medical Center

Program Director:
David P. Tietel, MD
University of California (San Francisco)
Div of Pediatric Cardiology
Box 0130 Rm M-1145
San Francisco, CA 94143-0130

Length: 2 Year(s) Total Positions: 8
Program ID: 325-08-21-004

District of Columbia

Washington

George Washington University Program

Program Director:
Gerard R. Martin, MD
Children's National Medical Center Cardiology Dept
111 Michigan Ave NW
Washington, DC 20010

Length: 2 Year(s) Total Positions: 9
Program ID: 325-08-21-007

Georgetown University Program

Georgetown University Hospital

Program Director:
Stephen R. Shapiro, MD
Georgetown University Hospital
3800 Reservoir Rd NW
Washington, DC 20007

Length: 2 Year(s) Total Positions: 6
Program ID: 325-10-21-003
Florida
Gainesville
University of Florida Program
University of Florida College of Medicine
Shands Hospital at the University of Florida
Program Director:
Richard L. Bacareza, MD
University of Florida College of Medicine
PO Box 10296
Gainesville, FL 32610-0296
904 392-6481
Length: 2 Year(s) Total Positions: 3
Program ID: 325-11-11-098

Miami
University of Miami-Jackson Memorial Medical Center Program
University of Miami-Jackson Memorial Medical Center
Program Director:
Henry Gelbard, MD
Jackson Memorial Hospital
1611 NW 12th Ave
Miami, FL 33136
305 585-6585
Length: 2 Year(s) Total Positions: 6
Program ID: 325-11-14-099

Georgia
Atlanta
Emory University Program*
Emory University School of Medicine
Grady Memorial Hospital
Henrietta Egleston Hospital for Children
Program Director:
David W. Jones, MD
The Children's Heart Center
2040 Edbrook Dr NE
Atlanta, GA 30322
404 245-5111
Length: 2 Year(s) Total Positions: 5
Program ID: 325-12-21-010

Augusta
Medical College of Georgia Program
Medical College of Georgia Hospital and Clinics
Program Director:
William B. Strong, MD
Medical College of Georgia Hospitals and Clinics
Pediatric Cardiology
1129 16th St BAA-0007
Augusta, GA 30912-3710
706 721-2396
Length: 2 Year(s)
Program ID: 325-12-11-011

Illinois
Chicago
McGaw Medical Center of Northwestern University Program
Northwestern University Medical School
Children's Memorial Medical Center
Program Director:
D. Woodrow Sisson Jr, MD PhD
Div of Cardiology #51
Children's Memorial Hospital
2300 Children's Plaza
Chicago, IL 60614
312 890-4553
Length: 2 Year(s) Total Positions: 3
Program ID: 325-16-11-013

University of Illinois College of Medicine at Chicago/Christ Hospital Program*
University of Illinois College of Medicine at Chicago
CHRIST hospital and Medical Center
Program Director:
Anthony Cusicka, MD
The Heart Institute for Children
11000 Southway
Palo Alto, CA 94303
708 361-5151
Length: 3 Year(s)
Program ID: 325-18-21-067

Indiana
Indianapolis
Indiana University Medical Center Program
Indiana University Medical Center
Program Director:
Roger A. Hurwitz, MD
Indiana University Medical Center Riley Research RM
725
702 Barnhill Dr
Iowa Children's Hospital
Indianapolis, IN 46202-3225
317 574-5995
Length: 2 Year(s) Total Positions: 4
Program ID: 325-17-11-017

Iowa
Iowa City
University of Iowa Hospitals and Clinics Program
University of Iowa Hospitals and Clinics
Program Director:
Larry T Mahoney, MD
University of Iowa Hospitals and Clinics
Dept of Pediatrics
Iowa City, IA 52242-1009
319 356-5387
Length: 2 Year(s) Total Positions: 6
Program ID: 325-18-11-019

Louisiana
New Orleans
Tulane University Program
Tulane University School of Medicine
Alton Ochsner Medical Foundation
Tulane University Hospital and Clinics
Program Director:
Arthur S Pickoff, MD
Dept of Pediatric Cardiology
1415 Tulane Ave HC-90
New Orleans, LA 70112-2599
504 862-5912
Length: 2 Year(s) Total Positions: 5
Program ID: 325-21-21-064

Maryland
Baltimore
Johns Hopkins University Program
Johns Hopkins University School of Medicine
Johns Hopkins Hospital
Program Director:
Samuel B. Ritter, MD
The Johns Hopkins University
600 N Wolfe St, Brady 516
Baltimore, MD 21287
410 955-5867
Length: 2 Year(s) Total Positions: 6
Program ID: 325-23-11-021

Massachusetts
Boston
Harvard Medical School Program*
Children's Hospital
Program Director:
James E. Locke, MD
Children's Hospital
300 Longwood Ave
Boston, MA 02115
617 738-6221
Length: 2 Year(s) Total Positions: 31
Program ID: 325-25-11-022

Michigan
Ann Arbor
University of Michigan Program
University of Michigan Hospitals
Program Director:
Amon Rosenthal, MD
Children's Hospital
1500 E Medical Center Dr P.110
Ann Arbor, MI 48109-2004
313 936-5903
Length: 2 Year(s) Total Positions: 9
Program ID: 325-25-11-023

* Updated information not provided.
Accredited Programs in Pediatric Cardiology (Pediatrics)

Detroit
Wayne State University/Detroit Medical Center Program
Wayne State University School of Medicine
Children's Hospital of Michigan
Program Director:
William W Pinsky, MD
Children's Hospital of Michigan
3901 Beaubien
Detroit, MI 48201-2196
313 746-5831
Length: 2 Year(s) Total Positions: 6
Program ID: 325-35-21-061

Minnesota
Minneapolis
University of Minnesota Program
University of Minnesota Medical School
University of Minnesota Hospital and Clinic
Program Director:
Albert P Rocciani, MD
Univ of Minnesota Hosp and Clinics Dept of Ped Cardiology
420 Delaware St SE
Minneapolis, MN 55455
612 626-2765
Length: 2 Year(s) Total Positions: 4
Program ID: 325-36-21-024

Rochester
Mayo Graduate School of Medicine Program
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Rochester)
St Mary's Hospital of Rochester
Program Director:
Co-Union J Porter, MD
Mayo Graduate School of Medicine Application Processing Ctr
Mayo Graduate School of Medicine
200 First St SW
Rochester, MN 55905
507 284-3287
Length: 2 Year(s) Total Positions: 4
Program ID: 325-36-21-025

New York
Brooklyn
SUNY Health Science Center at Brooklyn Program*
SUNY-SC at Brooklyn College of Medicine
Brooklyn Hospital Medical Center
Kings County Hospital Center
University Hospital-SUNY Health Science Center at Brooklyn
Program Director:
Dov B Nadel, MD
SUNY Health Science Center at Brooklyn Div Peds Cardiology
400 Clarkson Ave Box 1206
Brooklyn, NY 11203
718 270-2881
Length: 2 Year(s) Total Positions: 2
Program ID: 325-35-21-059

Manhattan
North Shore University Hospital Program
North Shore University Hospital
Program Director:
Robin S Cooper, MD
North Shore University Hospital
Pediatric Cardiology
300 Community Dr
Manhasset, NY 11030
516 683-3075
Length: 2 Year(s) Total Positions: 1
Program ID: 325-35-21-069

New Hyde Park
Albert Einstein College of Medicine at Long Island Jewish Medical Center Program
Long Island Jewish Medical Center
Schneider Children's Hospital (Long Island Jewish Med Ctr)
Program Director:
Fredrick E Berman, MD
Schneider Children's Hospital
Long Island Jewish Medical Center
New Hyde Park, NY 11040
718 476-7681
Length: 2 Year(s) Total Positions: 4
Program ID: 325-35-21-070

New York
Mount Sinai School of Medicine Program
Mount Sinai School of Medicine
Mount Sinai Medical Center
Program Director:
Richard J Golinov, MD
Mount Sinai Medical Center
One Gustave L Levy Place Box 1201
Div of Pediatric Cardiology
New York, NY 10029
212 448-8602
Length: 2 Year(s) Total Positions: 4
Program ID: 325-35-11-060

New York Hospital/Cornell Medical Center Program*
New York Hospital
Program Director:
Deborah M Friedman, MD
Pediatric Cardiology
New York Hospital
525 E 68th St. Rm N-134
New York City, TX 10021
212 746-3566
Length: 2 Year(s) Total Positions: 4
Program ID: 325-35-11-032

New York University Medical Center Program
New York University Medical Center Bellevue Hospital Center
Program Director:
Michael Artman, MD
New York University Medical Center
550 First Ave
New York, NY 10016
112 265-7774
Length: 2 Year(s) Total Positions: 3
Program ID: 325-35-21-033

Presbyterian Hospital in the City of New York Program
Presbyterian Hospital in the City of New York
Program Director:
Welton M Gersony, MD
Columbia University College of Physicians and Surgeons
630 W 168th St
New York, NY 10032
212 305-8509
Length: 2 Year(s) Total Positions: 10
Program ID: 325-35-11-034

Rochester
University of Rochester Program*
Strong Memorial Hospital of the University of Rochester
Program Director:
Edward S Clark, MD
Strong Memorial Hospital
Dept of Pediatrics Box 696
600 Elmwood Ave
Rochester, NY 14642
716 273-5401
Length: 1 Year(s) Total Positions: 3
Program ID: 325-35-21-035

Syracuse
SUNY Health Science Center at Syracuse Program
University Hospital-SUNY Health Science Center at Syracuse
Crouse-Irving Memorial Hospital
Program Director:
Winston G Gaum, MD
Ste 894
725 Irving Ave
Syracuse, NY 13210
315 470-7487
Length: 2 Year(s) Total Positions: 3
Program ID: 325-35-21-039

North Carolina
Durham
Duke University Program
Duke University Medical Center
Program Director:
Arthur Gason Jr, MD MPH
Duke University Medical Center
PO Box 3060
Durham, NC 27710
919 613-2868
Length: 2 Year(s) Total Positions: 8
Program ID: 325-35-11-037

*Updated information not provided.
Ohio

Cincinnati
University of Cincinnati Hospital Group Program
Children's Hospital Medical Center
Program Director: David C Schwartz, MD
Div of Cardiology
Children's Hospital Medical Center
3333 Burnet Ave
Cincinnati, OH 45223-3039
513 559-4432
Length: 2 Year(s) Total Positions: 14
Program ID: 325-38-11-338

Cleveland
Case Western Reserve University Program
University Hospitals of Cleveland
Program Director: Kenneth G Zakhia, MD
Rainbow Babies and Children's Hospital
Div of Pediatric Cardiology
11100 Euclid Ave
Cleveland, OH 44106-6011
216 944-3275
Length: 2 Year(s) Total Positions: 5
Program ID: 325-38-11-689

Columbus
Ohio State University Program*
Ohio State University Medical Center
Children's Hospital
Program Director: Hugh A. Allen, MD
Div of Cardiology
Children's Hospital
700 Children's Dr
Columbus, OH 43205
614 461-2000
Length: 2 Year(s)
Program ID: 325-38-21-470

Pennsylvania

Hershey
Milton S Hershey Medical Center of Pennsylvania State University Program*
Penn State University Hospital-Milton S Hershey Med Ctr
Program Director: Barry G Baglivi, MD
Milton S Hershey Medical Center
Dept of Pediatrics
PO Box 850
Hershey, PA 17033
717 531-8074
Length: 2 Year(s) Total Positions: 1
Program ID: 325-41-21-066

Philadelphia
St Christopher's Hospital for Children Program
St Christopher's Hospital for Children
Program Director: Richard M Bonner, MD
Pediatric Heart Institute
St Christopher's Hosp for Children
Erie Ave at Front St
Philadelphia, PA 19134-1906
215 427-3910
Length: 2 Year(s) Total Positions: 4
Program ID: 325-41-11-042

University of Pennsylvania Program
Children's Hospital of Philadelphia
Program Director: Paul M Weinberg, MD
Children's Hospital of Philadelphia
Div of Cardi/One Children's Ctr
34th & Civic Center Blvd
Philadelphia, PA 19104
215 590-3274
Length: 2 Year(s) Total Positions: 13
Program ID: 325-41-11-041

South Carolina

Charleston
Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
MUSC Medical Center
Program Director: Paul C Gilbert, MD
Medical University of South Carolina
Div of Pediatric Cardiology
171 Ashley Ave
Charleston, SC 29425-0660
803 796-2085
Length: 2 Year(s) Total Positions: 11
Program ID: 325-49-11-044

Tennessee

Memphis
University of Tennessee Program
University of Tennessee College of Medicine
Le Bonheur Children's Medical Center
Program Director: Bruce S Alpert, MD
Le Bonheur Children's Medical Center
Div of Pediatric Cardiology
777 Washington Ave Ste 215
Memphis, TN 38105
901 527-3380
Length: 2 Year(s)
Program ID: 325-47-21-067

Nashville
Vanderbilt University Program
Vanderbilt University Medical Center
Program Director: Thomas P Graham Jr, MD
Vanderbilt Medical Center
Div of Pediatric Cardiology
D-2250 MCN
Nashville, TN 37232-2572
615 343-7447
Length: 2 Year(s) Total Positions: 5
Program ID: 325-47-11-046

Texas

Dallas
University of Texas Southwestern Medical School Program
University of Texas Southwestern Medical School
Children's Medical Center of Dallas
Program Director: David E Frazier, MD
University of Texas Southwestern Medical Center
Dept of Pediatrics
5333 Harry Hines Blvd
Dallas, TX 75390-8063
214 648-3333
Length: 3 Year(s) Total Positions: 4
Program ID: 325-48-21-408

* Updated information not provided.
Accredited Programs in Pediatric Cardiology (Pediatrics)

Houston
Baylor College of Medicine Program
Baylor College of Medicine
Texas Children's Hospital
Program Director:
John T Bricker, MD
Pediatric Cardiology MC 2-2290
Texas Children's Hospital
6621 Fannin
Houston, TX 77030
713 794-5500
Length: 2 Year(s) Total Positions: 16
Program ID: 325-48-11-047

Virginia
Charlottesville
University of Virginia Program
University of Virginia Medical Center
Program Director:
Howard P Gutgesell, MD
Pediatrics Box 485
University of Virginia Health
Science Center
Charlottesville, VA 22908
804 924-4886
Length: 2 Year(s) Total Positions: 2
Program ID: 325-51-11-050

Richmond
Medical College of Virginia/Virginia Commonwealth University Program
Medical College of Virginia/Virginia Commonwealth University
Medical College of Virginia Hospitals
Program Director:
Richard M Schicklen, MD
MC/Virginia Commonwealth Univ
PO Box 980026
Richmond, VA 23298-0026
804 828-1074
Length: 2 Year(s) Total Positions: 2
Program ID: 325-51-11-051

West Virginia
Morgantown
West Virginia University Program*
West Virginia University Hospitals
Program Director:
Stailey Rinzig, MD PPD
West Virginia University
Pediatric Cardiology
2200 Health Science Center N
Morgantown, WV 26506
304 293-7086
Length: 2 Year(s)
Program ID: 325-55-21-068

Pediatric Critical Care Medicine (Pediatrics)

Alabama
Birmingham
University of Alabama Medical Center Program
University of Alabama Hospital
Children's Hospital of Alabama
Program Director:
Samuel J Tilden, MD
Children's Hospital of Alabama
1600 Seventeenth Ave S
ACC 504
Birmingham, AL 35203
306 888-9807
Length: 2 Year(s) Total Positions: 6
Program ID: 325-01-21-040

Arizona
Tucson
University of Arizona Program
University of Arizona College of Medicine
University Medical Center
Program Director:
Robert A Berg, MD
Dept of Pediatrics (Critical Care)
Univ of Arizona Health Sciences Ctr
1501 N Campbell Ave
Tucson, AZ 85724
102 226-5486
Length: 2 Year(s) Total Positions: 1
Program ID: 325-00-21-063

Arkansas
Little Rock
University of Arkansas for Medical Sciences Program
University of Arkansas College of Medicine
University Hospital of Arkansas
Program Director:
Debra H Fizer, MD
Arkansas Children's Hospital
800 Marshall St
Little Rock, AR 72205-3501
501 526-1445
Length: 2 Year(s) Total Positions: 5
Program ID: 325-04-21-006

California
Loma Linda
Loma Linda University Program
Loma Linda University Medical Center
Program Director:
Ronald M Perkin, MD
Loma Linda University School of Medicine
Pediatric Critical Care Medicine
12003 Garces/West Hall CC P116
Loma Linda, CA 92535
909 824-4250
Length: 2 Year(s) Total Positions: 9
Program ID: 325-52-31-047

Los Angeles
Children's Hospital of Los Angeles Program
Children's Hospital of Los Angeles
Program Director:
Christopher J Liewehr, MD FRCPC(C)
Children's Hospital of Los Angeles
Div of Pediatric Intensive Care
4650 Sunset Blvd MS12
Los Angeles, CA 90027
213 696-3527
Length: 2 Year(s) Total Positions: 6
Program ID: 325-05-31-047

UCLA Medical Center Program
UCLA School of Medicine
Long Beach Memorial Medical Center
UCLA Medical Center
Program Director:
Judith E Belil, MD
Div of Critical Care
Dept of Pediatrics
UCLA School of Medicine
Los Angeles, CA 90024-1752
310 825-8782
Length: 2 Year(s) Total Positions: 7
Program ID: 325-05-31-023

San Diego
University of California (San Diego) Program
University of California (San Diego) Medical Center
Children's Hospital and Health Center
Program Director:
Bradley R Peterson, MD
3068 Children's Way
MC 5065
San Diego, CA 92120
619 550-5863
Length: 2 Year(s) Total Positions: 6
Program ID: 325-05-31-042

* Updated information not provided.
San Francisco
University of California (San Francisco) Program
University of California (San Francisco) School of Medicine
Children’s Hospital Medical Center of Northern California
University of California (San Francisco) Medical Center
Program Director:
Scott S. Soffer, MD
Timothy Yeh, MD
Medical Ctr at the University of California San Francisco
Dept of Pediatrics Box 0106
505 Parnassus Ave Moffitt 880
San Francisco, CA 94143-0106
415 476-5159
Length: 2 Year(s) Total Positions: 9
Program ID: 323-05-21-021

Connecticut
New Haven
Yale-New Haven Medical Center Program*
Yale-New Haven Hospital
Program Director:
George Listor, MD
Yale University School of Medicine
Dept of Pediatrics
333 Cedar St.
New Haven, CT 06520-8664
203 785-6651
Length: 2 Year(s) Total Positions: 7
Program ID: 323-04-21-036

Stanford
Stanford University Program
Stanford University Hospital
Lucile Salter Packard Children’s Hospital at Stanford
Program Director:
Larry R. Frankel, MD
Stanford University
Dept of Pediatrics
Stanford, CA 94305
415 723-5495
Length: 2 Year(s) Total Positions: 3
Program ID: 323-05-21-056

Torrance
Los Angeles County-Harbor-UCLA Medical Center Program
Los Angeles County-Harbor-UCLA Medical Center
Children’s Hospital of Orange County
LAC-KingDrew Medical Center
Program Director:
Dan M Cooper, MD
Harbor-University of California Los Angeles Medical Center
1000 W Carson St Box 491
Torrance, CA 90710
310 222-6602
Length: 2 Year(s) Total Positions: 5
Program ID: 323-05-21-033

District of Columbia
Washington
George Washington University Program
George Washington University School of Medicine
Children’s National Medical Center
Program Director:
Peter R. Holtbrock, MD
Children’s National Medical Center
111 Michigan Ave NW
Dept of Critical Care Medicine
Washington, DC 20010-2910
202 394-3130
Length: 2 Year(s) Total Positions: 6
Program ID: 323-10-21-005

Florida
Gainesville
University of Florida Program
University of Florida College of Medicine
Shands Hospital at the University of Florida
Program Director:
Salvatore R. Goodwin, MD
University of Florida College of Medicine
300 S.W. 13th St Gainesville, FL 32610-0001
904 395-0077
Length: 2 Year(s) Total Positions: 5
Program ID: 323-11-21-020

Jacksonville
University of Florida Health Science Center/ Jacksonville Program
University Medical Center (UPHSC/J)
Baptist Medical Center (UPHSC/J)
Program Director:
Michael O. Googe, MD
University of Florida Health Science Center/Jacksonville
Pediatric Critical Care Medicine
655 W Eighth St
Jacksonville, FL 32209
904 548-3024
Length: 2 Year(s) Total Positions: 3
Program ID: 323-11-21-045

Miami
Miami Children’s Hospital Program
Miami Children’s Hospital
Program Director:
Jack Wolford, MD
Miami Children’s Hospital
Critical Care Medicine
6125 SW 33rd St
Miami, FL 33155
305 662-2639
Length: 2 Year(s) Total Positions: 8
Program ID: 323-11-21-061

University of Miami-Jackson Memorial Medical Center Program
University of Miami-Jackson Memorial Medical Center
Program Director:
Charles L. Fichter, MD
University of Miami School of Medicine
Dept of Pediatrics (R-131)
PO Box 01960
Miami, FL 33101
305 585-6001
Length: 2 Year(s) Total Positions: 2
Program ID: 323-11-21-012

Georgia
Atlanta
Emory University Program*
Emory University School of Medicine
Henrietta Egleston Hospital for Children
Program Director:
Jean A. Wright, MD
Pediatric Critical Care
Egleston Children’s Hosp at Emory
Univ/1405 Clifton Rd NE
Atlanta, GA 30322
404 355-6391
Length: Year(s)
Program ID: 323-12-21-030

Augusta
Medical College of Georgia Program
Medical College of Georgia Hospital and Clinics
Program Director:
Curt M. Stiefelhart, MD
Medical College of Georgia
1120 15th St
BAA 8415
Augusta, GA 30912-3706
706 721-4402
Length: 2 Year(s) Total Positions: 3
Program ID: 323-12-21-010

* Updated information not provided.
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<th>School</th>
<th>Program Director</th>
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<td>McGaw Medical Center of Northwestern University</td>
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<td>Program Director: Zehava L. Neustein, MD</td>
<td>Chicago, IL 60614</td>
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<td>Baltimore Johns Hopkins University Program</td>
<td>Johns Hopkins University School of Medicine</td>
<td>Johns Hopkins Hospital</td>
<td>Program Director: Donald H. Shaffer, MD</td>
<td>Baltimore, MD</td>
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<td>Program Director: Robert C. Pascucci MD</td>
<td>Boston, MA 02115</td>
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<td>Program Director: I. David Tores MD</td>
<td>Boston, MA 02114</td>
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<td>Program Director: J. Julio Perez Fontan, MD</td>
<td>St Louis, MO 63110</td>
<td>314-454-2527</td>
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<td>Cooper Hospital/University Medical Center</td>
<td>Program Director: Frank A. Riggins MD</td>
<td>Camden, NJ 08103-1489</td>
<td>609-642-4245</td>
<td>Length: 2 Year(s)</td>
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<td>Children's Hospital of New Jersey</td>
<td>Program Director: Dome M. Simique, MD</td>
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<td>New York</td>
<td>Albert Einstein College of Medicine</td>
<td>Albert Einstein College of Medicine</td>
<td>Program Director: Edward S. Greenway Jr, MD</td>
<td>Bronx, NY 10467</td>
<td>718-505-3889</td>
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<td>Total Positions: 7</td>
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<td>Bronx</td>
<td>Montefiore Medical Center-Henry and Lucy Moses</td>
<td>Division</td>
<td>Program Director: Edward S. Greenway Jr, MD</td>
<td>Bronx, NY 10467</td>
<td>718-505-3889</td>
<td>Length: 2 Year(s)</td>
<td>Total Positions: 5</td>
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* Updated information not provided.
Buffalo
SUNY at Buffalo Graduate Medical-Dental Education Consortium Program
SUNY at Buffalo Grad Medical-Dental Education Consortium
Children's Hospital of Buffalo
Program Director:
Michele C Papa, MD
Children's Hospital of Buffalo
Dept of Pediatric Critical Care Med
210 Bryant St
Buffalo, NY 14222
716 873-7442
Length: 2 Year(s) Total Positions: 6
Program Id: 833-35-21-035

New Hyde Park
Albert Einstein College of Medicine at Long Island Jewish Medical Center Program
Long Island Jewish Medical Center
Schneider Children's Hosp (Long Island Jewish Med Ctr)
Program Director:
Mayer Saag, MD
Schneider Children's Hosp
Long Island Jewish Medical Center
Critical Care Medicine
New Hyde Park, NY 11042
718 470-3930
Length: 2 Year(s) Total Positions: 6
Program Id: 833-35-23-039

New York
New York Hospital/Cornell Medical Center Program
New York Hospital
Program Director:
Daniel A Lotterman, MD
New York Hospital-Cornell Medical Center
Div of Pediatric Critical Care Med
520 E 68th St NY 300
New York, NY 10021
212 746-4725
Length: 2 Year(s) Total Positions: 6
Program Id: 833-35-21-037

Rochester
University of Rochester Program*
Strong Memorial Hospital of the University of Rochester
Program Director:
Jeffrey S Sabeskin, MD
University of Rochester Medical Center
Pediatric Intensive Care Unit
601 Elmwood Ave Box 667
Rochester, NY 14642
716 275-8138
Length: 2 Year(s)
Program Id: 833-35-21-053

North Carolina
Chapel Hill
University of North Carolina Hospitals Program
University of North Carolina Hospitals
Program Director:
Lawrence L Romer, MD
University of North Carolina
620 Burnett-Womack Bldg
Dept of Pediatrics CB #7220
Chapel Hill, NC 24506-7220
919 966-1746
Length: 2 Year(s) Total Positions: 6
Program Id: 833-35-21-014

Durham
Duke University Program
Duke University Medical Center
Program Director:
William J Gresleay, MD
Duke University Medical Center
Box 3046
Durham, NC 27710
919 613-2043
Length: 2 Year(s) Total Positions: 6
Program Id: 233-36-21-026

Ohio
Cleveland
Case Western Reserve University Program
University Hospitals of Cleveland MetroHealth Medical Center
Program Director:
Jeffrey L Blumer, MD PhD
Rainbow Babies and Children's Hospital
Div of Pediatric Critical Care
1100 E 96th Ave
Cleveland, OH 44106-6010
216 844-3130
Length: 2 Year(s) Total Positions: 8
Program Id: 833-38-21-055

Cleveland Clinic Foundation Program
Cleveland Clinic Foundation
Program Director:
Michael J McKinly, MD
Cleveland Clinic Foundation
Dept of Pediatric Critical Care
8600 Euclid Ave TT32
Cleveland, OH 44106-5242
216 444-5690
Length: 2 Year(s) Total Positions: 3
Program Id: 833-38-21-052

Columbus
Ohio State University Program*
Ohio State University Medical Center
Children's Hospital
Program Director:
Steven B Hawn, MD
Children's Hospital
Section of Critical Care Medicine
700 Children's Dr
Columbus, OH 43206
614 461-3031
Length: 2 Year(s)
Program Id: 833-38-31-054

Pennsylvania
Hershey
Milton S Hershey Medical Center of Pennsylvania State University Program*
Penn State University Hospital-Milton S Hershey Med Ctr
Program Director:
Steven E Lucking, MD
Dept of Pediatrics/Box 650
Milton S Hershey Med Ctr
Hershey, PA 17033
717 531-5306
Length: Year(s)
Program Id: 333-41-21-068

Philadelphia
University of Pennsylvania Program
Children's Hospital of Philadelphia
Program Director:
Andrew T Costantino, MD
Children's Hospital of Philadelphia
34th & Civic Center Blvd
Philadelphia, PA 19104-4300
215 662-1791
Length: 2 Year(s) Total Positions: 9
Program Id: 833-41-21-014

Pittsburgh
University Health Center of Pittsburgh Program
University Health Center of Pittsburgh
Children's Hospital of Pittsburgh
Program Director:
Ann E Thompson, MD
Children's Hospital of Pittsburgh
3705 Feltz Ave at DeWitt St
Pittsburgh, PA 15213-2858
412 622-5102
Length: 2 Year(s) Total Positions: 9
Program Id: 833-35-21-026

Tennessee
Memphis
University of Tennessee Program*
University of Tennessee College of Medicine-Lebonheur Children's Medical Center
Program Director:
Stephanie Scroggin, MD
Le Bonheur Children's Medical Center
848 Adams Ave
Memphis, TN 38103
901 522-3132
Length: 2 Year(s)
Program Id: 333-47-21-027

Nashville
Vanderbilt University Program*
Vanderbilt University Medical Center
Program Director:
Jayant K Deshpande, MD
7301 NMC VMC
Vanderbilt University Medical Ctr
Nashville, TN 37232-2511
615 343-0000
Length: 2 Year(s)
Program Id: 333-47-21-062

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<td>John J. Mackell, MD</td>
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<td>Medical College of Virginia Hospital</td>
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<tr>
<td>Box 880530</td>
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<td>P. Pearl O'Bourke, MD</td>
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<tr>
<td>4800 Sand Point Way NE CH-05</td>
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<td>Stephen P. Kemp, MD</td>
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<td>800 Marshall St</td>
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<td>Thomas F. Roe, MD</td>
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<td>Mitchell E. Geller, MD</td>
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<td>Los Angeles, CA 90024-1752</td>
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<tr>
<td>Kenneth Lee Jones, MD</td>
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<td>University of California San Diego Medical Center</td>
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<tr>
<td>235 Dickinson St</td>
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<td>San Diego, CA 92103</td>
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<td>619-533-6790</td>
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* Updated information not provided.
San Francisco
University of California (San Francisco) Program
University of California (San Francisco) School of Medicine
Program Director:
Melvin M Grumbach, MD
University of California (San Francisco) Medical Center
Dept of Pediatrics Box 0434
San Francisco, CA 94143-0434
415 476-2244
Length: 2 Year(s) Total Positions: 4
Program ID: 326-05-21-005

Connecticut
Farmington
University of Connecticut Program
University of Connecticut School of Medicine
Newington Children's Hospital
Univ of Connecticut Health Center/John Dempsey Hospital
Program Director:
Susan K Katzman, MD
University of Connecticut School of Medicine
Pediatric Endocrinology
263 Farmington Ave
Farmington, CT 06030
203 679-2318
Length: 2 Year(s) Total Positions: 3
Program ID: 326-08-21-054

Stanford
Stanford University Program
Stanford University Hospital
Lucille Salter Packard Children's Hospital at Stanford
Program Director:
Raymond L Hinta, MD
Stanford University Medical Center
Dept of Pediatrics
Room S-222
Stanford, CA 94305
415 723-3791
Length: 2 Year(s) Total Positions: 3
Program ID: 326-05-21-055

Terrance
Los Angeles County-Harbor-UCLA Medical Center Program
Los Angeles County-Harbor-UCLA Medical Center
Program Director:
Jo Anne Brasil, MD
1000 W Carson St
Box 446
Torrance, CA 90609-2910
310 222-1971
Length: 2 Year(s) Total Positions: 3
Program ID: 326-05-11-008

District of Columbia
Washington
Walter Reed Army Medical Center Program
Walter Reed Army Medical Center
USUHS F Edward Herbert School of Medicine
Program Director:
Gary Francis, MD
Uniformed Service University of the Health Sciences
4301 Jones Bridge Rd
Bethesda, MD 20814
202 597-0555
Length: 2 Year(s) Total Positions: 3
Program ID: 326-10-11-041

Florida
Gainesville
University of Florida Program
University of Florida College of Medicine
Shands Hospital at the University of Florida
Program Director:
Janet H Silverstein, MD
J Hillis Miller Health Center
Box 100296
Gainesville, FL 32610-0296
904 329-1600
Length: 2 Year(s) Total Positions: 2
Program ID: 326-11-31-008

Tampa
University of South Florida Program*
University of South Florida College of Medicine
All Children's Hospital
Program Director:
Allen W Boot, MD
John I Malone, MD
All Children's Hospital
891 Sixts St S
St Petersburg, FL 33709
727 892-4237
Length: 2 Year(s) Total Positions: 1
Program ID: 326-11-31-044

Georgia
Atlanta
Emory University Program*
Emory University School of Medicine
Grady Memorial Hospital
Henrietta Egleston Hospital for Children
Program Director:
John S Parks, MD PhD
Emory University School of Medicine Dept of Pediatrics
2040 Roddwood Dr NE
Atlanta, GA 30322
404 727-0732
Length: 2 Year(s) Total Positions: 1
Program ID: 326-12-21-042

Illinois
Chicago
McGaw Medical Center of Northwestern University Program
Northwestern University Medical School
Children's Memorial Medical Center
Program Director:
Bernard L Silverman, MD
Children's Memorial Hospital
Div of Endocrinology
2300 Children's Plaza #54
Chicago, IL 60614
312 866-4460
Length: 2 Year(s) Total Positions: 2
Program ID: 326-16-21-040

University of Chicago Program
Wyllie Children's Hospital at the University of Chicago
Program Director:
Robert L Rosenfeld, MD
Wyllie Children's Hospital at the University of Chicago
5655 S Maryland Ave MC5053
Chicago, IL 60637-1470
773 702-0432
Length: 2 Year(s) Total Positions: 2
Program ID: 326-16-11-010

University of Illinois College of Medicine at Chicago Program*
University of Illinois College of Medicine at Chicago
Michael Reese Hospital and Medical Center
University of Illinois Hospital and Clinics
Program Director:
Songyu Pang, MD
University of Illinois at Chicago
Div of Pediatric Endocrinology
540 S Wood St MC 855
Chicago, IL 60612
312 996-1785
Length: 2 Year(s) Total Positions: 1
Program ID: 326-16-31-062

* Updated information not provided.
Accredited Programs in Pediatric Endocrinology (Pediatrics)

Maywood
Loyola University Program
P.O. Box 35000
Loyola University of Chicago
1125 W. Fullerton Ave
Maywood, IL 60153
708-569-6200
Length: 2 Year(s) Total Positions: 3
Program ID: 328-16-21-068

Bethesda
NICHD/Georgetown University Program*
NIH Warren Grant Magnuson Clinical Center
George Washington University Hospital
Program Director:
George P. Cressman, MD
Building 10 Room 10-N-262
National Institutes of Health
Bethesda, MD 20892
301-496-4686
Length: 2 Year(s) Total Positions: 6
Program ID: 328-23-21-066

Indiana
Indianapolis
Indiana University Medical Center Program
Indiana University Medical Center
Program Director:
Scott A. Wilkins, MD
Indiana University Medical Center
702 Barnhill Dr
Riley Hospital Box 5884
Indianapolis, IN 46202-5825
317-259-2345
Length: 2 Year(s) Total Positions: 4
Program ID: 328-17-21-052

Massachusetts
Boston
Harvard Medical School Program
Children's Hospital
Program Director:
Joseph A. Majdick, MD
Children's Hospital/Brigham and Women's Hospital
305 Longwood Ave
Boston, MA 02115
617-732-6501
Length: 2 Year(s) Total Positions: 6
Program ID: 328-34-21-014

Massachusetts General Hospital Program
Massachusetts General Hospital
Program Director:
Lyne L. Lertkruai, MD
Massachusetts General Hospital
Pediatric Endocrine Unit
15 Parkman St H6-0214
Boston, MA 02114
617-725-5790
Length: 2 Year(s) Total Positions: 4
Program ID: 328-24-21-016

Michigan
Ann Arbor
University of Michigan Program
University of Michigan Hospitals
Program Director:
Nancy J. Hopwood, MD
Dept of Pediatrics
University of Michigan Medical Center
2222 Packard Rd Box 8016
Ann Arbor, MI 48109-2015
313-764-7975
Length: 2 Year(s) Total Positions: 1
Program ID: 328-25-21-016

Minnesota
Minneapolis
University of Minnesota Program
University of Minnesota Medical School
University of Minnesota Hospital and Clinic
Program Director:
David M. Brown, MD
University of Minnesota Hospitals and Clinics
University of Minnesota Medical School
Box 1244
Minneapolis, MN 55405
612-624-5409
Length: 2 Year(s) Total Positions: 2
Program ID: 328-25-21-043

Rochester
Mayo Graduate School of Medicine Program
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Rochester)
St Mary's Hospital of Rochester
Program Director:
Donald Zimmerman, MD
Division of Pediatric Endocrinology
Mayo Clinic
134 First St SW
Rochester, MN 55905
507-262-9379
Length: 2 Year(s) Total Positions: 3
Program ID: 328-28-21-017

Missouri
Kansas City
University of Missouri at Kansas City Program*
University of Missouri-Kansas City School of Medicine
Children's Mercy Hospital
Program Director:
Campbell P. Howard, MD
Endocrinology
Children's Mercy Hospital
1140 Gillham Rd
Kansas City, MO 64106-8998
816-234-3072
Length: 2 Year(s) Total Positions: 1
Program ID: 328-25-21-016

New York
Bronx
Albert Einstein College of Medicine Program
Albert Einstein College of Medicine of Yeshiva University
Bronx Municipal Hospital Center
1111 West 170th St
New York, NY 10467-2499
718-920-9654
Length: 2 Year(s) Total Positions: 3
Program ID: 328-36-21-020

* Updated information not provided.
Brooklyn
Maimonides Medical Center Program
Maimonides Medical Center
Program Director: Marcin Banas, MD
Dept of Pediatrics
Maimonides Medical Center
244 9th Ave
Brooklyn, NY 11219
718-285-5000
Length: 2 Year(s)
Program ID: 326-35-21-064

SUNY Health Science Center at Brooklyn Program*
SUNY HSC at Brooklyn College of Medicine
Brooklyn Hospital Medical Center
Kings County Hospital Center
University Hospital-SUNY Health Science Center at Brooklyn
Program Director: Eduardo Ortiz, MD
State University of New York Health Science Ctr at Brooklyn
460 Clarkson Ave
Box 49
Brooklyn, NY 11203
718-285-2027
Length: 2 Year(s) Total Positions: 4
Program ID: 326-35-21-022

Buffalo
SUNY at Buffalo Graduate Medical-Dental Education Consortium Program
SUNY at Buffalo Grad Medical-Dental Education Consortium
Children's Hospital of Buffalo
Program Director: Margaret H MacGillivray, MD
Children's Hospital of Buffalo
219 Bryant St
Buffalo, NY 14222
716-878-7388
Length: 2 Year(s) Total Positions: 2
Program ID: 326-35-21-021

Manhasset
North Shore University Hospital Program
North Shore University Hospital
Program Director: Phyllis W Spilker, MD
North Shore University Hospital
300 Community Dr
Manhasset, NY 11030
516-629-4635
Length: 2 Year(s) Total Positions: 2
Program ID: 326-35-21-044

Mineola
Winthrop-University Hospital Program
Winthrop-University Hospital
Program Director: Mariano Castor-Maguana, MD
Winthrop-University Hospital
107 Mineola Blvd
Mineola, NY 11501
516-394-6171
Length: 2 Year(s) Total Positions: 3
Program ID: 326-35-31-067

New Hyde Park
Albert Einstein College of Medicine at Long Island Jewish Medical Center Program
Long Island Jewish Medical Center
Schneider Children's Hosp (Long Island Jewish Med Ctr)
Program Director: Dennis Careg, MD
Long Island Jewish Med Ctr Schneider Children's Hospital
Pediatric Endocrinology
New Hyde Park, NY 11042
718-470-2340
Length: 2 Year(s) Total Positions: 3
Program ID: 326-35-21-066

New York
Mount Sinai School of Medicine Program
Mount Sinai School of Medicine
Mount Sinai Medical Center
Program Director: Fredda Ginsburg Fullmer, MD
Mount Sinai School of Medicine Box 1108
One Gustave L Levy Pk
New York, NY 10029-6794
212-343-6806
Length: 2 Year(s) Total Positions: 3
Program ID: 326-35-11-023

New York Hospital/Cornell Medical Center Program
New York Hospital
Program Director: Maria I New, MD
New York Hospital/Cornell Med Ctr Dept of Pediatrics
555 E 68th St
New York, NY 10021-5324
212-746-3450
Length: 2 Year(s) Total Positions: 12
Program ID: 326-35-21-049

New York University Medical Center Program
New York University Medical Center
Bellevue Hospital Center
Program Director: Raphael David, MD
New York University Medical Center
500 First Ave
New York, NY 10016
212-398-6400
Length: 2 Year(s) Total Positions: 5
Program ID: 326-35-21-065

Rochester
University of Rochester Program*
Strong Memorial Hospital of the University of Rochester
Program Director: Richard W Parazzato, MD PhD
Strong Memorial Hospital
601 Elmwood Ave
Rochester, NY 14642
716-262-7744
Length: 2 Year(s)
Program ID: 326-35-21-024

Stony Brook
SUNY at Stony Brook Program
University Hospital-SUNY at Stony Brook
Nassau County Medical Center
Program Director: Thomas A Wilson, MD
Dept of Pediatrics at SUNY
Stony Brook, NY 11794-8111
631-444-5700
Length: 2 Year(s) Total Positions: 6
Program ID: 326-35-21-061

Syracuse
SUNY Health Science Center at Syracuse Program
University Hospital-SUNY Health Science Center at Syracuse
Crouse-Irving Memorial Hospital
Program Director: Robert A Richman, MD
State University of New York Health Science Center
Dept of Pediatrics
750 E Adams St
Syracuse, NY 13210-2339
315-464-0444
Length: 2 Year(s) Total Positions: 1
Program ID: 326-35-21-046

North Carolina
Chapel Hill
University of North Carolina Hospitals Program
University of North Carolina Hospitals Program
Program Director: Louis E Underwood, MD
University of North Carolina School of Medicine
Dept of Pediatrics
500 Burnett-Womack Bldg CB#7220
Chapel Hill, NC 27599-7220
919-966-4405
Length: 2 Year(s) Total Positions: 5
Program ID: 326-36-21-025

Durham
Duke University Program
Duke University Medical Center
Program Director: Michael S Fremark, MD
Duke University Medical Center
3003 Biltmore Bldg 3080
Durham, NC 27710
919-684-3777
Length: 2 Year(s) Total Positions: 1
Program ID: 326-38-21-026

Ohio
Cincinnati
University of Cincinnati Hospital Group Program
Children's Hospital Medical Center
Program Director: Steven D Chernausek, MD
Children's Hospital Medical Center
3333 Burnet Ave
Cincinnati, OH 45229-3029
513-559-4306
Length: 2 Year(s) Total Positions: 3
Program ID: 326-38-21-027

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<td>University Hospitals of Cleveland</td>
<td>Program Director: William T Dahn, MD</td>
<td>216-537-3272</td>
<td>3 Year(s)</td>
<td>8 Positions</td>
<td>326-98-21-028</td>
</tr>
<tr>
<td>Columbus</td>
<td>Ohio State University Program*</td>
<td>Columbus</td>
<td>Ohio State University Medical Center</td>
<td>Children’s Hospital</td>
<td>614-688-2046</td>
<td>2 Year(s)</td>
<td>2 Positions</td>
<td>326-41-2-047</td>
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<tr>
<td>Oklahoma</td>
<td>Oklahoma City</td>
<td>Oklahoma</td>
<td>University of Oklahoma Health Sciences Center Program*</td>
<td>University of Oklahoma College of Medicine-Oklahoma City</td>
<td>405-271-6765</td>
<td>2 Year(s)</td>
<td>3 Positions</td>
<td>326-33-11-030</td>
</tr>
<tr>
<td>Portland</td>
<td>Oregon Health Sciences University</td>
<td>Portland</td>
<td>Oregon Health Sciences University Hospital</td>
<td>Program Director: Stephen H LaFranchi, MD</td>
<td>503-464-1927</td>
<td>2 Year(s)</td>
<td>3 Positions</td>
<td>326-40-12-031</td>
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<tr>
<td>Pennsylvania</td>
<td>Philadelphia</td>
<td>Philadelphia</td>
<td>St Christopher’s Hospital for Children</td>
<td>Program Director: William T Dahn, MD</td>
<td>216-544-3561</td>
<td>2 Year(s)</td>
<td>3 Positions</td>
<td>326-98-21-028</td>
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<tr>
<td>Nashville</td>
<td>Vanderbilt University Program</td>
<td>Nashville</td>
<td>Vanderbilt University School of Medicine</td>
<td>Program Director: Rodney A Levenez, MD</td>
<td>615-342-7474</td>
<td>2 Year(s)</td>
<td>3 Positions</td>
<td>326-47-21-036</td>
</tr>
<tr>
<td>Texas</td>
<td>Galveston University Medical Branch Hospitals Program</td>
<td>Galveston</td>
<td>University of Texas Medical Branch Hospitals</td>
<td>Program Director: Bruce S Keenan, MD</td>
<td>409-772-3365</td>
<td>2 Year(s)</td>
<td>2 Positions</td>
<td>326-48-11-037</td>
</tr>
<tr>
<td>Houston</td>
<td>Baylor College of Medicine</td>
<td>Houston</td>
<td>Texas Children’s Hospital</td>
<td>Program Director: John L Kirkland, MD</td>
<td>713-792-4793</td>
<td>2 Year(s)</td>
<td>3 Positions</td>
<td>326-48-21-061</td>
</tr>
<tr>
<td>Tennessee</td>
<td>University of Tennessee Program</td>
<td>Memphis</td>
<td>University of Tennessee College of Medicine</td>
<td>Program Director: Mark M Danney, MD</td>
<td>901-572-3332</td>
<td>2 Year(s)</td>
<td>3 Positions</td>
<td>326-48-21-036</td>
</tr>
</tbody>
</table>
Accredited Programs in Pediatric Gastroenterology (Pediatrics)

Virginia
Charlottesville
University of Virginia Program
University of Virginia Medical Center
Program Director:
Ahsan D Regol, MD PhD
Chief Div of Pediatric Endocrinology & Metabolism
University of Virginia Hospitals
Box 386
Charlottesville, VA 22908
804 924-6866
Length: 2 Year(s) Total Positions: 4
Program ID: 332-01-11-039

Wisconsin
Madison
University of Wisconsin Program
University of Wisconsin Hospital and Clinics
Program Director:
Michael J MacDonald, MD
2400 Med Sci Ctr
University of Wisconsin Sch of Med
1300 University Ave
Madison, WI 53796
608 262-1105
Length: 2 Year(s) Total Positions: 1
Program ID: 332-04-21-009

Pediatric Gastroenterology (Pediatrics)

Alabama
Birmingham
University of Alabama Medical Center Program*
University of Alabama School of Medicine
Children's Hospital of Alabama
Program Director:
Franklin A Franklin Jr, MD PhD
Div of Ped Gastroenterology & Nutrition
6100 7th Ave South Ste 740
Birmingham, AL 35229
205 934-9558
Length: 2 Year(s)
Program ID: 332-01-21-001

Arkansas
Little Rock
University of Arkansas for Medical Sciences Program*
University of Arkansas College of Medicine
Arkansas Children's Hospital
Program Director:
Donald M Ross, MD PhD
Sect of Gastroenterology
800 Marshall St
Little Rock, AR 72202-3501
501 325-5546
Length: 2 Year(s)
Program ID: 332-04-21-002

California
San Francisco
University of California (San Francisco) Program*
University of California (San Francisco) School of Medicine
University of California (San Francisco) Medical Center
Program Director:
Melvin B Hoyman, MD
Div of Pediatric Gastrointestinal & Nutrition
Univ of California (San Francisco)
515 N N Street & Nutrition
San Francisco, CA 94143-0136
415 476-6892
Length: 2 Year(s)
Program ID: 332-05-21-047

District of Columbia
Washington
George Washington University Program*
Children's National Medical Center
Program Director:
Benny Kermer, MD
Dept of Gastroenterology & Nutrition
Children's National Med Ctr
111 Michigan Ave NW Ste 4277
Washington, DC 20010
202 341-3031
Length: 2 Year(s)
Program ID: 332-10-21-008

Stanford
Stanford University Program*
Stanford University Hospital
Lucile Packard Children's Hospital at Stanford
Program Director:
Kenneth Cox, MD
William Berquist, MD
Dept of Pediatric Gastroenterology & Nutrition
Stanford Univ Med Ctr
Stanford, CA 94305-5119
415 723-9070
Length: 2 Year(s)
Program ID: 332-05-11-005

Colorado
Denver
University of Colorado Program*
University of Colorado Health Sciences Center
Children's Hospital
Denver Health and Hospitals
Program Director:
Ronald J Sokol, MD
Sect of Pediatric Gastroenterology & Nutrition
Children's Hosp
1000 E 19th Ave
Denver, CO 80218
303 861-6669
Length: 2 Year(s)
Program ID: 332-07-21-006

Connecticut
New Haven
Yale-New Haven Medical Center Program*
Yale-New Haven Hospital
Program Director:
Frederick J Suchy, MD
Dept of Pediatrics
Yale Univ Sch of Med
333 Cedar St
New Haven, CT 06510-9064
203 785-4669
Length: 2 Year(s)
Program ID: 332-08-21-007

* Updated information not provided.
Accredited Programs in Pediatric Gastroenterology (Pediatrics)

Florida
Gainesville
University of Florida Program*
University of Florida College of Medicine
Shands Hospital at the University of Florida
Program Director:
Joel M Anderson, MD
Univ of Florida Coll of Med
Dept of Pediatric Gastroenterology
PO Box 100286
Gainesville, FL 32610-0286
352 392-6410
Length: 2 Year(s)
Program ID: 333-11-21-011

Illinois
Chicago
University of Chicago Program*
University of Chicago Hospitals
Program Director:
Peter P Wiggington, MD
The Univ of Chicago
Dept of Pediatrics
5841 S Maryland Ave MC #4665
Chicago, IL 60637-1470
312 702-5418
Length: 2 Year(s)
Program ID: 333-16-21-012

Indiana
Indianapolis
Indiana University Medical Center Program*
Indiana University Medical Center
Program Director:
Joseph P Fitzgerald, MD
Dept of Pediatrics
James Whitcomb Riley Hosp for Child
700 W Broad St Room 3758
Indianapolis, IN 46202-5206
317 274-3774
Length: 2 Year(s)
Program ID: 333-17-21-013

Maryland
Baltimore
Johns Hopkins University Program*
Johns Hopkins University School of Medicine
Johns Hopkins Hospital
Program Director:
Kathleen B Schwartz, MD
Johns Hopkins Hosp
Brady 330 600 N Wolfe St
Baltimore, MD 21287
410 955-8769
Length: 2 Year(s)
Program ID: 333-23-21-016

Baltimore
Walter Reed Army Medical Center Program*
USUHS F Edward Herbert School of Medicine
Walter Reed Army Medical Center
Program Director:
John Stephen Latimer, MD
Dept of Clinical Pediatrics
USUHS-Dept of Pediatrics
401 Jones Bridge Rd
Bethesda, MD 20814
202 685-0055
Length: 2 Year(s)
Program ID: 333-10-21-010

Massachusetts
Boston
Harvard Medical School Program*
Children's Hospital
Massachusetts General Hospital
Program Director:
W Allan Walker, MD
Dept of Pediatrics & Nutrition/ Harvard Med Schd
Massachusetts Gen Hosp-Batt
Bldg 149 13th St
Charlestown, MA 02129
617 736-7988
Length: 2 Year(s)
Program ID: 333-24-31-018

New England Medical Center Hospitals Program*
New England Medical Center Hospitals
Program Director:
Richard J Grand, MD
Dept Pediatric Gastroenterology & Nutrition
New England Med Ctr
750 Washington St NEMC #213
Boston, MA 02111
617 665-0130
Length: 2 Year(s)
Program ID: 333-24-21-017

Michigan
Ann Arbor
University of Michigan Program*
University of Michigan Hospitals
Program Director:
A Craig Hillenmeyer, MD
Dept of Pediatrics
Univ of Michigan Med Ctr
107 Simpson Dr 02090
Ann Arbor, MI 48109-0209
313 763-0650
Length: 2 Year(s)
Program ID: 333-25-21-019

Detroit
Wayne State University/Detroit Medical Center Program*
Wayne State University School of Medicine
Children's Hospital of Michigan
Program Director:
Vaundunsha Tollos, MD
Dept of Pediatrics
3901 Beaumont Blvd
Detroit, MI 48201
313 746-5585
Length: 2 Year(s)
Program ID: 333-25-21-020

Minnesota
Minneapolis
University of Minnesota Program*
University of Minnesota Medical School
University of Minnesota Hospital and Clinics
Program Director:
Harvey L Sharp, MD
Dept of Pediatric Gastroenterology & Nutrition
Univ of Minnesota/Po Box 279 UMC
516 Delaware St SE
Minneapolis, MN 55455
612 624-1128
Length: 2 Year(s)
Program ID: 333-26-21-048

Rochester
Mayo Graduate School of Medicine Program*
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Rochester)
St Mary's Hospital of Rochester
Program Director:
Jean Ferrault, MD
Dept of Pediatrics
Mayo Clinic
200 First St SW
Rochester, MN 55905
507 284-5511
Length: 2 Year(s)
Program ID: 333-26-21-021

Missouri
St Louis
St Louis University Group of Hospitals Program*
St Louis University School of Medicine
Cardinal Glennon Children's Hospital
Program Director:
Robert E Kane III, MD
Dept of Pediatric Gastroenterology
Cardinal Glennon Children's Hosp
1465 S Grand Blvd
St Louis, MO 63104
314 677-5647
Length: 2 Year(s)
Program ID: 333-26-21-022

* Updated information not provided.
Washington University Program
Washington University Program
St Louis Childrens Hospital
Program Director:
David B Perlmutter, MD
Dept of Pediatrics
Washington University Schol of Medicine
One Childrens Pl
St Louis, MO 63110
314 654-6031
Length: 2 Year(s)
Program ID: 332-35-31-023

Nebraska
Omaha
University of Nebraska/Creighton University Program*
University of Nebraska Medical Center
Childrens Memorial Hospital
Program Director:
JoA Vanderhoof, MD
Joint Sect of Pediatric Gastroenterology & Nutrition
9200 Dodge St Ste 250
Omaha, NE 68114
402 390-3560
Length: 2 Year(s)
Program ID: 332-30-21-024

New York
Manhasset
North Shore University Hospital Program*
North Shore University Hospital
Program Director:
Fredric Diarm, MD
Stanley Fisher, MD
Div of Pediatric Gastroenterology & Nutrition
North Shore Univ Hosp
300 Community Dr
Manhasset, NY 11030
516 862-4462
Length: 2 Year(s)
Program ID: 332-35-31-027

New York
Mount Sinai School of Medicine Program A*
Mount Sinai School of Medicine
Mount Sinai Medical Center
Program Director:
Neal S LeLeiko, MD PhD
Mount Sinai Sch of Med
One Gustave L Levy Pl
New York, NY 10029
212 241-5415
Length: 2 Year(s)
Program ID: 332-35-11-028

New York Hospital/Cornell Medical Center Program*
New York Hospital
Program Director:
Joseph Levy, MD
Dept of Clinical Pediatrics
New York Hosp-Cornell Med Ctr
525 E 68th St N921
New York, NY 10021
212 746-3020
Length: 2 Year(s)
Program ID: 332-35-32-029

Presbyterian Medical College in the City of New York Program*
Presbyterian Hospital in the City of New York
Program Director:
Richard J Deckelbaum, MD
Dept of Pediatrics
Div of Gastroenterology & Nutrition
650 W 168th St
New York, NY 10032
212 925-7062
Length: 2 Year(s)
Program ID: 832-35-31-090

Valhalla
New York Medical College at Westchester County Medical Center Program*
New York Medical College
Lincoln Medical and Mental Health Center
Westchester County Medical Center
Program Director:
Steven M Schwartz, MD
Dept of Pediatrics & Nutrition
New York Med Coll
Munger Pavilion Rm 101
Valhalla, NY 10595
Length: 2 Year(s)
Program ID: 332-35-31-041

North Carolina
Chapel Hill
University of North Carolina Hospitals Program*
University of North Carolina Hospitals
Program Director:
Martin H Ullehorn, MD
Dept of Pediatric Gastroenterology
Univ of NC at Chapel Hill
CB#7250 110 Burnett-Womack Bldg
Chapel Hill, NC 27599-7250
919 966-1843
Length: 2 Year(s)
Program ID: 332-34-21-032

Ohio
Cincinnati
University of Cincinnati Hospital Group Program*
Childrens Hospital Medical Center
Program Director:
William F Balistreri, MD
Div of Pediatric Gastroenterology & Nutrition
Childrens Hospital Med Ctr
Elliott and Bethesda Aves
Cincinnati, OH 45229-3999
513 559-4594
Length: 2 Year(s)
Program ID: 332-36-21-033

Cleveland
Case Western Reserve University Program A*
University Hospitals of Cleveland
Program Director:
John Timothy Boyle, MD
Div of Pediatric Gastroenterology & Nutrition
Rainbow Babies & Childrens Hosp
Rm 706 2101 Adelbert Rd
Cleveland, OH 44106
216 844-1767
Length: 2 Year(s)
Program ID: 332-38-11-035

Cleveland Clinic Foundation Program*
Cleveland Clinic Foundation
Program Director:
Robert Wylie, MD
Sect of Pediatric Gastroenterology & Nutrition
The Cleveland Clinic Found
9500 Euclid Ave
Cleveland, OH 44195
216 444-2337
Length: 2 Year(s)
Program ID: 332-35-31-034

Columbus
Ohio State University Program*
Childrens Hospital
Program Director:
H Jabling McClung, MD
Sect of Gastroenterology/Dept of Pediatrics
Columbus Childrens Hosp
700 Childrens Dr
Columbus, OH 43205
614 461-3906
Length: 2 Year(s)
Program ID: 332-38-32-036

Oklahoma
Oklahoma City
University of Oklahoma Health Sciences Center Program*
University of Oklahoma College of Medicine-Oklahoma City
Childrens Hospital of Oklahoma
Program Director:
John E Grunow, MD
Dept of Pediatric Gastroenterology & Nutrition
Childrens Hosp of Oklahoma
PO Box 26297
Oklahoma City, OK 73126
405 271-5684
Length: 2 Year(s)
Program ID: 332-39-21-017

Pennsylvania
Philadelphia
Temple University Program*
St Christopher's Hospital for Children
Program Director:
Jonathan A Pickle, MD
Sect of Gastroenterology & Nutrition
St Christopher's Hosp for Children
Erie Ave at Front St
Philadelphia, PA 19134-1065
215 627-5181
Length: 2 Year(s)
Program ID: 332-41-31-039
Accredited Programs in Pediatric Gastroenterology (Pediatrics)

University of Pennsylvania Program*
Children’s Hospital of Philadelphia
Program Director:
David A Piccoli, MD
Dept of Pediatric Gastroenterology
The Children’s Hosp of Philadelphia
34th St and Civic Ctr Blvd
Philadelphia, PA 19104
215 596-1699
Length: 2 Year(s)
Program ID: 332-41-21-038

Pittsburgh
University Health Center of Pittsburgh Program*
Children’s Hospital of Pittsburgh
University Health Center of Pittsburgh
Program Director:
Samuel A Kocoshis, MD
Dept of Pediatric Gastroenterology
Children’s Hosp of Pittsburgh
3705 Fifth Ave at Dellosto St
Pittsburgh, PA 15213-3583
412 692-5189
Length: 3 Year(s)
Program ID: 332-41-21-040

Rhode Island
Providence
Brown University Program*
Rhode Island Hospital
Women and Infant’s Hospital of Rhode Island
Program Director:
Joel W Addelstone, MD PhD
Div of Pediatric Gastroenterology & Nutrition
Rhode Island Hosp M-125
603 Eddy St
Providence, RI 02903
401 444-8306
Length: 3 Year(s)
Program ID: 332-41-21-041

Tennessee
Nashville
Vanderbilt University Program*
Vanderbilt University Medical Center
Program Director:
Fuyee K Ghahraman, MD
Dept of Pediatrics & Molecular Physiology & Biophysics
Vanderbilt Univ Sch of Med
21st & Garland B-4032 Med Ctr N
Nashville, TN 37232-2570
615 322-7449
Length: 2 Year(s)
Program ID: 332-47-21-042

Texas
Dallas
University of Texas Southwestern Medical School Program*
University of Texas Southwestern Medical School
Children’s Medical Center of Dallas
Dallas County Hospital/District-Parkland Memorial Hospital
Program Director:
John M Anderson, MD
Div of Pediatric Gastroenterology & Nutrition
Children’s Med Ctr of Dallas
1935 Moler St
Dallas, TX 75235
214 640-8000
Length: 2 Year(s)
Program ID: 332-48-11-045

Houston
Baylor College of Medicine Program*
Baylor College of Medicine
Harris County Hospital District-Ben Taub General Hospital
Texas Children’s Hospital
Program Director:
William J Klish, MD
Dept of Pediatrics Baylor Coll of Med
Texas Children’s Hosp
8621 Fannin St MS: 3-3391
Houston, TX 77030-2299
713 770-5077
Length: 2 Year(s)
Program ID: 332-48-21-043

Wisconsin
Madison
University of Wisconsin Program*
University of Wisconsin Hospital and Clinics
Program Director:
Glenn R Gourley,
Univ of Wisconsin Waisman Ctr Rm 609
1500 Highland Ave
Madison, WI 53705-2280
608 263-8186
Length: 2 Year(s)
Program ID: 332-56-31-049

Milwaukee
Medical College of Wisconsin Program*
Medical College of Wisconsin Affiliated Hospitals Inc
Children’s Hospital of Wisconsin
Program Director:
Steven L Werlin, MD
Dept of Pediatrics
Med Coll of Wisconsin
8701 Watertown Plank Rd
Milwaukee, WI 53226
414 266-4193
Length: 2 Year(s)
Program ID: 332-66-21-046

Pediatric Hematology/Oncology
(Pediatrics)

Alabama
Birmingham
University of Alabama Medical Center Program
University of Alabama Hospital
Children’s Hospital of Alabama
Program Director:
Robert P Castleberry, MD
University of Alabama Medical Center
Children’s Hospital 501
1600 7th Ave S
Birmingham, AL 35223
205 934-5385
Length: 2 Year(s) Total Positions: 3
Program ID: 327-01-21-043

Mobile
University of South Alabama Program
University of South Alabama Medical Center
Program Director:
Yih-Ming Yang, MD
University of South Alabama Medical Center
2451 Fillipek St
Mobile, AL 36617
205 471-7335
Length: 2 Year(s) Total Positions: 1
Program ID: 327-01-21-041

California
Los Angeles
Childrens Hospital of Los Angeles Program*
Childrens Hospital of Los Angeles
Program Director:
Vanes A De Clerck, MD
Division of Hematology/Oncology Mailstop #54
Childrens Hospital of Los Angeles
4659 Sunset Blvd
Los Angeles, CA 90027
213 682-2206
Length: 2 Year(s) Total Positions: 9
Program ID: 327-06-11-001

UCLA Medical Center Program
UCLA School of Medicine
UCLA Medical Center
Program Director:
Storvne A Finl, MD
Div of Hematology/Oncology
Dept of Pediatrics
UCLA School of Medicine
Los Angeles, CA 90024-1752
310 825-7028
Length: 2 Year(s) Total Positions: 4
Program ID: 327-06-21-003

* Updated information not provided.
Accredited Programs in Pediatric Hematology/Oncology (Pediatrics)

University of Southern California Program*
Los Angeles County-USC Medical Center
Program Director:
Darleen Powar, MD
Los Angeles County-University of S California Medical Center
1135 N State St
Los Angeles, CA 90033
213 206-3833
Length: 2 Year(s)
Program ID: 327-46-11-002

Oakland
Children's Hospital Medical Center of Northern California Program*
Children's Hospital Medical Center of Northern California
Program Director:
Joseph E. Addiego Jr, MD
Children's Hospital Medical Center at Northern California
747 E 9th St
Oakland, CA 94609
510 426-3377
Length: 2 Year(s) Total Positions: 4
Program ID: 327-06-31-056

Orange
Children's Hospital of Orange County Program
Children's Hospital of Orange County
University of California (Irvine) Medical Center
Program Director:
Mitchell S. Caille, MD
Children's Hospital of Orange County
455 S Main St
Orange, CA 92868-3974
714 520-6716
Length: 2 Year(s) Total Positions: 6
Program ID: 327-06-21-057

Sacramento
University of California (Davis) Program
University of California (Davis) Medical Center
Program Director:
Jonathan M. DeMuth, MD
Dept of Pediatrics
UC Davis Medical Center
2815 Stockton Blvd
Sacramento, CA 95817
916 798-7292
Length: 2 Year(s) Total Positions: 1
Program ID: 327-05-11-006

San Francisco
University of California (San Francisco) Program
University of California (San Francisco) School of Medicine
San Francisco General Hospital Medical Center
University of California (San Francisco) Medical Center
Program Director:
William C. Montez, MD
San Francisco General Hospital Medical Center
1001 Potrero Rd 6-B-9
San Francisco, CA 94110
415 353-8000
Length: 2 Year(s) Total Positions: 4
Program ID: 327-05-21-006

Stanford
Stanford University Program
Stanford University Hospital
Lucille Salter Packard Children's Hospital at Stanford
Program Director:
Bertil B. Glauder, MD PhD
Stanford University School of Medicine
Dept of Pediatrics
Div of Hematology/Oncology
Stanford, CA 94305-5119
415 723-5835
Length: 3 Year(s) Total Positions: 6
Program ID: 327-06-21-004

Walter Reed Army Medical Center Program
Walter Reed Army Medical Center
Program Director:
Col David A. Murphy, MD
Chief Pediatric Hematology/Oncology
Walter Reed Army Medical Center
5625 15th St NW
Washington, DC 20007-5001
202 783-0421
Length: 2 Year(s) Total Positions: 6
Program ID: 327-10-21-044

Colorado
Denver
University of Colorado Program
University of Colorado Health Sciences Center
Children's Hospital
Program Director:
Robert L. Barnes, MD
University of Colorado Health Sciences Center
4200 E Ninth Ave A-006/B-115
Denver, CO 80262
303 673-6772
Length: 2 Year(s) Total Positions: 8
Program ID: 327-07-21-007

Connecticut
New Haven
Yale-New Haven Medical Center Program
Yale-New Haven Hospital
Program Director:
Diana S. Beachum, MD PhD
Yale-New Haven Hospital
333 Cedar St LMP 4087
PO Box 309064
New Haven, CT 06520-9064
203 785-4640
Length: 2 Year(s) Total Positions: 3
Program ID: 327-06-21-008

District of Columbia
Washington
George Washington University Program
George Washington University School of Medicine
Children's National Medical Center
Program Director:
Gregory H. Seaman, MD
Children's National Medical Center
1111 Michigan Ave NW
Washington, DC 20010
202 877-2417
Length: 2 Year(s) Total Positions: 6
Program ID: 327-10-21-009

Florida
Gainesville
University of Florida Program*
University of Florida College of Medicine
Neuros Children's Clinic (UFHNsc)
Shands Hospital at the University of Florida
Program Director:
Paulalette Mehta, MD
University of Florida School of Medicine
Pediatric Hematology/Oncology
Box 100286 JHMHC
Gainesville, Fl 32610-0286
904 330-4410
Length: 2 Year(s) Total Positions: 9
Program ID: 327-11-31-010

Georgia
Atlanta
Emory University Program*
Emory University School of Medicine
Grady Memorial Hospital
Henrietta Egleston Hospital for Children
Program Director:
Thad T. Ohm, MD
Emory University School of Medicine Dept of Pediatrics
2940 Ridgewood Dr NE
Atlanta, GA 30322
404 777-4451
Length: 2 Year(s) Total Positions: 5
Program ID: 327-12-21-041

Illinois
Chicago
McGaw Medical Center of Northwestern University Program
Northwestern University School of Medicine
Children's Memorial Medical Center
Program Director:
Sharon B. Murphy, MD
Chief Div of Hematology/Oncology
Children's Memorial Hospital
2300 Children's Plaza
Chicago, IL 60614
312 995-4984
Length: 2 Year(s) Total Positions: 5
Program ID: 327-16-21-011

* Updated information not provided.
Accredited Programs in Pediatric Hematology/Oncology (Pediatrics)

University of Chicago Program
Wyley Children's Hospital at the University of Chicago
Program Director:
F L Johnson, MD
University of Chicago Hospitals
MC4060
5841 S Maryland Ave
Chicago, IL 60637-1470
312 734-6585
Length: 2 Year(s) Total Positions: 6
Program ID: 327-16-11-050

Indiana

Indianapolis

Indiana University Medical Center Program
Indiana University Medical Center
Program Director:
Mary C Dinwiddie, MD
Indiana University School of Medicine
Dept of Pediatrics Riley Hosp
702 Barnhill Dr Rm 3709
Indianapolis, IN 46202-5225
317 274-8784
Length: 2 Year(s) Total Positions: 6
Program ID: 327-1731-012

Iowa

Iowa City

University of Iowa Hospitals and Clinics Program
University of Iowa Hospitals and Clinics
Program Director:
Albert S Cornelius, MD
University of Iowa Hospitals and Clinics
Dept of Pediatrics 2540 JCP
200 Hawkins Dr
Iowa City, IA 52242-1009
319 356-2222
Length: 2 Year(s) Total Positions: 3
Program ID: 327-18-11-013

Louisiana

New Orleans

Louisiana State University/Tulane University Program
Louisiana State University School of Medicine
Children's Hospital
Tulane University Hospital and Clinics
Program Director:
Raj P Warrier, MD
Rafael Deocar, MD
Louisiana State University
Dept of Pediatrics
1542 Tulane Ave
New Orleans, LA 70112
504 588-4691
Length: 2 Year(s) Total Positions: 4
Program ID: 327-21-21-048

Maryland

Baltimore

Johns Hopkins University Program
Johns Hopkins University School of Medicine
Johns Hopkins Hospital
Program Director:
Curt I Givin, MD
George J Dover, MD
Johns Hopkins Oncology Center
Oncology B-108
600 N Wolfe St
Baltimore, MD 21287-5001
410 955-8815
Length: 2 Year(s) Total Positions: 6
Program ID: 327-19-11-014

Bethesda

National Naval Medical Center (Bethesda) Program
National Naval Medical Center (Bethesda)
NIH Warren Grant Magnuson Clinical Center
Program Director:
Philip A Pizzo, MD
Pediatric Branch National Cancer Institute
Bldg 10 Rm 13R140
10 Center Dr, MSC 2128
Bethesda, MD 20892-1028
301 496-4256
Length: 2 Year(s) Total Positions: 15
Program ID: 327-25-21-017

Massachusetts

Boston

Harvard Medical School Program*
Children's Hospital
Dana-Farber Cancer Institute
Program Director:
Samuel E Lazar, MD
Children's Hospital
300 Longwood Ave
Boston, MA 02115
617 730-7904
Length: 2 Year(s) Program ID: 327-25-21-015

Michigan

Ann Arbor

University of Michigan Program
University of Michigan Hospitals
Program Director:
Lawrence A Boxer, MD
Pediatric Hematology/Oncology
University of Michigan Hospitals
1500 E Medical Center Dr 12110
Ann Arbor, MI 48109-0208
313 764-7153
Length: 2 Year(s) Total Positions: 7
Program ID: 327-25-21-016

Detroit

Wayne State University/Detroit Medical Center Program
Wayne State University School of Medicine
Children's Hospital of Michigan
Program Director:
Jeanette M Luster, MD
Children's Hospital of Michigan
3901 Beaubien Blvd
Detroit, MI 48201
313 745-0257
Length: 2 Year(s) Total Positions: 4
Program ID: 327-25-21-017

Minnesota

Minneapolis

University of Minnesota Program
University of Minnesota Medical School
University of Minnesota Hospital and Clinic
Program Director:
William G Woods, MD
Norma K C Ramsey, MD
University of Minnesota Medical School
Box 454 CMHC
400 Delaware Street SE
Minneapolis, MN 55455-0037
612 337-2774
Length: 2 Year(s) Total Positions: 8
Program ID: 327-26-21-020

Rochester

Mayo Graduate School of Medicine Program
Mayo Graduate School of Medicine: Mayo Foundation Mayo Clinic (Rochester)
St Mary's Hospital of Rochester
Program Director:
William A Smithson, MD
Sibbens 5th Fl Registrar
Mayo Graduate School of Medicine
Rochester, MN 55905
507 262-7379
Length: 2 Year(s) Total Positions: 3
Program ID: 327-26-21-019

Mississippi

Jackson

University of Mississippi Medical Center Program
University of Mississippi School of Medicine
University Hospital
Program Director:
Jeanette Patton, MD
University of Mississippi Medical Center
2500 N State St
Jackson, MS 39216-6505
601 844-5200
Length: 2 Year(s) Total Positions: 3
Program ID: 327-27-13-055

* Updated information not provided.
Kansas City

University of Missouri at Kansas City
Program
University of Missouri-Kansas City School of Medicine
Children's Mercy Hospital
Program Director: Gerald M. Wood, MD
Hematology/Oncology
Children's Mercy Hospital
2419 Gillham Rd
Kansas City, MO 64108-8888
816 268-3265
Length: 2 Year(s) Total Positions: 1
Program ID: 327-35-21-008

St Louis

Washington University Program
St Louis Children's Hospital
Program Director:
Alan L. Schwartz, MD, PhD
Children's Hospital at Washington University Medical Center
Div of Hematology/Oncology
One Children's Pl
St Louis, MO 63110
314 454-6126
Length: 2 Year(s) Total Positions: 4
Program ID: 327-35-11-020

Nebraska

Omaha

University of Nebraska/Crestview University Program
University of Nebraska Medical Center
Children's Memorial Hospital
Program Director: Peter F. Costic, MD
University of Nebraska Medical Center
Dept of Pediatrics
600 S 42nd St
Omaha, NE 68108-2168
402 559-2387
Length: 2 Year(s) Total Positions: 1
Program ID: 327-30-21-082

New York

Buffalo

SUNY at Buffalo Graduate Medical-Dental Education Consortium Program*
SUNY at Buffalo Grad Medical-Dental Education Consortium
Children's Hospital of Buffalo
Roswell Park Cancer Institute
Program Director: Martin L. Brotzer, MD
Children's Hospital of Buffalo
218 Bryant St
Buffalo, NY 14222
716 878-7249
Length: 2 Year(s) Total Positions: 1
Program ID: 327-35-21-821

New Hyde Park

Albert Einstein College of Medicine at Long Island Jewish Medical Center
Program
Long Island Jewish Medical Center
Schneider Children's Hospital (Long Island Jewish Med Ctr)
Program Director: Philip Lanckow, MD
Schneider Children's Hospital
Long Island Jewish Medical Center
New Hyde Park, NY 11042
718 470-3621
Length: 2 Year(s) Total Positions: 5
Program ID: 327-35-21-023

New York

Mount Sinai School of Medicine Program
Mount Sinai School of Medicine
Mount Sinai Medical Center
Program Director: Jeffrey M. Lipton, MD, PhD
Pediatric Hematology/Oncology
1000 Mt Sinai Hospital
One Gustave L Levy Pl
New York, NY 10029
212 341-3031
Length: 2 Year(s) Total Positions: 4
Program ID: 327-35-11-025

New York Hospital/Cornell Medical Center Program
Memorial Sloan-Kettering Cancer Center
New York Hospital
Program Director: Fred A. Meyers, MD
Margaret H Hillgartner, MD
1275 York Ave
New York, NY 10021
212 639-6652
Length: 2 Year(s) Total Positions: 18
Program ID: 327-36-21-024

New York University Medical Center Program
New York University Medical Center
Belfiore Hospital Center
Program Director: Margaret Karpak, MD
New York University Medical Center
Pediatric-Hematology/Oncology
500 First Ave
New York, NY 10016-5402
212 282-6428
Length: 2 Year(s) Total Positions: 3
Program ID: 327-35-11-026

Presbyterian Hospital in the City of New York Program
Presbyterian Hospital in the City of New York
Program Director:
Sergio Sciarra, MD
Presbyterian Hospital in the City of New York
622 W 168th St
New York, NY 10032
212 866-5000
Length: 2 Year(s) Total Positions: 5
Program ID: 327-35-11-027

Rochester

University of Rochester Program
Strong Memorial Hospital of the University of Rochester
Program Director:
Barbara L. Aisen, MD
Dept of Pediatrics Box 777
University of Rochester Med Ctr
501 Elmwood Ave
Rochester, NY 14642
716 275-1981
Length: 2 Year(s) Total Positions: 3
Program ID: 327-35-21-049

Syracuse

SUNY Health Science Center at Syracuse Program
SUNY Hospital-SUNY Health Science Center at Syracuse
Crouse-Irving Memorial Hospital
Program Director: Ronald L. Dubow, MD
State University of New York Health Science Center
750 E Adams St
Syracuse, NY 13210
315 464-5845
Length: 2 Year(s) Total Positions: 3
Program ID: 327-35-11-029

North Carolina

Chapel Hill

University of North Carolina Hospitals Program
University of North Carolina Hospitals
Program Director:
Herbert A. Cooper, MD
University of North Carolina at Chapel Hill
Dept of Pediatrics
CB #7220 Burnett-Wenack Bldg
Chapel Hill, NC 27599
919 966-1175
Length: 2 Year(s) Total Positions: 1
Program ID: 327-36-21-025

Durham

Duke University Program
Duke University Medical Center
Program Director:
John M. Falletta, MD
Duke University Medical Center
Bio Box 2916
Durham, NC 27710
919 668-3641
Length: 2 Year(s) Total Positions: 9
Program ID: 327-36-21-029

*Updated information not provided.
Ohio

Cincinnati

University of Cincinnati Hospital Group
Program
Children's Hospital Medical Center
Program Director:
Robert J Arceri, MD PhD
Children's Hospital Medical Center
3333 Burnet Ave.
Cincinnati, OH 45229-3029
513 559-4266
Length: 2 Year(s)  Total Positions: 3
Program ID: 327-38-21-030

Cleveland

Case Western Reserve University
Program
University Hospitals of Cleveland
Program Director:
Susan S Shurn, MD
Rainbow Babies and Children's Hospital
11100 Euclid Ave.
Cleveland, OH 44106-3440
216 844-3345
Length: 2 Year(s)  Total Positions: 2
Program ID: 327-38-21-031

Columbus

Ohio State University Program*
Ohio State University Medical Center
Children's Hospital
Program Director:
Frederick Rymann, MD
Columbus Children's Hospital
760 Children's Dr.
Columbus, OH 43205
614 722-3564
Length: 2 Year(s)
Program ID: 327-38-21-042

Pennsylvania

Philadelphia

St Christopher's Hospital for Children
Program
St Christopher's Hospital for Children
Program Director:
Marc J Stuart, MD
St Christopher's Hospital for Children
Eric Ave at Pront St
Philadelphia, PA 19134-3905
215 447-4497
Length: 2 Year(s)  Total Positions: 1
Program ID: 327-41-12-051

University of Pennsylvania Program*
Children's Hospital of Philadelphia
Program Director:
Walter S Tannenbaum Jr, MD
Director Training Program
Children's Hospital of Philadelphia
34th & Civic Center Blvd
Philadelphia, PA 19104
215 596-2233
Length: 2 Year(s)
Program ID: 327-41-21-032

Pittsburgh

University Health Center of Pittsburgh
Program
University Health Center of Pittsburgh
Children's Hospital of Pittsburgh
Program Director:
Joseph Miro Jr, MD
Children's Hospital of Pittsburgh
Div of Hematology-Oncology
3705 Fifth Ave Box 3765
Pittsburgh, PA 15213-2583
412 692-6528
Length: 2 Year(s)  Total Positions: 3
Program ID: 327-41-21-068

Puerto Rico

San Juan

University of Puerto Rico Program
University of Puerto Rico School of Medicine
Auxilio Munoz Hospital
University Pediatric Hospital
Program Director:
Pedro J Santiago-Borrero, MD
University of Puerto Rico
School of Medicine
PO Box 065467
San Juan, PR 00906-5667
809 764-9783
Length: 2 Year(s)
Program ID: 327-42-21-065

Rhode Island

Providence

Brown University Program
Rhode Island Hospital
Program Director:
Edwin N Forder, MD
Rhode Island Hospital
500 Eddy St
Providence, RI 02903-4923
401 444-5471
Length: 2 Year(s)  Total Positions: 2
Program ID: 327-43-21-033

South Carolina

Charleston

Medical University of South Carolina Program*
Medical University of South Carolina College of Medicine
MUSC Medical Center
Program Director:
Joseph Lauer, MD
Medical University of South Carolina
Pediatric Hematology & Oncology
171 Ashley Ave
Charleston, SC 29425-3311
803 799-2867
Length: 2 Year(s)
Program ID: 227-45-21-068

Columbia

Richland Memorial Hospital-University of South Carolina School of Medicine
Program*
Richland Memorial Hospital-Univ of South Carolina Sch of Med
Program Director:
Robert S Etinger, MD
Richland Memorial Hospital
7 Richland Memorial Hosp
Ste 300
Columbia, SC 29033
803 434-3533
Length: 2 Year(s)  Total Positions: 1
Program ID: 227-45-21-043

Tennessee

Memphis

University of Tennessee Program
University of Tennessee College of Medicine
LeBonheur Children's Medical Center
St Jude Children's Research Hospital
Program Director:
William Crue, MD
St Jude Children's Research Hospital
332 N Lauderdale
PO Box 318
Memphis, TN 38109-0018
901 529-0921
Length: 2 Year(s)  Total Positions: 16
Program ID: 327-47-21-034

* Updated information not provided.
Nashville
Vanderbilt University Program
Vanderbilt University Medical Center
Program Director: John N Laken, MD
Div of Ped Hematology-Oncology
T:313 MCN
Nashville, TN 37232-3568
615-322-5747
Length: 2 Year(s) Total Positions: 3
Program ID: 327-47-21-035

Texas
Dallas
University of Texas Southwestern Medical School Program
University of Texas Southwestern Medical School
Children's Medical Center of Dallas
Program Director: George B Buchanan, MD
University of Texas Southwestern Medical School
Dept of Pediatrics
Dallas, TX 75239-9003
214 648-3388
Length: 2 Year(s) Total Positions: 8
Program ID: 327-48-21-046

Galveston
University of Texas Medical Branch Hospitals Program
University of Texas Medical Branch Hospitals
Program Director: Blanche P Alter, MD
University of Texas Medical Branch
Dept of Pediatrics
Rm C342 Child Hlth Ctr
Galveston, TX 77555-0861
409 772-2341
Length: 2 Year(s) Total Positions: 3
Program ID: 327-48-11-036

Houston
Baylor College of Medicine Program
Baylor College of Medicine
Texas Children's Hospital
Program Director: David G Pophal, MD
Baylor College of Medicine
Dept of Hematology-Oncology
One Baylor Plaza
Houston, TX 77030-3498
713 795-8200
Length: 2 Year(s) Total Positions: 10
Program ID: 327-48-21-037

University of Texas at Houston Program
University of Texas Medical School at Houston
Hermann Children's Hospital at Houston
University of Texas M D Anderson Cancer Center
Program Director: David G Tubergen, MD
The University of Texas M D Anderson Cancer Center
Div of Pediatrics Box 87
1515 Holcombe Blvd
Houston, TX 77030
713 792-0620
Length: 2 Year(s) Total Positions: 5
Program ID: 327-48-21-038

San Antonio
University of Texas Health Science Center at San Antonio Program
University of Texas Medical School at San Antonio
Santa Rosa Health Care Corporation
University Hospital-South Texas Medical Center
Program Director: Anthony J Infante, MD PhD
University of Texas Health Science Center
Dept of Ped Hematology/Oncology
7703 Floyd Curl Dr
San Antonio, TX 78224-7810
210 567-5265
Length: 2 Year(s) Total Positions: 2
Program ID: 327-48-21-047

Milwaukee
Medical College of Wisconsin Program
Medical College of Wisconsin Affiliated Hospitals Inc
Children's Hospital of Wisconsin
Program Director: J Paul Scott, MD
Section of Pediatric Hematology-Oncology
The Medical College of Wisconsin
8701 Watertown Plank Rd
Milwaukee, WI 53226-3548
414 937-3866
Length: 2 Year(s) Total Positions: 6
Program ID: 327-56-21-053

Utah
Salt Lake City
University of Utah Program
University of Utah Medical Center
Primary Children's Medical Center
Program Director: Richard T O'Brien, MD
Primary Children's Medical Center
100 N Medical Dr
Salt Lake City, UT 84113
801 588-2680
Length: 2 Year(s) Total Positions: 3
Program ID: 327-48-21-039

Washington
Seattle
University of Washington Program
University of Washington School of Medicine
Children's Hospital and Medical Center
Fred Hutchinson Cancer Research Center
Program Director: Irwin D Bernstein, MD
Fred Hutchinson Cancer Research Center
1100 Fairview Avenue N
Seattle, WA 98109
206 667-4886
Length: 2 Year(s) Total Positions: 11
Program ID: 327-54-21-040

Wisconsin
Madison
University of Wisconsin Program
University of Wisconsin Hospital and Clinics
Program Director: Paul S Gaynor, MD
University of Wisconsin Hospital and Clinics
H4/336 Clinical Sci Ctr
600 Highland Ave
Madison, WI 53792-4168
608 263-5554
Length: 2 Year(s) Total Positions: 1
Program ID: 327-56-21-069

* Updated information not provided.
Pediatric Nephrology (Pediatrics)

California

Loma Linda

Loma Linda University Program
Loma Linda University Medical Center
Program Director: Shobha Salmek, MD
Loma Linda University Medical Center
Dept of Pediatrics
West Hall
Loma Linda, CA 92354
909 534-8539
Length: 2 Year(s)
Program ID: 325-06-21-043

Los Angeles

Cedars-Sinai Medical Center Program
Cedars-Sinai Medical Center
Program Director: Stanley C Jordon, MD
Cedars-Sinai Medical Center
Dept of Pediatric Nephrology
8700 Beverly Blvd NT4323
Los Angeles, CA 90048
310 855-4747
Length: 2 Year(s) Total Positions: 2
Program ID: 325-06-21-052

Children's Hospital of Los Angeles Program
Children's Hospital of Los Angeles
Program Director: Ellis Lieberman, MD
Children's Hospital of Los Angeles
Div of Nephrology Box 40
PO Box 54700
Los Angeles, CA 90054-9700
213 868-2102
Length: 2 Year(s) Total Positions: 3
Program ID: 325-06-11-001

UCLA Medical Center Program
UCLA School of Medicine
UCLA Medical Center
Program Director: Robert B Ruttenberg, MD
Div of Pediatric Nephrology-UCLA Medical Center
Room AS-363 MOCB
10833 Le Conte Ave
Los Angeles, CA 90024-1752
310 268-6987
Length: 2 Year(s) Total Positions: 5
Program ID: 325-06-21-082

San Diego

University of California (San Diego) Program
University of California (San Diego) Medical Center
Children's Hospital and Health Center
Program Director: Stanley A Mandrera, MD
University of California (San Diego) Pediatrics 8444
200 W Arbor Dr
San Diego, CA 92103-8444
619 543-6038
Length: 2 Year(s) Total Positions: 1
Program ID: 325-06-21-047

San Francisco

University of California (San Francisco) Program
University of California (San Francisco) School of Medicine
University of California (San Francisco) Medical Center
Program Director: Anthony A Portale, MD
University of California (San Francisco) Pediatrics
533 Parnassus Ave RM U 585
San Francisco, CA 94118-0748
415 476-2423
Length: 2 Year(s) Total Positions: 1
Program ID: 325-06-11-022

Stanford

Stanford University Program
Stanford University Hospital
Lucile Packard Children's Hospital at Stanford
Program Director: Bruce M Tame, MD
Room G-306 Dept of Pediatrics
Stanford University School of Medicine
Stanford, CA 94305-6119
415 725-7933
Length: 2 Year(s) Total Positions: 3
Program ID: 325-06-21-029

Colorado

Denver

University of Colorado Program*
University of Colorado Health Sciences Center
Children's Hospital
Program Director: Douglas M Ford, MD
Children's Hospital
1666 E 16th Ave B 328
Denver, CO 80210
303 861-6263
Length: 2 Year(s) Total Positions: 2
Program ID: 325-06-01-063

District of Columbia

Washington

George Washington University Program
George Washington University School of Medicine
Children's National Medical Center
Program Director: Mary Ellen Turner, MD
Dept of Nephrology
Children's National Med Ctr
111 Michigan Ave NW
Washington, DC 20010
202 877-5658
Length: 2 Year(s) Total Positions: 3
Program ID: 325-06-21-023

Georgetown University Program
Georgetown University Hospital
Program Director: Pedro A Jose, MD PhD
Georgetown University Hospital
3800 Reservoir Rd NW
Washington, DC 20007
202 687-8677
Length: 2 Year(s) Total Positions: 2
Program ID: 325-06-21-005

Florida

Gainesville

University of Florida Program
University of Florida College of Medicine
Shands Hospital at the University of Florida
Program Director: George A Richard, MD
University of Florida College of Medicine
Div of Pediatric Nephrology
PO Box 190286 JHMRC
Gainesville, FL 32610-0286
904 392-4434
Length: 2 Year(s) Total Positions: 6
Program ID: 325-11-01-066

Miami

University of Miami-Jackson Memorial Medical Center Program*
University of Miami-Jackson Memorial Medical Center
Program Director: Gaston E Zilleruelo, MD
University of Miami-Jackson Memorial Medical Center
Div Pediatric Nephrology
PO Box 016990 (R-131)
Miami, FL 33101
305 595-6726
Length: 2 Year(s) Total Positions: 3
Program ID: 325-11-21-002

* Updated information not provided.
Illinois

Chicago

McGaw Medical Center of Northwestern University Program
Northwestern University Medical School
Children’s Memorial Medical Center

Program Director:
Craig B Langman, MD
Children’s Memorial Hospital Div of Pediatric Nephrology
2300 Children’s Plaza
Box 37
Chicago, IL 60614-3318
312 880-8226
Length: 2 Year(s)
Program ID: 328-16-21-000

Indiana

Indianapolis

Indiana University Medical Center Program

Indianapolis, IN 46202-6225
317 274-2083

Length: 2 Year(s) Total Positions: 2
Program ID: 328-17-21-007

Massachusetts

Boston

Harvard Medical School Program
Children’s Hospital

Program Director:
William E Harman, MD
Children’s Hospital
300 Longwood Ave
Boston, MA 02115
617 732-6128
Length: 2 Year(s) Total Positions: 7
Program ID: 328-24-11-010

Massachusetts General Hospital Program

Massachusetts General Hospital

Program Director:
Julie R Ingelfinger, MD
Massachusetts General Hospital Pediatric Nephrology
WACC 700
10 Parkman St
Boston, MA 02114
617 732-2808
Length: 2 Year(s) Total Positions: 3
Program ID: 328-24-11-048

Michigan

Ann Arbor

University of Michigan Program
University of Michigan Hospitals

Program Director:
William E Szymor, MD
University of Michigan Medical Center
L3003 Box 2807
1521 Simpson Rd E
Ann Arbor, MI 48109-0297
313 853-4210
Length: 2 Year(s) Total Positions: 3
Program ID: 328-25-21-004

Minnesota

Minneapolis

University of Minnesota Program
University of Minnesota Medical School
University of Minnesota Hospital and Clinics

Program Director:
Alfred F Michael, MD
Robert L Venner, MD
University of Minnesota Hospital and Clinics
440 Delaware St SE
Box 491 UMMC
Minneapolis, MN 55455
612 232-2113
Length: 2 Year(s) Total Positions: 5
Program ID: 328-26-21-005

Missouri

Kansas City

University of Missouri at Kansas City Program
University of Missouri-Kansas City School of Medicine
Children’s Mercy Hospital

Program Director:
Uri S Azen, MD
Section of Nephrology
Children’s Mercy Hospital
2401 Gillham Rd
Kansas City, MO 64108-8898
816 234-3010
Length: 2 Year(s) Total Positions: 3
Program ID: 328-28-11-038

New York

Bronx

Albert Einstein College of Medicine Program
Albert Einstein College of Medicine of Yeshiva University
Bronx Municipal Hospital Center
Montefiore Medical Center-Weiller Hospital

Program Director:
Adrian Spitzer, MD
Albert Einstein College of Medicine
1410 Pelham Pkwy S
Rm 212, RFK
Bronx, NY 10461
718 430-2511
Length: 2 Year(s) Total Positions: 6
Program ID: 328-35-21-011

* Updated information not provided.
Accredited Programs in Pediatric Nephrology (Pediatrics)

Brooklyn
SUNY Health Science Center at Brooklyn Program*
SUNY HSC at Brooklyn College of Medicine
Kings County Hospital Center
University Hospital SUNY at Brooklyn
Program Director:
Amir Turgany, MD
State University of New York Downstate Medical Center
450 Clarkson Ave Box 49
Brooklyn, NY 11203
718 570-1913
Length: 2 Year(s) Total Positions: 4
Program ID: 328-35-31-012

Buffalo
SUNY at Buffalo Graduate Medical-Dental Education Consortium Program
SUNY at Buffalo Grad Medical-Dental Education Consortium
Children's Hospital of Buffalo
Program Director:
Leonard G Feld, MD
Children's Hospital of Buffalo
219 Bryant St
Buffalo, NY 14222
716 678-7275
Length: 2 Year(s) Total Positions: 3
Program ID: 328-35-31-024

New York
Mount Sinai School of Medicine Program*
Mount Sinai School of Medicine
Mount Sinai Medical Center
Program Director:
Kenneth Y Luber, MD
Mt Sinai School of Medicine
One Gustave L Levy Pl
New York, NY 10029
212 644-6187
Length: 2 Year(s) Total Positions: 3
Program ID: 328-35-31-651

New York Hospital/Cornell Medical Center Program
New York Hospital
Program Director:
Valerie L Johnson, MD PhD
The New York Hospital
535 E 68th St Rm N-0008
New York, NY 10021
212 746-2000
Length: 2 Year(s) Total Positions: 3
Program ID: 328-35-31-069

Stony Brook
SUNY at Stony Brook Program
University Hospital SUNY at Stony Brook
Program Director:
Frederick J Kaskel, MD
Dept of Pediatrics
Div of Pediatric Nephrology
State University of New York
Stony Brook, NY 11794-4111
516 44-7884
Length: 2 Year(s) Total Positions: 2
Program ID: 328-35-31-083

Ohio
Cincinnati
University of Cincinnati Hospital Group Program*
Children's Hospital Medical Center
Program Director:
Paul T McEneny, MD
Children's Hospital Medical Center
3333 Burnet Ave
CHRP 6582
Cincinnati, OH 45229-3039
513 558-4531
Length: 2 Year(s) Total Positions: 4
Program ID: 328-38-31-010

Cleveland
Cleveland Clinic Foundation Program
Cleveland Clinic Foundation
Program Director:
Ben H Broughard, MD
Cleveland Clinic Foundation
9500 E 21st Ave A120
Dept of Pediatric Nephrology
Cleveland, OH 44195-5242
216 44-7609
Length: 2 Year(s) Total Positions: 1
Program ID: 328-35-31-049

Columbus
Ohio State University Program*
Ohio State University Medical Center
Children's Hospital
Program Director:
John D Mahan Jr, MD
Columbus Children's Hospital
700 Children's Dr
Columbus, OH 43206
614 722-4390
Length: 2 Year(s) Total Positions: 3
Program ID: 328-38-21-089

Tennessee
Memphis
University of Tennessee Program
University of Tennessee College of Medicine
LeBonheur Children's Medical Center
Program Director:
Robert J Wyatt, MD
Univ of Tennessee Memphis
CCRP Research Center
56 N Dunlap Room 301
Memphis, TN 38110
901 572-5360
Length: 2 Year(s) Total Positions: 2
Program ID: 328-47-31-018

Nashville
Vanderbilt University Program
Vanderbilt University Medical Center
Program Director:
Ikeunla Ichikawa, MD
Vanderbilt University
C-4204 Medical Center N
1161 21st Ave S
Nashville, TN 37232-2584
615 343-7416
Length: 2 Year(s) Total Positions: 1
Program ID: 328-47-31-044

Pennsylvania
Philadelphia
St Christopher's Hospital for Children Program
St Christopher's Hospital for Children
Program Director:
H Jorge Balaan, MD
St Christopher's Hospital for Children
Erie Ave at Front St
Sewickley, PA 15143
Philadelphia, PA 19134-1065
215 427-5100
Length: 2 Year(s) Total Positions: 2
Program ID: 328-41-13-017

University of Pennsylvania Program
Children's Hospital of Philadelphia
Program Director:
Bernard S Kaplan, MD BC
Div of Nephrology
The Children's Hospital of Philadelphia
34th St & Civic Ctr Blvd
Philadelphia, PA 19104
215 662-2440
Length: 2 Year(s) Total Positions: 3
Program ID: 328-41-31-025

Pittsburgh
University Health Center of Pittsburgh Program
University Health Center of Pittsburgh
Children's Hospital of Pittsburgh
Program Director:
Demetrios Ellis, MD
Children's Hospital of Pittsburgh
One Children's Pl
3705 Fifth Ave at De Soto St
Pittsburgh, PA 15213-3583
412 662-5182
Length: 2 Year(s) Total Positions: 2
Program ID: 328-41-31-036

* Updated information not provided.
Texas

Dallas

University of Texas Southwestern Medical School Program
University of Texas Southwestern Medical School
Children's Medical Center of Dallas

Program Director:
Michel G Baum, MD
University of Texas Southwestern Medical Center
Dept. of Pediatrics
5523 Harry Hines Blvd
Dallas, TX 75390-0063
214 458-3438
Length: 2 Year(s)  Total Positions: 5
Program ID: 328-48-21-019

Galveston

University of Texas Medical Branch Hospitals Program
University of Texas Medical Branch Hospitals

Program Director:
Luther B Travis, MD
University of Texas Medical Branch Div of Nephrology
Dept. of Pediatrics 8th Floor
Children's Hospital of UTMB
Galveston, TX 77555-0073
409 772-5228
Length: 2 Year(s)  Total Positions: 6
Program ID: 328-48-11-020

Houston

Baylor College of Medicine Program
Baylor College of Medicine
Texas Children's Hospital

Program Director:
Eileen R Brewer, MD
Baylor College of Medicine/Texas Children's Hospital
MC 5-5482
6621 Fannin St
Houston, TX 77030-2399
713 794-3800
Length: 2 Year(s)  Total Positions: 4
Program ID: 328-48-21-026

University of Texas at Houston Program
University of Texas Medical School at Houston
Herman M. Feigl Children's Hospital at Houston

Program Director:
Ronald J Portman, MD
University of Texas Medical School
6471 Fannin St
Houston, TX 77030
713 794-5300
Length: 2 Year(s)  Total Positions: 3
Program ID: 328-48-21-041

Virginia

Charlottesville

University of Virginia Program
University of Virginia Medical Center

Program Director:
Richard I Cohen, MD
University of Virginia Dept of Pediatrics
MBI Bldg Rm 3001
Charlottesville, VA 22908
804 982-9078
Length: 2 Year(s)  Total Positions: 3
Program ID: 328-48-11-027

Richmond

Medical College of Virginia/Virginia Commonwealth University Program
Medical College of Virginia/Virginia Commonwealth University
Medical College of Virginia Hospitals

Program Director:
James C Chan, MD
MC/VC/Virginia Commonwealth Univ
PO Box 90498
Richmond, VA 23298-0498
804 828-5608
Length: 2 Year(s)  Total Positions: 2
Program ID: 328-51-21-021

Pediatric Orthopaedics (Orthopaedic Surgery)

California

Downey

Rancho Los Amigos Hospital Program
Rancho Los Amigos Medical Center
University of California (Irvine) College of Medicine

Program Director:
M Mark Hofer, MD
Rancho Los Amigos Hospital
7601 E Imperial Hwy
Downey, CA 90242
310 940-7852
Length: 1 Year(s)  Total Positions: 1
Program ID: 265-05-81-008

San Diego

University of California (San Diego) Program
University of California (San Diego) Medical Center
Children's Hospital and Health Center

Program Director:
Denisa R Wengen, MD
Children's Hospital (San Diego)
3020 Children's Way
San Diego, CA 92123
619 558-5825
Length: 1 Year(s)  Total Positions: 2
Program ID: 265-05-21-009

Connecticut

Farmington

University of Connecticut Program
University of Connecticut School of Medicine
Newington Children's Hospital
Univ of Connecticut Health Center/John Dempsey Hospital

Program Director:
John V Banta, MD
Newington Children's Hospital
15 E Cedar St
Newington, CT 06111
203 657-5563
Length: 1 Year(s)  Total Positions: 7
Program ID: 265-05-21-020

Delaware

Wilmington

Alfred I DuPont Institute Program
Alfred I DuPont Institute of the Nemours Foundation

Program Director:
J R Bowen, MD
Alfred I DuPont Institute
PO Box 269
Wilmington, DE 19899
302 651-5613
Length: 1 Year(s)  Total Positions: 3
Program ID: 265-05-31-004

* Updated information not provided.

Graduate Medical Education Directory 671
District of Columbia

Washington

George Washington University Program
George Washington University School of Medicine
Children's National Medical Center
Program Director:
William W Robertson Jr, MD
Children's National Medical Center
111 Michigan Ave NW
Washington, DC 20010-2970
202 884-4063
Length: 1 Year(s)  Total Positions: 1
Program ID: 265-19-21-001

Florida

Jacksonville

University of Florida Health Science Center/ Jacksonville Program
Nemours Children's Clinic (UFHSC/J)
Program Director:
R. Jay Cummingham, MD
Nemours Children's Clinic
PO Box 5720
Jacksonville, FL 32247
904 390-5670
Length: 1 Year(s)  Total Positions: 1
Program ID: 265-11-24-026

Miami

University of Miami-Jackson Memorial Medical Center Program*
University of Miami-Jackson Memorial Medical Center
Miami Children's Hospital
Program Director:
Stephen J Stricker, MD
University of Miami-Jackson Memorial Medical Center
Dept of Orthopedics (D-27)
PO Box 010860
Miami, FL 33101
305 666-2415
Length: 1 Year(s)  Total Positions: 1
Program ID: 265-11-21-062

Tampa

Shriners Hospital for Crippled Children (Tampa) Program
Shriners Hospital for Crippled Children (Tampa)
Program Director:
Dennis P Grogan, MD
Shriners Hospital for Crippled Children
12902 N Pine Dr
Tampa, FL 33612-9489
813 972-2350
Length: 1 Year(s)
Program ID: 265-11-31-035

Georgia

Atlanta

Scottish Rite Children's Medical Center Program
Scottish Rite Children's Medical Center
Program Director:
Raymond T Morrissey, MD
Scottish Rite Children's Medical Center
5455 Meridian Mark Rd
Ste 400
Atlanta, GA 30342
404 250-2022
Length: 1 Year(s)  Total Positions: 2
Program ID: 265-12-21-022

Hawaii

Honolulu

University of Hawaii Program
University of Hawaii John A Burns School of Medicine
Shriners Hospital for Crippled Children (Honolulu)
Program Director:
Kent Alan Riehler, MD
Shriners Hospital
1310 Punahou St
Honolulu, HI 96826-1090
808 951-2299
Length: 1 Year(s)  Total Positions: 1
Program ID: 265-14-27-010

Illinois

Chicago

McGaw Medical Center of Northwestern University Program
Northwestern University Medical School
Children's Memorial Medical Center
Program Director:
Neriss C Carroll, MD
Children's Memorial Hospital
2300 Childrens Plaza #60
Chicago, IL 60614
312 850-4083
Length: 1 Year(s)  Total Positions: 1
Program ID: 265-10-21-019

Shriners Hospitals for Crippled Children (Chicago) Program
Shriners Hospital for Crippled Children (Chicago)
Program Director:
John P Lubicky, MD
Shriners Hospitals for Crippled Children
2311 N Oak Park Ave
Chicago, IL 60632-3932
312 622-5400
Length: 1 Year(s)  Total Positions: 1
Program ID: 265-16-21-027

Iowa

Iowa City

University of Iowa Hospitals and Clinics Program
University of Iowa Hospitals and Clinics
Program Director:
Stuart L Weinstein, MD
University of Iowa Hospitals and Clinics
Dept of Orthopedic Surgery
Carver Pavilion
Iowa City, IA 52242-1009
319 356-1572
Length: 1 Year(s)  Total Positions: 1
Program ID: 265-18-21-018

Kentucky

Lexington

Shriners Hospital for Crippled Children Program*
Shriners Hospital for Crippled Children (Lexington)
Program Director:
David B Stevens, MD
Shriners Hospitals for Crippled Children
1900 Richmond Rd
Lexington, KY 40502-1286
606 256-2101
Length: 1 Year(s)  Total Positions: 1
Program ID: 265-20-21-012

Louisiana

New Orleans

Louisiana State University Program
Louisiana State University School of Medicine
Children's Hospital
Program Director:
G D MacEwen, MD
Children's Hospital
206 Henry Clay Ave
New Orleans, LA 70118
504 886-1336
Length: 1 Year(s)  Total Positions: 1
Program ID: 265-21-24-016

Massachusetts

Boston

Children's Hospital Program
Children's Hospital
Program Director:
James R Kasner, MD
Children's Hospital
Dept of Orthopaedic Surgery
300 Longwood Ave
Boston, MA 02115
617 736-6756
Length: 1 Year(s)  Total Positions: 2
Program ID: 265-24-21-008

* Updated information not provided.
Accredited Programs in Pediatric Orthopaedics (Orthopaedic Surgery)

Harvard Medical School Program
Massachusetts General Hospital
Program Director:
David J Zaleske, MD
Massachusetts General Hospital
WAG 507
Boston, MA 02114
617 726-8523
Length: 1 Year(s) Total Positions: 1
Program ID: 265-24-21-014

Springfield
Shriners Hospital for Crippled Children (Springfield) Program
Shriners Hospital for Crippled Children (Springfield)
Program Director:
David Dziewiecki, MD
Shriners Hospital for Crippled Children
516 Carew St
Springfield, MA 01104-2396
413 737-3047
Length: 1 Year(s) Total Positions: 1
Program ID: 265-24-31-001

Missouri
St Louis
Shriners Hospital for Crippled Children Program
Shriners Hospital for Crippled Children (St Louis)
St Louis Children's Hospital
Program Director:
Perry J Schoenecker, MD
Shriners Hospital for Crippled Children
2001 S Lindbergh Blvd
St Louis, MO 63133-3097
314 432-3600
Length: 1 Year(s) Total Positions: 1
Program ID: 265-38-21-006

New York
Buffalo
SUNY at Buffalo Graduate Medical-Dental Education Consortium Program*
SUNY at Buffalo Grad Medical-Dental Education Consortium
Children's Hospital of Buffalo
Program Director:
Robert Gillespie, MD
Dept of Orthopaedics
SUNY at Buffalo
225 Dodge St
Buffalo, NY 14222-3016
716 878-7722
Length: 1 Year(s) Total Positions: 23
Program ID: 265-35-21-023

New York
Hospital for Joint Diseases Orthopaedic Institute Program*
Hospital for Joint Diseases Orthopaedic Institute
Program Director:
Wallace D Lehman, MD
Alfred D Grant, MD
Hospital for Joint Diseases Orthopaedic Institute
301 E 17th St
New York, N Y 10003
212 598-6003
Length: 1 Year(s)
Program ID: 265-35-12-007
Hospital for Special Surgery/Cornell Medical Center Program
Hospital for Special Surgery
Program Director:
Leon Brotz, MD
Hospital for Special Surgery
535 E 70th St
New York, NY 10021
212 606-1530
Length: 1 Year(s) Total Positions: 1
Program ID: 265-35-21-024

Oregon
Portland
Shriners Hospital for Crippled Children Program*
Shriners Hospital for Crippled Children (Portland)
Program Director:
Michael D Susman, MD
3101 SW Sam Jackson Park Rd
Portland, OR 97201
503 221-3404
Length: 1 Year(s) Total Positions: 5
Program ID: 265-40-21-005

Pennsylvania
Philadelphia
Temple University Program
Temple University Hospital
Shriners Hospital for Crippled Children (Philadelphia)
Program Director:
Randal E Betz, MD
Shriners Hospital for Crippled Children
8400 Roosevelt Blvd
Philadelphia, PA 19102
215 222-4600
Length: 1 Year(s) Total Positions: 1
Program ID: 265-41-21-028

Rhode Island
Providence
Brown University Program
Rhode Island Hospital
Program Director:
Michael G Ehrlich, MD
Rhode Island Hospital
595 Eddy St
Providence, RI 02903
401 444-6805
Length: 1 Year(s) Total Positions: 1
Program ID: 265-43-21-030

Tennessee
Memphis
University of Tennessee Program
University of Tennessee College of Medicine
Campbell Foundation-University of Tennessee
Program Director:
S Terry Canale, MD
James H Beatty, MD
University of Tennessee-Campbell Clinic
Dept of Pediatr Orthopaedic Surgery
860 Madison Ave
Memphis, TN 38109-3435
901 750-3974
Length: 1 Year(s) Total Positions: 1
Program ID: 265-47-21-034

Texas
Dallas
University of Texas Southwestern Medical School Program
University of Texas Southwestern Medical School
Dallas County Hospital District- Parkland Memorial Hospital
Texas Scottish Rite Hospital for Children
Program Director:
John A Herring, MD
Texas Scottish Rite Hospital for Children
2222 Wellborn Ave
Dallas, TX 75331-3993
214 621-3163
Length: 1 Year(s) Total Positions: 4
Program ID: 265-48-21-013

Houston
Baylor College of Medicine Program
Baylor College of Medicine
Harris County Hospital District-Ben Taub General Hospital
Shriners Hospital for Crippled Children (Houston)
Texas Children's Hospital
Program Director:
Charles T Stephenson, MD
Baylor College of Medicine
Dept of Orthopedic Surgery
6550 Fannin Ste 2835
Houston, TX 77030
713 790-3711
Length: 1 Year(s) Total Positions: 2
Program ID: 265-49-21-002

Utah
Salt Lake City
University of Utah Program
University of Utah Medical Center
Primary Children's Medical Center
Shriners Hospital for Crippled Children (Intermountain Unit)
Program Director:
Peter P Armstrong, MD
Shriners Hospitals for Crippled Children
Intermountain Unit
Fairfax Rd at Virginia St
Salt Lake City, UT 84103-4369
801 533-5307
Length: 1 Year(s) Total Positions: 2
Program ID: 265-49-31-015

* Updated information not provided.
Wisconsin
Milwaukee
Medical College of Wisconsin Program
Medical College of Wisconsin Affiliated Hospitals Inc
Children's Hospital of Wisconsin
Program Director:
Brian E. Black, MD
MCB Bldg Research Bldg
8701 W. Wisconsin Pl Suite 400
Milwaukee, WI 53226
414-266-4082
Length: 1 Year(s) Total Positions: 1
Program ID: 330-08-24-004

Pediatric Pulmonology (Pediatrics)

Alabama
Birmingham
University of Alabama Medical Center Program
University of Alabama Hospital
Children's Hospital of Alabama
Program Director:
Raymond K. Lyrene, MD
Children's Hospital of Alabama
1600 7th Avenue S
Ste 629 Ambulatory Care Ctr
Birmingham, AL 35233-4011
205 870-6583
Length: 2 Year(s) Total Positions: 5
Program ID: 330-01-21-001

Arizona
Tucson
University of Arizona Program
University of Arizona College of Medicine
Medical University Center
Program Director:
Wayne J. Morgan, MD
University of Arizona Health Science Center
1501 N Campbell Ave
Tucson, AZ 85724
520 626-7780
Length: 2 Year(s) Total Positions: 3
Program ID: 330-03-21-002

California
Long Beach
University of California (Irvine) Program*
Long Beach Memorial Medical Center
University of California (Irvine) Medical Center
Program Director:
Eliane Hohn, MD
Memorial Miller Children's Hospital
Div of Pediatric Pulmonology
2601 Atlantic Ave
Long Beach, CA 90801-1438
562-438-3030
Length: 2 Year(s) Total Positions: 1
Program ID: 330-05-21-003

Los Angeles
Children's Hospital of Los Angeles Program*
Children's Hospital of Los Angeles
Program Director:
Thomas G. Keenan, MD
Children's Hospital of Los Angeles
Div Neonatology & Ped Pulmonology
4650 Sunset Blvd #493
Los Angeles, CA 90027
213-988-2101
Length: 2 Year(s) Total Positions: 6
Program ID: 330-05-21-004

San Francisco
University of California (San Francisco) Program*
University of California (San Francisco) School of Medicine
University of California (San Francisco) Medical Center
Program Director:
Mark S. Flan, MD
Univ of California/San Francisco
Pediatric Pulmonary Div
3rd & Parnassus Rd M637
San Francisco, CA 94143-0110
415 476-3072
Length: 2 Year(s)
Program ID: 330-05-21-005

Stanford
Stanford University Program
Stanford University Hospital
Lucile Packard Children's Hospital at Stanford
Program Director:
Judy Palmier, MD
Lucile Packard Children's Hospital
Dir of Pediatrics
725 Welch Rd
Palo Alto, CA 94304
415 723-6191
Length: 2 Year(s) Total Positions: 1
Program ID: 330-05-21-045

Colorado
Denver
University of Colorado Program*
University of Colorado Health Sciences Center
Children's Hospital
National Jewish Ctr for Immunology and Respiratory Medicine
Program Director:
Gary L. Larsen, MD
National Jewish Center For Immunology and Respiratory Med
Div of Pediatric Pulmonary Medicine
1400 Jackson St, J112
Denver, CO 80206
303 315-1201
Length: 2 Year(s) Total Positions: 6
Program ID: 330-07-21-008

Connecticut
Farmington
University of Connecticut Program
University of Connecticut School of Medicine
UCMC/John Dempsey Hospital
Program Director:
Michelle M. Cloutier, MD
University of Connecticut Health Center
Dept of Pediatrics LM050 MC1627
235 Farmington Ave
Farmington, CT 06030-1827
203 679-2647
Length: 2 Year(s) Total Positions: 3
Program ID: 330-08-21-007

* Updated information not provided.
New Haven
Yale-New Haven Medical Center Program
Yale-New Haven Hospital
Program Director:
Gabriel G Haddad, MD
Yale University School of Medicine
585 Perry St
New Haven, CT 06510
203 784-4644
Length: 2 Year(s) Total Positions: 2
Program ID: 330-08-21-014

New Orleans
Tulane University Program
Tulane University School of Medicine
Tulane University Hospital and Clinics
Program Director:
Robert J. Beekman, MD
Tulane University School of Medicine
1430 Tulane Ave
New Orleans, LA 70112-2699
504 988-5801
Length: 2 Year(s) Total Positions: 4
Program ID: 330-21-21-012

New York
Ann Arbor
University of Michigan Program
University of Michigan Hospitals
Program Director:
Dietrich W Rooff, MD
University of Michigan Medical Center
1300 Washington Street
Ann Arbor, MI 48104-2200
313 763-4000
Length: 2 Year(s) Program ID: 330-21-21-010

Gainesville
Florida
University of Florida Program
University of Florida College of Medicine
Shands Hospital at the University of Florida
Program Director:
James M Sherman, MD
University of Florida College of Medicine
P.O. Box 100236
Gainesville, FL 32610-0236
904 392-4458
Length: 2 Year(s) Total Positions: 3
Program ID: 330-11-21-017

Indiana
Indianapolis
Indiana University Medical Center Program
Program Director:
Howard Eigen, MD
Indiana University Hospital
535 N Barnhill Dr
Indianapolis, IN 46202-5225
317 274-7308
Length: 2 Year(s) Total Positions: 2
Program ID: 330-17-21-016

Iowa
Iowa City
University of Iowa Hospitals and Clinics Program
Program Director:
Mack W. Weinberger, MD
University of Iowa Hospital
Pediatric Dept JPC
200 Hawkins Dr
Iowa City, IA 52242-1000
319 335-4465
Length: 2 Year(s) Total Positions: 3
Program ID: 330-18-21-013

Louisiana
Baltimore
Johns Hopkins University Program
Johns Hopkins University School of Medicine
Johns Hopkins Hospital
Program Director:
Gerald M Loughlin, MD
Johns Hopkins Hospital
600 N Wolfe St
Baltimore, MD 21205-2196
410 667-2035
Length: 2 Year(s) Total Positions: 6
Program ID: 330-23-21-015

Maryland
Massachusetts
Boston
Harvard Medical School Program
Children's Hospital
Program Director:
Mary Ellen B. Wohl, MD
Children's Hospital
300 Longwood Ave
Boston, MA 02115
617 736-7851
Length: 2 Year(s) Total Positions: 6
Program ID: 330-34-21-009

Michigan
Minneapolis
University of Minnesota Program
University of Minnesota Medical School
University of Minnesota Hospital and Clinics
Program Director:
Warren B. Kelegian, MD
University of Minnesota Hospital and Clinics
600 24th Ave SE
Minneapolis, MN 55455
612 343-3766
Length: 2 Year(s) Total Positions: 3
Program ID: 330-25-21-010

Missouri
St Louis
St Louis University Group of Hospitals Program
St Louis University School of Medicine
Cardinal Glennon Children's Hospital
Program Director:
Bruce A. Rubin, MD
Division of Pulmonary Medicine
Cardinal Glennon Children's Hospital
1465 S Grand Blvd
St Louis, MO 63104
314 233-4390
Length (Year(s)) Total Positions: 3
Program ID: 330-26-21-010

Massachusetts General Hospital Program
Program Director:
Daniel C. Shannon, MD
Massachusetts General Hospital
Piercy St
Boston, MA 02114
617 726-2676
Length: 2 Year(s) Total Positions: 3
Program ID: 330-24-21-036

Missouri
St Louis
St Louis University Group of Hospitals Program*
St Louis University School of Medicine
Cardinal Glennon Children's Hospital
Program Director:
Bruce A. Rubin, MD
Division of Pulmonary Medicine
Cardinal Glennon Children's Hospital
1465 S Grand Blvd
St Louis, MO 63104
314 233-4390
Length: 2 Year(s) Total Positions: 3
Program ID: 330-28-21-020

Washington University Program*
Washington University School of Medicine
St Louis Children's Hospital
Program Director:
James S. Kemp, MD
St Louis Children's Hospital
400 S Kingshighway Blvd
St Louis, MO 63110
314 454-3094
Length: 2 Year(s) Total Positions: 3
Program ID: 330-28-21-020

* Updated information not provided.
### New Mexico

#### Albuquerque

**University of New Mexico Program**

- University of New Mexico School of Medicine
- University Hospital
- **Program Director:** Bennie C. McWilliams Jr, MD
- University of New Mexico Hospital Ambulatory Care Bldg 5th Fl
- 2211 Lomas Blvd NE
- Albuquerque, NM 87113-5311
- 505 272-6623
- Length: 2 Year(s), Total Positions: 1
- Program ID: 330-34-21409

### New York

#### Brooklyn

**SUNY Health Science Center at Brooklyn**

- SUNY HSC at Brooklyn College of Medicine
- Kings County Hospital Center
- University Hospital-SUNY Health Science Center at Brooklyn
- **Program Director:** Phillip Steinman, MD
- State University of New York Health Science Ctr at Brooklyn
- Pediatric Dept Box 49
- 450 Clarkson Ave
- Brooklyn, NY 11203
- 718 270-2908
- Length: 2 Year(s), Total Positions: 1
- Program ID: 330-35-21401

#### New York (Mount Sinai School of Medicine Program)

- Mount Sinai School of Medicine
- Mount Sinai Medical Center
- **Program Director:** Meyer Katzen, MD
- Mount Sinai School of Medicine
- One Gustave L. Levy Pl
- New York, NY 10029
- 212 241-7988
- Length: 2 Year(s), Total Positions: 1
- Program ID: 330-35-32412

#### Presbyterian Hospital in the City of New York Program

- Presbyterian Hospital in the City of New York
- **Program Director:** Robert A. Mellins, MD
- Columbia University College of Physicians and Surgeons
- Pediatric Pulmonary Div BHS 101
- 630 W 168th St
- New York, NY 10032
- 212 305-6561
- Length: 2 Year(s), Total Positions: 1
- Program ID: 330-34-21410

### Rochester

**University of Rochester Program**

- Strong Memorial Hospital of the University of Rochester
- **Program Director:** John T. McRae, MD
- University of Rochester School of Medicine and Dentistry
- 601 Elmwood Ave
- Box 667 Rm 4-2232
- Rochester, NY 14642-8667
- 716 275-2464
- Length: 2 Year(s), Total Positions: 3
- Program ID: 330-35-31023

### Valhalla

**New York Medical College at Westchester County Medical Center Program**

- New York Medical College
- Westchester County Medical Center
- **Program Director:** Allen J. Donze, MD
- New York Medical College
- Munger Pavilion X Rm 106
- Valhalla, NY 10523
- 914 693-4025
- Length: 2 Year(s), Total Positions: 3
- Program ID: 330-35-31441

### North Carolina

#### Chapel Hill

**University of North Carolina Hospitals Program**

- University of North Carolina Hospitals
- **Program Director:** Margaret W. Leigh, MD
- University of North Carolina
- Dept of Pediatrics
- 635 Burnett-Womack Bldg 2220
- Chapel Hill, NC 27599-7220
- 919 966-1055
- Length: 2 Year(s), Total Positions: 4
- Program ID: 330-36-21019

### Durham

**Duke University Program**

- Duke University Medical Center
- **Program Director:** Roy D. Brown, MD
- Duke University Medical Center
- Pediatric Pulmonary Medicine
- 90 Box 2944
- Durham, NC 27710
- 919-684-3086
- Length: 2 Year(s)
- Program ID: 330-36-21044

### Ohio

#### Cincinnati

**University of Cincinnati Hospital Group Program**

- Children's Hospital Medical Center
- **Program Director:** Robert W. Wilmott, MD
- Children's Hospital Medical Center
- 3333 Burnet Ave
- Cincinnati, OH 45229-3039
- 513 559-5771
- Length: 2 Year(s), Total Positions: 6
- Program ID: 330-36-21406

### Cleveland

**Case Western Reserve University Program**

- University Hospitals of Cleveland
- **Program Director:** Pamela A. Davis, MD, PhD
- Pediatric Pulmonology
- Case Western Reserve University BRB 8
- 2100 Adelbert Road
- Cleveland, OH 44106-4048
- 216 368-4779
- Length: 2 Year(s), Total Positions: 2
- Program ID: 330-36-21027

### Columbus

**Ohio State University Program**

- Ohio State University Medical Center
- Children's Hospital
- **Program Director:** Kenan S. McCoy, MD
- Children's Hospital
- Dept of Pulmonary Medicine
- 700 Children's Dr
- Columbus, OH 43205
- 614 461-6819
- Length: 2 Year(s), Total Positions: 1
- Program ID: 330-36-21043

### Oregon

#### Portland

**Oregon Health Sciences University Program**

- Oregon Health Sciences University Hospital
- **Program Director:** Michael A. Wall, MD
- Oregon Health Science University, UH, Box 56
- 3181 SW Sam Jackson Park Rd
- Portland, OR 97201
- 503 494-8023
- Length: 2 Year(s), Total Positions: 1
- Program ID: 330-40-21025

*Updated information not provided.*
Pennsylvania

Philadelphia

St Christopher's Hospital for Children Program
St Christopher's Hospital for Children
Program Director: Howard B Panitch, MD
215 427-5183
Length: 2 Year(s) Total Positions: 4
Program ID: 330-41-31-033

University of Pennsylvania Program
Children's Hospital of Philadelphia
Program Director: Michael M Grunstein, MD PhD
Div of Pulmonary Med
Children's Hospital of Philadelphia
34th St & Civic Center Blvd
Philadelphia, PA 19104
215 893-3749
Length: 2 Year(s) Total Positions: 6
Program ID: 330-41-31-034

Pittsburgh

University Health Center of Pittsburgh Program
University Health Center of Pittsburgh
Children's Hospital of Pittsburgh
Program Director: Geoffrey Durand, MD
Children's Hospital of Pittsburgh
One Children's Pk
3705 Fifth Ave
Pittsburgh, PA 15213-3583
412 664-5620
Length: 2 Year(s) Total Positions: 4
Program ID: 330-41-21-035

Puerto Rico

San Juan

University of Puerto Rico Program
University of Puerto Rico School of Medicine
University Pediatric Hospital
Program Director: Jose R Rodriguez-Santana, MD
University Pediatric Hospital
PO Box 950677
San Juan, PR 00936-6567
809 783-4466
Length: 2 Year(s) Program ID: 330-42-21-038

Tennessee

Nashville

Vanderbilt University Program
Vanderbilt University Medical Center
Program Director: Thomas A Hazinski, MD
Div of Pediatric Pulmonary Medicine Dept of Pediatrics
8-0118 Medical Center North
Vanderbilt University
Nashville, TN 37232-2586
615 343-7617
Length: 2 Year(s) Total Positions: 1
Program ID: 330-47-21-087

Texas

Houston

Baylor College of Medicine Program
Baylor College of Medicine
Texas Children's Hospital
Program Director: Dan K Selhuber, MD
Dept of Pediatrics
Baylor College of Medicine
One Baylor Plaza
Houston, TX 77030-2599
713 770-3309
Length: 2 Year(s) Total Positions: 6
Program ID: 330-48-21-029

Utah

Salt Lake City

University of Utah Program
University of Utah Medical Center
Primary Children's Medical Center
Program Director: Dennis W Nelson, MD
University of Utah Medical Center
50 N Medical Dr
Salt Lake City, UT 84132
801 581-2410
Length: 2 Year(s) Total Positions: 2
Program ID: 330-49-21-032

Washington

Seattle

University of Washington Program
University of Washington School of Medicine
Children's Hospital and Medical Center
University of Washington Medical Center
Program Director: Gregory J Redding, MD
Div of Neonatal & Respiratory Diseases
University of Washington
Mail Stop RD-29
Seattle, WA 98195
206 543-3200
Length: 2 Year(s) Total Positions: 4
Program ID: 330-64-21-031

Wisconsin

Madison

University of Wisconsin Program
University of Wisconsin Hospital and Clinics
Program Director: Christopher G Green, MD
University of Wisconsin Hospital & Clinics
Room H-402E 4108 CSC
600 Highland Ave
Madison, WI 53792-4801
608 262-5855
Length: 2 Year(s) Total Positions: 2
Program ID: 330-66-21-030

*Updated information not provided.*
Accredited Programs in Pediatric Radiology (Radiology-Diagnostic)

Alabama

Birmingham

University of Alabama Medical Center Program*  
University of Alabama Hospital  
Program Director:  
Stuart A Royal, MD  
Dept of Pediatric Radiology  
1600 Seventh Ave S  35233-3954  
Birmingham, AL 35233  
205 324-5850  
Length: 1 Year(s)  
Program ID: 424-81-21-004

Arkansas

Little Rock

University of Arkansas for Medical Sciences Program  
University of Arkansas for Medical Sciences  
Program Director:  
Theodore Niederz, MD  
Arkansas Children's Hospital  
800 Marshall St  
Little Rock, AR 72205-3611  
501 500-4911  
Length: 1 Year(s)  
Program ID: 424-01-21-005

California

Loma Linda

Loma Linda University Program  
Loma Linda University  
Program Director:  
Lennell W Young, MD  
Loma Linda University  
Dept of Radiology  
11234 Anderson St  
Loma Linda, CA 92354  
909 824-4288  
Length: 1 Year(s)  
Program ID: 424-01-21-449

Los Angeles

Children's Hospital of Los Angeles Program  
Children's Hospital of Los Angeles  
Program Director:  
Beverly P Wood, MD  
Children's Hospital Los Angeles  
Dept of Radiology  
4505 Sunset Blvd MS881  
Los Angeles, CA 90027  
213 639-5866  
Length: 1 Year(s)  
Program ID: 424-01-21-603

Connecticut

New Haven

Yale-New Haven Medical Center Program  
Yale-New Haven Hospital  
Program Director:  
Marc S Keller, MD  
Children's Hospital at Yale-New Haven Dept of Pediatric Imaging  
33 York St  
New Haven, CT 06510  
203 785-3569  
Length: 1 Year(s)  
Program ID: 424-01-21-040

District of Columbia

Washington

George Washington University Program  
George Washington University School of Medicine  
Children's National Medical Center  
Program Director:  
David C Kostner, MD  
Dept of Diagnostic Imaging & Radiology  
Children's National Medical Center  
311 11th St NW  
Washington, DC 20010-9700  
202 884-5049  
Length: 1 Year(s)  
Program ID: 424-10-21-024

Florida

Gainesville

University of Florida Program  
University of Florida College of Medicine  
Shands Hospital at the University of Florida  
Program Director:  
Jonathan L Williams, MD  
University of Florida  
Dept of Radiology  
Box 100374  
Gainesville, FL 32610-0374  
904 386-1110  
Length: 1 Year(s)  
Program ID: 424-01-21-044

Miami

Miami Children's Hospital Program  
Miami Children's Hospital  
Program Director:  
D H Altman, MD  
Miami Children's Hospital  
3100 SW 62nd Ave  
Miami, FL 33155-3059  
305 660-6601  
Length: 1 Year(s)  
Program ID: 424-11-21-025

* Updated information not provided.

678 Graduate Medical Education Directory
University of Miami-Jackson Memorial Medical Center Program
University of Miami-Jackson Memorial Medical Center
Program Director:
George E Abenour, MD
University of Miami Jackson Medical Center
Dept of Radiology
1611 NW 12th Ave
Miami, FL 33136
305-656-6804
Length: 1 Year(s) Total Positions: 1
Program ID: 424-11-21-008

Georgia

Atlanta

Emory University Program
Emory University School of Medicine
Huntsville, Eastview Hospital for Children
Program Director:
Stephanie R jeans, MD
Eastview Children's Hospital at Emory University
1400 Clifton Rd NE
Atlanta, GA 30322-1101
404-222-6281
Length: 1 Year(s) Total Positions: 2
Program ID: 424-12-21-036

Illinois

Chicago

McCaw Medical Center of Northwestern University Program
Northwestern University Medical School
Children's Memorial Medical Center
Program Director:
Andrew K Potamian, MD
Children's Memorial Hospital
Dept of Radiology #9
2300 Children's Plaza
Chicago, IL 60614
312-890-3520
Length: 1 Year(s) Total Positions: 2
Program ID: 424-19-21-017

Indiana

Indianapolis

Indiana University Medical Center Program
Indiana University Medical Center
Riley Hospital for Children
Program Director:
Mervyn P Cohen, MD
James Whitcomb Riley Hospital for Children
Dept of Radiology GM 1563
701 Barnhill Dr
Indianapolis, IN 46202-5200
317-274-3561
Length: 1 Year(s) Total Positions: 2
Program ID: 424-17-21-007

Iowa

Iowa City

University of Iowa Hospitals and Clinics Program
University of Iowa Hospitals and Clinics
Program Director:
Yutaka Sato, MD
University of Iowa Hospitals and Clinics
Dept of Radiology
200 Hawkins Dr
Iowa City, IA 52242-1099
319-356-2208
Length: 1 Year(s) Total Positions: 2
Program ID: 424-18-21-008

Kentucky

Louisville

Kosair Children's Hospital Program
Kosair Children's Hospital (Alliant Health System)
Program Director:
L T Shearer, MD
Kosair Children's Hospital
Pediatric Radiology Dept
PO Box 30370
Louisville, KY 40223-5070
602-266-1171
Length: 1 Year(s) Total Positions: 2
Program ID: 424-20-21-020

Louisiana

New Orleans

Children's Hospital Program
Children's Hospital
Program Director:
Joseph G Smith, MD
Children's Hospital
200 Henry Clay Ave
New Orleans, LA 70118-5709
504-896-4666
Length: 1 Year(s) Total Positions: 1
Program ID: 424-21-21-047

Massachusetts

Boston

Children's Hospital Program
Children's Hospital
Program Director:
Donald R Kirks, MD
300 Longwood Ave
Boston, MA 02115
417-735-6921
Length: 1 Year(s) Total Positions: 10
Program ID: 424-22-21-027

Michigan

Ann Arbor

University of Michigan Program
University of Michigan Hospitals
Program Director:
A J Hernandez, MD
University of Michigan Medical Center
1560 E Medical Center Dr
Ann Arbor, MI 48109-4052
313-763-2670
Length: 1 Year(s) Total Positions: 1
Program ID: 424-23-21-018

Minnesota

Minneapolis

University of Minnesota Program
University of Minnesota Medical School
Children's Health Care-Minneapolis
University of Minnesota Hospital and Clinic
Program Director:
Becky L Carpenter, MD
University of Minnesota Hospital
Box 292 UHMC
440 Delaware Ave SE
Minneapolis, MN 55455
612-286-5303
Length: 1 Year(s) Total Positions: 2
Program ID: 424-24-21-036

Maryland

Baltimore

Johns Hopkins University Program
Johns Hopkins University School of Medicine
Johns Hopkins Hospital
Program Director:
Jane E Benson, MD
The Johns Hopkins Hospital
Dept of Radiology
600 N Wolfe St
Baltimore, MD 21287
410-955-5111
Length: 1 Year(s) Total Positions: 2
Program ID: 424-25-21-038

* Updated information not provided.
Missouri

Kansas City

University of Missouri at Kansas City Program
University of Missouri-Kansas City School of Medicine
Children's Mercy Hospital
Program Director: Joy A. Johnson, MD
Dept. of Radiology
Children's Mercy Hospital
2401 Gillham Rd
Kansas City, MO 64108-4608
816 234-3373
Length: 1 Year(s)  Total Positions: 1
Program ID: 424-28-21-028

St Louis

St Louis University Group of Hospitals Program
St Louis University School of Medicine
Cardinal Glennon Children's Hospital
Program Director: E. B. Gwadowski, MD
Cardinal Glennon Children's Hospital
1465 S Grand Blvd
St Louis, MO 63104
314 577-5654
Length: 1 Year(s)  Total Positions: 2
Program ID: 424-28-21-041

Washington University Program
Barnes Hospital
Mallinckrodt Institute of Radiology
Program Director: William H. Mcclanahan, MD
Mallinckrodt Institute of Radiology
510 S Kingshighway Blvd
St Louis, MO 63110
314 454-0229
Length: 1 Year(s)
Program ID: 424-28-21-089

New York

Buffalo

Children's Hospital of Buffalo Program
Children's Hospital of Buffalo
Program Director: Gerald P. Kuhn, MD
Children's Hospital of Buffalo
Dept of Radiology
219 Bryant St
Buffalo, NY 14222-2069
716 878-7525
Length: 1 Year(s)  Total Positions: 2
Program ID: 424-28-21-029

New Hyde Park

Albert Einstein College of Medicine at Long Island Jewish Medical Center Program
Long Island Jewish Medical Center
Program Director: John C. Leonidas, MD
Long Island Jewish Medical Center
Dept of Radiology
New Hyde Park, NY 11040
718 470-3404
Length: 1 Year(s)  Total Positions: 1
Program ID: 424-36-51010

New York

Mount Sinai School of Medicine Program*
Mount Sinai School of Medicine
Mount Sinai Medical Center
Program Director: Karen Norton, MD
Mount Sinai Hospital
Box 1234
New York, NY 10029
212 648-7143
Length: 1 Year(s)
Program ID: 424-35-21-051

New York University Medical Center Program
New York University Medical Center
Bellevue Hospital Center
Program Director: Nancy Geneser, MD
New York University Medical Center
Dept of Radiology
560 First Ave
New York, NY 10016
212 263-5802
Length: 1 Year(s)  Total Positions: 1
Program ID: 424-35-21-038

Presbyterian Hospital in the City of New York Program
Presbyterian Hospital in the City of New York
Program Director: Walter E. Berdoz, MD
Babies Hospital
3658 Broadway
New York, NY 10032
212 365-6868
Length: 1 Year(s)
Program ID: 424-35-21-011

Rochester

University of Rochester Program
Strong Memorial Hospital of the University of Rochester
Program Director: Margaret Macaul, MD
Strong Memorial Hospital
601 Elmwood Ave
Rochester, NY 14642-8648
716 275-5100
Length: 1 Year(s)  Total Positions: 1
Program ID: 424-35-21-012

North Carolina

Chapel Hill

University of North Carolina Hospitals Program
University of North Carolina Hospitals
Program Director: David F. Merten, MD
University of North Carolina
Dept of Radiology
CB #7510
Chapel Hill, NC 27599-7510
919 966-2006
Length: 1 Year(s)  Total Positions: 1
Program ID: 424-36-31048

Durham

Duke University Program
Duke University Medical Center
Program Director: George S. Hirst III, MD
Dept of Radiology
Duke University Medical Center
Box 3508
Durham, NC 27710
919 684-3711
Length: 1 Year(s)  Total Positions: 1
Program ID: 424-36-21-001

Winston-Salem

Bowman Gray School of Medicine Program
North Carolina Baptist Hospital
Program Director: Thomas E. Sumner, MD
Bowman Gray School of Medicine
Medical Center Blvd
Winston-Salem, NC 27157-1098
336 716-2403
Length: 1 Year(s)  Total Positions: 1
Program ID: 424-36-31-043

Ohio

Akron

Children's Hospital Medical Center of Akron/NEOUCOM Program
Children's Hospital Medical Center of Akron
Program Director: Godfrey Galas, MD
Children's Hospital Medical Center of Akron
One Perrine Sq
Akron, OH 44308
330 376-8778
Length: 1 Year(s)  Total Positions: 1
Program ID: 424-35-21-050

Cincinnati

University of Cincinnati Hospital Group Program
Children's Hospital Medical Center
Program Director: Janet L. Strife, MD
Dept of Radiology
Children's Hospital Medical Center
3333 Burnet Ave
Cincinnati, OH 45229-0930
513 559-9703
Length: 1 Year(s)  Total Positions: 8
Program ID: 424-35-21-001

Cleveland

Cleveland Clinic Foundation Program
Cleveland Clinic Foundation
Children's Hospital Medical Center
Program Director: Martin J. Grosek, MD
Cleveland Clinic Foundation
9500 Euclid Ave TV22
Dept of Pediatric Radiology
Cleveland, OH 44195-5242
216 444-5990
Length: 1 Year(s)  Total Positions: 1
Program ID: 424-35-21-050

* Updated information not provided.
Pennsylvania

Philadelphia
St Christopher's Hospital for Children Program
St Christopher's Hospital for Children
Program Director: Eric N Faerber, MD
St Christopher's Hospital for Children
Erin Bee at Front St
Philadelphia, PA 19134-2096
215 427-5258
Length: 1 Year(s) Total Positions: 2
Program ID: 424-41-009

University of Pennsylvania Program
Children's Hospital of Philadelphia
Program Director: Sandra S Kramer, MD
Dept of Radiology
Children's Hosp of Philadelphia
24th St & Civic Ctr Blvd
Philadelphia, PA 19104-4399
215 600-2075
Length: 1 Year(s) Total Positions: 3
Program ID: 424-41-21-032

Pittsburgh

University Health Center of Pittsburgh Program
University Health Center of Pittsburgh
Children's Hospital of Pittsburgh
Program Director: Richard A Tewein, MD
Children's Hospital of Pittsburgh
3705 Fifth Ave.
Pittsburgh, PA 15213-2688
412 855-5510
Length: 1 Year(s) Program ID: 424-41-21-002

South Carolina

Charleston

Medical University of South Carolina Program* Medical University of South Carolina College of Medicine
Charleston Memorial Hospital
MUSC Medical Center
Program Director: Roderick J Macpherson, MD
Medical University Hospital
171 Ashley Ave
Charleston, SC 29425
803 796-7179
Length: 1 Year(s) Program ID: 424-45-21-046

Tennessee

Memphis

University of Tennessee Program*
University of Tennessee College of Medicine
Le Bonheur Children's Medical Center
St Jude Children's Research Hospital
Program Director: Barry Gerald, MD
Barry D Pletcher, MD
University of Tennessee College of Medicine
Dept of Radiology
800 Madison Ave
Memphis, TN 38163
901 522-3195
Length: 1 Year(s) Program ID: 424-47-21-018

Nashville

Vanderbilt University Program
Vanderbilt University Medical Center
Program Director: Richard M New, MD
Vanderbilt University Medical Center
Dept of Radiology
D 1130 MCN
Nashville, TN 37232-2675
615-343-2388
Length: 1 Year(s) Program ID: 424-47-21-021

Texas

Dallas

University of Texas Southwestern Medical School Program
University of Texas Southwestern Medical School
Children's Medical Center of Dallas
Dallas County Hospital District-Parkland Memorial Hospital
Program Director: Nancy Sollins, MD
Dept of Radiology
Children's Medical Center
5035 Motor St
Dallas, TX 75335
214 648-2980
Length: 1 Year(s) Total Positions: 3
Program ID: 424-48-21-015

Galveston

University of Texas Medical Branch Hospitals Program*
University of Texas Medical Branch Hospitals
Program Director: L E Swischuk, MD
University of Texas Medical Branch
Dept of Radiology G 60
Galveston, TX 77555-0700
409 766-3096
Length: 1 Year(s) Program ID: 424-48-21-014

Houston

Baylor College of Medicine Program*
Baylor College of Medicine
Texas Children's Hospital
Program Director: Edward B Singleton, MD
Texas Children's Hospital
Diagnostic Imaging
6521 Fannin MC 3-2531
Houston, TX 77030-2539
713 798-5324
Length: 1 Year(s) Total Positions: 2
Program ID: 424-48-21-016

Washington

Seattle

University of Washington Program
University of Washington School of Medicine
Children's Hospital and Medical Center
Program Director: C Benjamin Graham, MD
Children's Hospital and Medical Center
Dept of Radiology CHH-89
PO Box 5971
Seattle, WA 98105-0371
206 598-3134
Length: 1 Year(s) Total Positions: 3
Program ID: 424-44-21-093

Wisconsin

Milwaukee

Medical College of Wisconsin Program
Medical College of Wisconsin Affiliated Hospitals Inc
Children's Hospital of Wisconsin
John F. Done Hospital
Program Director: John R St, MD
Children's Hospital of Wisconsin
Dept of Radiology MS #72
4009 W Wisconsin Ave
Milwaukee, WI 53226
414 266-3110
Length: 1 Year(s) Total Positions: 2
Program ID: 424-56-21-034

* Updated information not provided.
Pediatric Surgery (Surgery-General)

Alabama

Birmingham

University of Alabama Medical Center Program*
University of Alabama Hospital Children's Hospital of Alabama
Program Director:
Keith G. Geoghegan, MD
Div of Pediatric Surgery
1600 Seventh Ave S ACC 306
Birmingham, AL 35233
205 938-5968
Length: 2 Year(s)
Program ID: 445-01-21-032

Arkansas

Little Rock

University of Arkansas for Medical Sciences Program
University of Arkansas College of Medicine
Arkansas Children's Hospital
Program Director:
Samuel D'Smith, MD
Arkansas Children's Hospital
Dept of Pediatric Surgery
800 Marshall St
Little Rock, AR 72206-3591
501 320-1447
Length: 2 Year(s) Total Positions: 2
Program ID: 445-04-21-038

California

Los Angeles

Children's Hospital of Los Angeles Program
Children's Hospital of Los Angeles
Program Director:
Kathryn D. Anderson, MD
Children's Hospital Los Angeles
4660 Sunset Blvd Box 72
Los Angeles, CA 90027-8616
213 668-2194
Length: 2 Year(s) Total Positions: 2
Program ID: 445-05-21-001

Colorado

Denver

University of Colorado Program
University of Colorado Health Sciences Center
Children's Hospital
Program Director:
John R Lilly, MD
Dept of Pediatric Surgery
The Children's Hospital
1800 Ogden St b 332
Denver, CO 80218
303 861-6536
Length: 2 Year(s) Total Positions: 1
Program ID: 445-07-21-027

Connecticut

New Haven

Yale-New Haven Medical Center Program*
Yale-New Haven Hospital
Program Director:
Robert J. Touloukian, MD
Yale Univ Sch of Med Dept of Surgery
333 Cedar St
PO Box 4533
New Haven, CT 06510
203 785-2301
Length: 2 Year(s)
Program ID: 445-08-21-030

District of Columbia

Washington

Children's National Medical Center Program
Children's National Medical Center
Program Director:
Marshall Z. Schwartz, MD
Children's National Medical Center
111 Michigan Ave NW
Washington, DC 20010-2970
202 884-2161
Length: 2 Year(s) Total Positions: 2
Program ID: 445-10-21-015

Illinois

Chicago

McGaw Medical Center of Northwestern University Program
Northwestern University Medical School
Children's Memorial Medical Center
Program Director:
John G. Raffensperger, MD
Children's Memorial Hospital
2800 Children's Plaza #83
Chicago, IL 60614
312 956-4395
Length: 2 Year(s) Total Positions: 2
Program ID: 445-15-21-002

University of Chicago Program
Wright Children's Hospital at the University of Chicago
Lutheran General Hospital
Program Director:
Robert M. Arensman, MD
Wright Children's Hospital
3100 S. Paulina St MC4062
5841 S. Maryland Ave
Chicago, IL 60637
312 734-6175
Length: 2 Year(s) Total Positions: 1
Program ID: 445-16-21-026

Indiana

Indianapolis

Indiana University Medical Center Program
Indiana University Medical Center
William N. Winship Memorial Hospital
Program Director:
Jay L. Cofield, MD
James Whitcomb Riley Hospital for Children
702 Barnhill Dr
Indianapolis, IN 46202-5200
317 274-4081
Length: 2 Year(s) Total Positions: 2
Program ID: 445-17-21-019

Maryland

Baltimore

Johns Hopkins University Program
Johns Hopkins University School of Medicine
Johns Hopkins Hospital
University of Maryland Medical System
Program Director:
Paul C. Montgomery, MD
Johns Hopkins Hospital
Dept of Pediatric Surgery
600 N Wolfe St CMSC 113
Baltimore, MD 21287-8476
410 955-6256
Length: 2 Year(s) Total Positions: 2
Program ID: 445-23-21-003

Massachusetts

Boston

Children's Hospital Program
Children's Hospital
Program Director:
W. Irby Hendren, MD
Children's Hospital
300 Longwood Ave
Boston, MA 02115
617 735-4001
Length: 2 Year(s) Total Positions: 2
Program ID: 445-24-21-016

New England Medical Center Hospitals Program
New England Medical Center Hospitals
Program Director:
Burton B. Harris, MD
New England Medical Center
750 Washington St
Boston, MA 02111-1526
617 956-6025
Length: 2 Year(s) Total Positions: 1
Program ID: 445-24-21-023

* Updated information not provided.
Michigan

Ann Arbor

University of Michigan Program
University of Michigan Hospitals
Program Director:
Arnold G Coran, MD
Office of Surgical Educ
University of Michigan
1500 E Medical Center Dr
Ann Arbor, MI 48109-0042
313 936-5733

Length: 2 Year(s) Total Positions: 2
Program ID: 445-25-51-018

Detroit

Wayne State University/Detroit Medical Center Program
Wayne State University School of Medicine
Children's Hospital of Michigan
Program Director:
Michael D Klein, MD
Children's Hospital of Michigan
3001 Beaubien Blvd
Detroit, MI 48201-2196
313 745-5840
Length: 2 Year(s) Total Positions: 2
Program ID: 445-25-11-094

Missouri

Kansas City

University of Missouri at Kansas City Program
University of Missouri-Kansas City School of Medicine
Children's Mercy Hospital
Program Director:
Keith W Ashcraft, MD
Children's Mercy Hospital
Dept of Surgery
2401 Gillham Rd
Kansas City, MO 64108-4698
816 234-5575
Length: 2 Year(s) Total Positions: 2
Program ID: 445-25-11-005

St Louis

St Louis University Group of Hospitals Program
St Louis University School of Medicine
Cardinal Glennon Children's Hospita*
Program Director:
Thomas R Weber, MD
St Louis Univ Med Ctr
Dept of Pediatric Surgery
1465 S Grand Blvd
St Louis, MO 63104
314 577-5629
Length: 2 Year(s) Total Positions: 2
Program ID: 445-28-21-029

New York

Brooklyn

SUNY Health Science Center at Brooklyn Program
SUNY HSC at Brooklyn College of Medicine
Kings County Hospital Center
University Hospital-SUNY Health Science Center at Brooklyn
Program Director:
Marc I Ramenofsky, MD
SUNY HSC Ctr at Brooklyn
460 Clarkson Ave
Brooklyn, NY 11203-2098
718 270-3308
Length: 2 Year(s) Total Positions: 1
Program ID: 445-35-11-007

Buffalo

SUNY at Buffalo Graduate Medical-Dental Education Consortium Program
SUNY at Buffalo 3rd Medical-Dental Education Consortium
Children's Hospital of Buffalo
Program Director:
Richard G Lataczuk, MD
Children's Hospital of Buffalo
219 Bryant St
Buffalo, NY 14222
716 878-7780
Length: 2 Year(s) Total Positions: 2
Program ID: 445-35-21-017

New York

Presbyterian Hospital in the City of New York Program
Presbyterian Hospital in the City of New York
Program Director:
R Peter Altman, MD
Presbyterian Hospital in the City of New York Babies Hosp
860 Broadway Bkm 264 N
New York, NY 10002-3764
212 363-5550
Length: 2 Year(s) Total Positions: 2
Program ID: 445-35-11-006

Ohio

Cincinnati

Children's Hospital Medical Center Program
Children's Hospital Medical Center
Program Director:
Moritz M Ziegler, MD
Pediatric Surgery
Children's Hospital Medical Center
3333 Burnet Ave
Cincinnati, OH 45229-3039
513 559-4371
Length: 2 Year(s) Total Positions: 2
Program ID: 445-35-11-008

Columbus

Ohio State University Program*
Ohio State University Medical Center
Children's Hospital
Program Director:
Donald R Gooney, MD
Columbus Children's Hospital
700 Children's Dr
Columbus, OH 43205
614 461-2312
Length: 2 Year(s)
Program ID: 445-38-21-012

Oklahoma

Oklahoma City

University of Oklahoma Health Sciences Center Program
University of Oklahoma College of Medicine-Oklahoma City
Children's Hospital of Oklahoma
Program Director:
William P Tunell, MD
Children's Hospital of Oklahoma
PO Box 26007
Oklahoma City, OK 73126
405 271-5622
Length: 2 Year(s) Total Positions: 1
Program ID: 445-39-11-009

Pennsylvania

Philadelphia

St Christopher's Hospital for Children Program
St Christopher's Hospital for Children
Program Director:
William H Weingrad, MD
St Christopher's Hospital for Children
304 Christopher Dr
Philadelphia, PA 19134-1065
215 475-5283
Length: 2 Year(s) Total Positions: 2
Program ID: 445-41-21-010

University of Pennsylvania Program
Children's Hospital of Philadelphia
Program Director:
James A O'Neill Jr, MD
Children's Hospital of Philadelphia
One Children's Ctr
36th St & Civic Center Blvd
Philadelphia, PA 19104-4359
215 660-2727
Length: 2 Year(s) Total Positions: 2
Program ID: 445-41-11-014

Pittsburgh

University Health Center of Pittsburgh Program
University Health Center of Pittsburgh
Children's Hospital of Pittsburgh
Program Director:
Eugene S Werner, MD
Children's Hospital of Pittsburgh
3705 Fifth Ave at DeSoto St
Pittsburgh, PA 15213-2383
412 600-5943
Length: 2 Year(s) Total Positions: 2
Program ID: 445-41-11-013

* Updated information not provided.

Graduate Medical Education Directory 683
Tennessee
Memphis
University of Tennessee Program
University of Tennessee College of Medicine
Le Bonheur Children’s Medical Center
St Jude Children’s Research Hospital
University of Tennessee Medical Center
Program Director:
Thomas E. Lobe, MD
University of Tennessee Memphis
Division of Pediatric Surgery
777 Washington Ave. Suite 9219
Memphis, TN 38115
901 572-3900
Length: 2 Year(s) Total Positions: 2
Program ID: 445-47-31-025

Texas
Houston
Baylor College of Medicine Program
Baylor College of Medicine
Program Director:
William J. Polkoway, MD
Baylor College of Medicine Texas Children’s Hospital
Clinical Care Corp #245 MC 3-2225
6631 Fannin
Houston, TX 77030
713 770-3146
Length: 2 Year(s) Total Positions: 2
Program ID: 445-48-21-020

Washington
Seattle
Children’s Hospital and Medical Center Program
Children’s Hospital and Medical Center
Program Director:
David Tapper, MD
Children’s Hospital and Medical Center
4800 Sand Point Way NE
Seattle, WA 98105-5571
206 392-2000
Length: 2 Year(s) Total Positions: 2
Program ID: 445-04-11-011

Pediatric Urology (Urology)

California
San Diego
University of California (San Diego) Program
University of California (San Diego) Medical Center
Children’s Hospital and Health Center
Program Director:
George W. Kaplan, MD
University of California Div of Pediatric Urology
7630 Frist St.
Suite 8407
San Diego, CA 92123
619 775-6067
Total Positions: 1
Program ID: 485-65-21-004

Massachusetts
Boston
Harvard Medical School Program*
Children’s Hospital
Program Director:
Alan B. Retik, MD
Div of Urology
Children’s Hospital
300 Longwood Ave
Boston, MA 02115
617 735-7796
Length: 1 Year(s)
Program ID: 485-34-21-006

Michigan
Ann Arbor
University of Michigan Program*
University of Michigan Hospitals
Program Director:
David A. Bloomi, MD
1500 E Medical Center Dr
62225 Box 0330
Ann Arbor, MI 48109-0330
313 853-5755
Length: 1 Year(s)
Program ID: 485-25-21-001

Minnesota
Rochester
Mayo Graduate School of Medicine Program
Mayo Graduate School of Medicine-Mayo Foundation
St Mary's Hospital of Rochester
Program Director:
Stephen A. Kramer, MD
Mayo Clin
Dept of Urology
200 First St SW
Rochester, MN 55905
507 284-3249
Length: 1 Year(s) Total Positions: 2
Program ID: 485-28-21-008

Pennsylvania
Philadelphia
University of Pennsylvania Program
Children’s Hospital of Philadelphia
Program Director:
John W. Duckett, MD
Children’s Hospital of Philadelphia
54th & Civic Center Blvd
Philadelphia, PA 19104
215 662-2765
Length: 1 Year(s) Total Positions: 2
Program ID: 485-47-21-007

Tennessee
Memphis
University of Tennessee Program*
University of Tennessee College of Medicine
Le Bonheur Children’s Medical Center
Program Director:
H. Norman Nee, MD
University of Tennessee
Div of Pediatric Urology
770 Easte Pk
Memphis, TN 38120
901 581-4020
Length: 1 Year(s)
Program ID: 485-47-21-007

Texas
Houston
Baylor College of Medicine Program*
Baylor College of Medicine
Texas Children’s Hospital
Program Director:
Emedo T. Gonzales Jr, MD
Div of Urology
6821 Fannin
Clinical Care Corp Ste 20
Houston, TX 77030
713 770-3102
Length: 1 Year(s)
Program ID: 485-48-21-008

* Updated information not provided.
Physical Medicine and Rehabilitation

Alabama

Birmingham
University of Alabama Medical Center Program
University of Alabama Hospital
Program Director:
Jay M. Meythaler, MD
University of Alabama at Birmingham
Spain Rehabilitation Center
1717 Sixth Ave S
Birmingham, AL 35233-7330
205 834-3450
Length: 3 Year(s) Total Positions: 9 (GYI: 0)
Program ID: 340-01-21-083

Arkansas

Little Rock
University of Arkansas for Medical Sciences Program
University of Arkansas College of Medicine
Arkansas Children’s Hospital
Baptist Rehabilitation Institute of Arkansas
John L. McClellan Memorial Veterans Hospital
University Hospital of Arkansas
Program Director:
Richard Gray, MD
University of Arkansas for Medical Sciences Dept of PM&R
401 WMarkham Slot 6028
Little Rock AR 72205
501 681-1302
Length: 4 Year(s) Total Positions: 16 (GYI: 3)
Program ID: 340-04-21-083

California

Loma Linda
Loma Linda University Program
Loma Linda University Medical Center
Jerry L Pettis Memorial Veterans Hospital
Program Director:
Murray E Brandeis, MD
Loma Linda Univ Medical Center Dept of Physical Medicine
11234 Anderson St PO Box 2000
Loma Linda, CA 92354
909 824-4099
Length: 3 Year(s) Total Positions: 16 (GYI: 4)
Program ID: 340-05-21-077

Los Angeles
Veterans Affairs Medical Center (West Los Angeles) Program
Veterans Affairs Medical Center (West Los Angeles)
Cedars-Sinai Medical Center
Veterans Affairs Medical Center (Sepulveda)
Program Director:
A M Erica Schemel, MD
DVAMC West Los Angeles (W117)
11301 Wilshire Blvd
Los Angeles, CA 90073
310 824-3124
Length: 3 Year(s) Total Positions: 16 (GYI: 0)
Program ID: 340-05-21-007

Orange
University of California (Irvine) Program
University of California (Irvine) Medical Center
Long Beach Memorial Medical Center
Veterans Affairs Medical Center (Long Beach)
Program Director:
Phyllis B Page, MD
University of California (Irvine) Medical Center
Dept of Physical Medicine & Rehab
Rt 401/111 City Dr S
Orange, CA 92868
310 494-5958
Length: 3 Year(s) Total Positions: 20 (GYI: 0)
Program ID: 340-05-21-005

Sacramento
University of California (Davis) Program
University of California (Davis) Medical Center
Program Director:
David D Klimo, MD
University of California Davis Medical Center
4301 X St Rd 2050
Sacramento, CA 95817-2282
916 734-5423
Length: 4 Year(s) Total Positions: 11 (GYI: 2)
Program ID: 340-04-21-004

Stanford
Stanford University Program*
Stanford University Hospital
Santa Clara Valley Medical Center
Veterans Affairs Medical Center (Palo Alto)
Program Director:
Kaine S Davis, MD
Palo Alto VA Medical Center
Rehab Med Serv (117)
3801 Miranda Ave
Palo Alto, CA 94304
415 495-5906
Length: 3 Year(s) Total Positions: 16 (GYI: 0)
Program ID: 340-05-21-006

Colorado

Denver
University of Colorado Program
University of Colorado Health Sciences Center
Veterans Affairs Medical Center (Denver)
Program Director:
Donna J Blake, MD
University of Colorado Health Sciences Center
4200 E Ninth Ave Box C243
Denver, CO 80262
303 270-4198
Length: 3 Year(s) Total Positions: 13 (GYI: 0)
Program ID: 340-07-21-060

District of Columbia

Washington
National Rehabilitation Hospital Program*
National Rehabilitation Hospital
Washington Hospital Center
Program Director:
Barbara Kolach, MD
National Rehabilitation Hospital
102 Irving St NW Rm 256
Washington, DC 20010-2040
202 877-1627
Length: 3 Year(s)
Program ID: 340-10-21-087

Walter Reed Army Medical Center Program
Walter Reed Army Medical Center
Program Director:
Praxides V Belazsavin, MD
Chief Physical Medicine & Rehabilitation Serv
Walter Reed Army Medical Center
6825 16th St NW
Washington, DC 20307-0001
202 783-6008
Length: 3 Year(s) Total Positions: 11 (GYI: 0)
Program ID: 340-10-21-074

Florida

Miami
University of Miami-Jackson Memorial Medical Center Program*
University of Miami-Jackson Memorial Medical Center
Veterans Affairs Medical Center (Miami)
Program Director:
Dorothea Glass, MD
VA Medical Center
Rehabilitation Medicine Service
1201 NW 10th St #117
Miami, FL 33125
305 324-3217
Length: 3 Year(s)
Program ID: 340-11-21-096

Georgia

Atlanta
Emory University Program
Emory University School of Medicine
Emory University Hospital
Grady Memorial Hospital
Veterans Affairs Medical Center (Atlanta)
Program Director:
Richard D Carr, MD
Dept of Physical Medicine & Rehabilitation
1441 Clifton Rd NE
Rm 116
Atlanta, GA 30322
404 729-7539
Length: 3 Year(s) Total Positions: 13 (GYI: 0)
Program ID: 340-12-21-011
Illinois

Chicago

McGaw Medical Center of Northwestern University Program
Northwestern University Medical School
Northwestern Memorial Hospital
Rehabilitation Institute of Chicago
Program Director: James A. Sliva, DO
c/o Office of Graduate Medical Education
Northwestern University Med School
300 E Chicago Ave 9182
Chicago, IL 60611
312 696-4748
Length: 3 Year(s) Total Positions: 40 (GYI: 4)
Program ID: 340-16-21414

Mount Sinai Medical Center of Chicago/Schwab Rehabilitation Center Program
Mount Sinai Hospital Medical Center of Chicago
Schwab Rehabilitation Center and Care Network
Program Director: Michelle S. Gitler, MD
Schwab Rehabilitation Center
1401 S California Blvd
Chicago, IL 60608-1612
312 522-3010
Length: 3 Year(s) Total Positions: 14 (GYI: 0)
Program ID: 340-16-22112

Rush-Presbyterian-St Luke’s Medical Center Program
Rush-Presbyterian-St Luke’s Medical Center
Marianjoy Rehabilitation Hospital and Clinics
Oak Forest Hospital of Cook County
Program Director: John J. Nicholas, MD
Rush-Presbyterian-St Luke’s Medical Center
1735 W Harrison St, Ste 1016
Chicago, IL 60612
312 926-3875
Length: 4 Year(s) Total Positions: 20 (GYI: 1)
Program ID: 340-16-21082

University of Illinois College of Medicine at Chicago Program
University of Illinois College of Medicine at Chicago
Adler LeRoy Hospital and Medical Center
University of Illinois Hospital and Clinics
Veterans Affairs Westside Medical Center (Chicago)
Program Director: Bhagwan T. Bhardwaj, MD
University of Illinois Hospital
Dept of Physical Medicine & Rehab
840 S Wood St MC 889
Chicago, IL 60612
312 899-7211
Length: 3 Year(s) Total Positions: 12 (GYI: 0)
Program ID: 340-16-21015

Maywood

Loyola University Program
Foster G McGaw Hospital-Loyola University of Chicago
Edward H Hines Jr Veterans Affairs Hospital
Marianjoy Rehabilitation Hospital and Clinics
Program Director: Jay E. Sabbara, MD
Loyola University Medical Center
Dept of Orthopedics PM&R
2160 S First Ave
Maywood, IL 60153-5500
708 215-494
Length: 4 Year(s) Total Positions: 17 (GYI: 4)
Program ID: 340-16-81-018

Wheaton

Rehabilitation Foundation Program
Rehabilitation Foundation Inc
Marianjoy Rehabilitation Hospital and Clinics
Program Director: Richard F. Harvey, MD
Rehabilitation Foundation Inc
P.O. Box 389
20 W 171 Roosevelt Rd
Wheaton, IL 60187
708 462-4729
Length: 3 Year(s) Total Positions: 6 (GYI: 0)
Program ID: 340-16-21109

Indiana

Indianapolis

Indiana University Medical Center Program
Indiana University Medical Center
Community Hospitals of Indianapolis
Richard L Roudebush Veterans Affairs Medical Center
William N Wishard Memorial Hospital
Program Director: Randall L. Braddock, MD
Dept of Physical Medicine & Rehabilitation
541 N Clinical Rd 308
Indianapolis, IN 46202-5111
317 278-6209
Length: 3 Year(s) Total Positions: 9 (GYI: 0)
Program ID: 340-17-21098

Kansas

Kansas City

University of Kansas Medical Center Program
University of Kansas School of Medicine
Bethany Medical Center
Dwight D Eisenhower Veterans Affairs Medical Center
University of Kansas Medical Center
Veterans Affairs Medical Center (Kansas City)
Program Director: A. T. Patel, MD
Rehabilitation Medicine Dept
University of Kansas Medical Center
3801 Rainbow Blvd
Kansas City, KS 66160-2906
913 384-6777
Length: 4 Year(s) Total Positions: 3 (GYI: 0)
Program ID: 340-19-21-018

Kentucky

Lexington

University of Kentucky Medical Center Program
University Hospital-Albert B Chandler Medical Center
Cardinal Hill Hospital
Veterans Affairs Medical Center (Lexington)
Program Director: James W. Kinchion, DO
Gerald V. Klim, DO
Kentucky Clinic 2122
Dept of Physical Medicine & Rehab
University of Kentucky Medical Ctr
Lexington, KY 40506-0884
606 257-4888
Length: 4 Year(s) Total Positions: 18 (GYI: 4)
Program ID: 340-20-21079

Louisville

University of Louisville Program
University of Louisville School of Medicine
Amelia Brown Plasser Rehabilitation Center
Program Director: Linda H. Geis, MD
Plasser Rehab Center
225 Abraham Flexner Way
Louisville, KY 40202
502 582-7491
Length: 3 Year(s) Total Positions: 9 (GYI: 0)
Program ID: 340-20-11-019

Louisiana

New Orleans

Louisiana State University Program
Louisiana State University School of Medicine
Allon Ochsner Medical Foundation
Louisiana Rehabilitation Institute
Medical Center of Louisiana at New Orleans-LSU Division
Toouro Infirmary
Program Director: Gregory W Stewart, MD
Louisiana State University Medical Center
C/O Mrs. Evelyn B. Glasgow
1542 Tulane Ave Ste 602
New Orleans, LA 70112-2822
504 596-2568
Length: 4 Year(s) Total Positions: 19 (GYI: 1)
Program ID: 340-15-21-059

Maryland

Baltimore

Johns Hopkins University/Sinai Hospital of Baltimore Program
Johns Hopkins University School of Medicine
Good Samaritan Hospital of Maryland
Johns Hopkins Hospital
Sinai Hospital of Baltimore
Program Director: Gerald Felsenthal, MD
Sinai Hospital of Baltimore
Dept of Rehabilitation Medicine
2401 W Belvedere Ave
Baltimore, MD 21215-5271
410 789-5232
Length: 3 Year(s) Total Positions: 12 (GYI: 9)
Program ID: 340-22-23-021

* Updated information not provided.
Massachusetts

Boston

Boston University Program*
Boston University Medical Center-University Hospital Brain Tree Hospital
Edith Nourse Rogers Memorial Veterans Hospital
Program Director:
Susan Bienert-Bergman, MD
University Hospital F-515
88 Newton St
Boston, MA 02118-2303
517 785-7319
Length: 3 Year(s) Total Positions: 15 (GYI: 0)
Program ID: 340-24-11-034

Harvard Medical School Program
Spaulding Rehabilitation Hospital
Program Director:
Paul J Corcoran, MD
Spaulding Rehabilitation Hospital
125 Nashua St
Boston, MA 02114
517 720-6826
Length: 3 Year(s) Total Positions: 15 (GYI: 0)
Program ID: 340-24-11-094

Tufts University Program
New England Medical Center Hospitals
New England-Sinai Hospital and Rehabilitation Center
Veterans Affairs Medical Center (Boston)
Program Director:
Marvin H Brooks, MD
Dept. of Rehabilitative Medicine Attending, K Rowe
New England Medical Center
790 Washington St #687
Boston, MA 02111
617 559-5032
Length: 3 Year(s) Total Positions: 20 (GYI: 0)
Program ID: 340-24-21-023

Michigan

Ann Arbor

University of Michigan Program
University of Michigan Hospitals
Program Director:
M Catherine Spier, MD
University of Michigan Hospitals Box 0042
1500 E Medical Center Dr
Ann Arbor, MI 48109-0042
313 844-7001
Length: 3 Year(s) Total Positions: 10 (GYI: 0)
Program ID: 340-25-21-025

Detroit

Sinai Hospital Program
Sinai Hospital
Program Director:
Maury R Ellengob, MD
Joseph C Hoot, MD
Sinai Hospital
6747 W Outer Dr
Detroit, MI 48235-2800
313 885-6554
Length: 4 Year(s) Total Positions: 10 (GYI: 3)
Program ID: 340-25-31-026

Wayne State University/Detroit Medical Center Program
Wayne State University School of Medicine
Rehabilitation Institute
Program Director:
Bruce M Gans, MD
Rehabilitation Institute
261 Mack Blvd
Detroit, MI 48201-9803
313 745-6992
Length: 3 Year(s) Total Positions: 20 (GYI: 0)
Program ID: 340-25-21-027

East Lansing

Michigan State University Program*
Michigan State University College of Osteopathic Medicine
Program Director:
Michael T Andary, MD
B401 W Fee Hall Dept of Physical Medicine & Rehabilitation
Michigan State University
College of Osteopathic Medicine
East Lansing, MI 48824
517 353-4753
Length: 3 Year(s) Total Positions: 40 (GYI: 0)
Program ID: 340-25-21-100

Royal Oak

William Beaumont Hospital/Program
William Beaumont Hospital
William Beaumont Hospital-Troy
Program Director:
Myron M Lalib, MD
William Beaumont Hospital
3601 W 13 Mile Rd
Royal Oak, MI 48073-6766
810 561-6161
Length: 4 Year(s) Total Positions: 12 (GYI: 3)
Program ID: 340-25-21-076

Minnesota

Minneapolis

University of Minnesota Program
University of Minnesota Medical School
University of Minnesota Hospital and Clinic
Veterans Affairs Medical Center (Minneapolis)
Program Director:
Dennis Dykstra, MD
University of Minnesota
Boynton Health 500 Box 297
420 Delaware St SE
Minneapolis, MN 55456-0992
612 635-4050
Length: 3 Year(s) Total Positions: 15 (GYI: 0)
Program ID: 340-25-21-029

Rochester

Mayo Graduate School of Medicine Program
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Rochester)
Rochester Methodist Hospital
St Mary's Hospital of Rochester
Program Director:
Kathryn A Stolp-Smith, MD
Mayo Graduate School of Medicine Application Processing Center
Mayo Graduate School of Medicine
200 First St SW
Rochester, MN 55905
507 284-2866
Length: 3 Year(s) Total Positions: 24 (GYI: 0)
Program ID: 340-28-21-030

Missouri

Columbia

University of Missouri-Columbia Program
University of Missouri-Columbia School of Medicine
Harry S Truman Memorial Veterans Hospital
University of Children's Hospital
Program Director:
Steven M Gatzl, MD
University Hospital & Clinics
1 Hospital Dr
Columbia, MO 65212
314 882-3101
Length: 3 Year(s) Total Positions: 11 (GYI: 0)
Program ID: 340-25-21-031

St Louis

Washington University Program
Jewish Hospital of St Louis
Program Director:
Okasa Nakatsuya, MD
Jewish Hospital of St Louis at Washington University
216 S Kingshighway
St Louis, MO 63110
314 454-7757
Length: 4 Year(s) Total Positions: 10 (GYI: 1)
Program ID: 340-25-11-052

New Jersey

Edison

Johnson Institute/John F Kennedy Medical Center Program
JFK Medical Center
Program Director:
Thomas E Stratz, MD
JFK Hospital Rehabilitation Institute
65 James St
Edison, NJ 08818-3369
908 321-7000
Length: 3 Year(s) Total Positions: 12 (GYI: 0)
Program ID: 340-35-21-032

* Updated information not provided.
Newark
UMDNJ-New Jersey Medical School Program
UMDNJ-New Jersey Medical School
Dept of Veterans Affairs Medical Center (East Orange)
Kessler Institute for Rehabilitation
UMDNJ-University Hospital
Program Director: Joel A. Neff, MD
UMDNJ-New Jersey Med Sch
Univ Hosp/Bld 261
150 Bergen St
Newark, NJ 07103-2405
201 882-4394
Length: 3 Year(s) Total Positions: 28 (GYI: 0)
Program ID: 340-35-32-404

New York
Albany
Albany Medical Center Program
Albany Medical Center Hospital
St Peter's Hospital
Sunnyview Hospital and Rehabilitation Center
Veterans Affairs Medical Center (Albany)
Program Director: Andrew Dulin, MD
Albany Medical Center Dept of Physical Med & Rehab
A9
New Scotland Ave
Albany, NY 12208-3479
518 262-5391
Length: 3 Year(s) Total Positions: 15 (GYI: 3)
Program ID: 340-35-21-035

Bronx
Albert Einstein College of Medicine Program
Albert Einstein College of Medicine of Yeshiva University
Bronx Municipal Hospital Center
Montefiore Medical Center-Henry and Lucy Moses Division
Montefiore Medical Center-Walter Hospital
North Central Bronx Hospital
Program Director: Mark A Thomas, MD
Montefiore Medical Center
111 E 210 St
Bronx, NY 10467
718 902-2753
Length: 3 Year(s) Total Positions: 23 (GYI: 0)
Program ID: 340-35-21-043

Brooklyn
Kingsbrook Jewish Medical Center Program
Kingsbrook Jewish Medical Center
Program Director: Harvey Goldberg, MD
Kingsbrook Jewish Medical Center
Dept of Physical Med & Rehab
506 Schenectady Ave
Brooklyn, NY 11203-1891
718 604-5641
Length: 3 Year(s) Total Positions: 15 (GYI: 5)
Program ID: 340-35-22-041

SUNY Health Science Center at Brooklyn Program*
SUNY HSC at Brooklyn College of Medicine
Kings County Hospital Center
University Hospital-SUNY Health Science Center at Brooklyn
Veterans Affairs Medical Center (Brooklyn)
Program Director: Marc Bennett, MD
State University of New York Health Science Ctr at Brooklyn
450 Clarkson Ave Box 30
Brooklyn, NY 11203
718 270-1227
Length: 3 Year(s) Total Positions: 20 (GYI: 4)
Program ID: 340-35-21-048

Buffalo
SUNY at Buffalo Graduate Medical-Dental Education Consortium Program
SUNY at Buffalo Grad Medical-Dental Education Consortium
Buffalo General Hospital
Erie County Medical Center
Veterans Affairs Medical Center (Buffalo)
Program Director: KH Lee, MD
VA Medical Center
3455 Bailey Ave
Buffalo, NY 14215
716 898-3674
Length: 4 Year(s) Total Positions: 14 (GYI: 0)
Program ID: 340-35-21-036

East Meadow
Nassau County Medical Center Program
Nassau County Medical Center
Program Director: Lyn Weas, MD
Nassau County Medical Center
Dept of Physical Medicine and Rehab
2001 Hempstead Tpck
East Meadow, NY 11554-5400
516 572-6353
Length: 4 Year(s) Total Positions: 10 (GYI: 0)
Program ID: 340-35-11-037

New Hyde Park
Albert Einstein College of Medicine at Long Island Jewish Medical Center Program
Long Island Jewish Medical Center
Jamaica Hospital
Southside Hospital
Program Director: Angelos Badell, MD
Long Island Jewish Medical Center
270-66 76th Ave CH005
Div of Rehabilitation Medicine
New Hyde Park, NY 11040
718 470-3020
Length: 4 Year(s) Total Positions: 12 (GYI: 3)
Program ID: 340-35-21-042

New York
Mount Sinai School of Medicine Program
Mount Sinai School of Medicine
Beth Israel Medical Center
Elmhurst Hospital Center-Mount Sinai Services
Hospital for Joint Disease Orthopaedic Institute
Mount Sinai Medical Center
Veterans Affairs Medical Center (Bronx)
Program Director: Kristjan T Bagarnarson, MD
Mount Sinai Hospital
One Gustave L Levy F1
New York, NY 10029-6074
212 241-9654
Length: 3 Year(s) Total Positions: 30 (GYI: 8)
Program ID: 340-35-21-044

New York Hospital-Cornell Medical Center Program
New York Hospital
Memorial Sloan-Kettering Cancer Center
Program Director: Willibil Nagler, MD
New York Hospital-Cornell Medical Center
525 E 60th St Box 142
New York, NY (0021)-8110
212 446-1603
Length: 3 Year(s) Total Positions: 10 (GYI: 0)
Program ID: 340-35-21-049

New York University Medical Center Program
New York University Medical Center
Bellevue Hospital Center
Goldwater Memorial Hospital
Bank Institute of Rehabilitation Medicine
Veterans Affairs Medical Center (Manhattan)
Program Director: Howard G Thistle, MD
New York University Medical Center
Dept of Rehabilitation Medicine
460 E 34th St Ste 600
New York, NY 10016-4988
212 263-6110
Length: 4 Year(s) Total Positions: 40 (GYI: 1)
Program ID: 340-35-21-048

Presbyterian Hospital in the City of New York Program
Presbyterian Hospital in the City of New York
Program Director: James S Lieberman, MD
Presbyterian Hospital in the City of New York
630 W 168
P&S Box 38
New York, NY 10032
212 305-4818
Length: 3 Year(s) Total Positions: 19 (GYI: 0)
Program ID: 340-35-21-009

Rochester
University of Rochester Program
Strong Memorial Hospital of the University of Rochester
Monroe Community Hospital
St Mary's Hospital
Program Director: Charles J Gibson, MD
University of Rochester Medical Center
Box 864
601 Elmwood Ave
Rochester, NY 14642
716 275-3271
Length: 4 Year(s) Total Positions: 9 (GYI: 2)
Program ID: 340-35-21-001

* Updated information not provided.
Syracuse
SUNY Health Science Center at Syracuse Program
University Hospital-SUNY Health Science Center at Syracuse
St Camillus Health and Rehabilitation Center
Veterans Affairs Medical Center (Syracuse)
Program Director:
Robert J Weber, MD
State University of New York Health Science Ctr at Syracuse
750 E Adams St
Syracuse, NY 13210-2375
315-464-3520
Length: 3 Year(s) Total Positions: 11 (GYI: 6)
Program Id: 340-38-21-093

Valhalla
New York Medical College at St Vincent's Hospital and Medical Center Program
New York Medical College
St Vincent's Hospital and Medical Center of New York
Program Director:
Lakshmi Murral, MD
St Vincent's Hospital and Medical Center of New York
165 W 11th St
Physical Medicine & Rehabilitation
New York, NY 10011
212-694-8507
Length: 3 Year(s) Total Positions: 11 (GYI: 6)
Program Id: 340-38-11-047

New York Medical College at Westchester County Medical Center Program
New York Medical College
Lincoln Medical and Mental Health Center
Metropolitan Hospital Center
Westchester County Medical Center
Program Director:
Catherine Hinterbuchner, MD
New York Medical College Dept of Rehabilitative Medicine
Rm 557 Munger Pavilion
Valhalla, NY 10595
914-993-4270
Length: 4 Year(s) Total Positions: 15 (GYI: 1)
Program Id: 340-38-21-045

North Carolina
Charlotte
Carolina Medical Center Program
Carolina Medical Center
Charlotte Institute of Rehabilitation
Program Director:
William L. Bocknek, MD
Charlotte Institute of Rehabilitation
1100 Blythe Blvd
Charlotte, NC 28203
704-355-4405
Length: 4 Year(s) Total Positions: 16 (GYI: 4)
Program Id: 340-38-21-006

Greenville
East Carolina University Program
East Carolina University School of Medicine
Pitt County Memorial Hospital
Program Director:
Sanford R Verma, MD
East Carolina University School of Medicine
Dept of Physical Med & Rehab
2100 Saundersburg Rd
Greenville, NC 27858-4304
(919) 715-4440
Length: 4 Year(s) Total Positions: 15 (GYI: 5)
Program Id: 340-38-21-001

Ohio
Cincinnati
University of Cincinnati Hospital Group Program
University of Cincinnati Hospital
Program Director:
R. D. Godbold, MD
University of Cincinnati Medical Center
Dept of Physical Med & Rehab
PO Box 870530
Cincinnati, OH 45267-0530
513-558-7635
Length: 4 Year(s) Total Positions: 17 (GYI: 4)
Program Id: 340-38-21-086

Cleveland
Case Western Reserve University Program
MetroHealth Medical Center
Veterans Affairs Medical Center (Cleveland)
Program Director:
Shu Q Huang, MD
MetroHealth Medical Center
2500 MetroHealth Dr
Cleveland, OH 44109-1900
216-459-5219
Length: 3 Year(s) Total Positions: 14 (GYI: 2)
Program Id: 340-38-31-003

Columbus
Ohio State University Program
Ohio State University Medical Center
Mt Carmel Medical Center
Riverside Methodist Hospitals
Program Director:
William S Reave, MD
Ohio State University
Dept of Physical Med & Rehab
3870 N First Ave, Columbus, OH 43210-1245
614-293-3061
Length: 4 Year(s) Total Positions: 24 (GYI: 7)
Program Id: 340-38-21-064

Toledo
Medical College of Ohio at Toledo Program
Medical College of Ohio Hospital
Flower Hospital
St Vincent Medical Center
Toledo Hospital
Program Director:
Greg Nemunaitis, MD
Medical College of Ohio
3000 Arlington Ave
Toledo, OH 43609-9008
419-391-4022
Length: 4 Year(s) Total Positions: 8 (GYI: 3)
Program Id: 340-38-21-080

Pennsylvania
Philadelphia
Graduate Hospital/Sacred Heart Hospital Program
Graduate Hospital
Sacred Heart Hospital
Program Director:
Francis J Bonner Jr, MD
Graduate Hospital
One Graduate Plaza
Philadelphia, PA 19146
215-888-7059
Length: 3 Year(s) Total Positions: 15 (GYI: 6)
Program Id: 340-14-21-090

Temple University Program
Temple University Hospital
Albert Einstein Medical Center
Mage Rehabilitation Hospital
Program Director:
James T Demopoulos, MD
Physical Medicine and Rehabilitation
Temple University Hospital
3401 N Broad St
Philadelphia, PA 19140
215-746-7921
Length: 3 Year(s) Total Positions: 29 (GYI: 9)
Program Id: 340-41-21-060

Thomas Jefferson University Program
Thomas Jefferson University Hospital
Program Director:
William S Staer Jr, MD
Thomas Jefferson University Hospital
1111 S 11th St
Philadelphia, PA 19107
215-555-9454
Length: 3 Year(s) Total Positions: 19 (GYI: 6)
Program Id: 340-41-21-097

University of Pennsylvania Program
Hospital of the University of Pennsylvania
Abitz Memorial Hospital
Children's Seashore House
Our Lady of Lourdes Medical Center
Reading Rehabilitation Hospital
Program Director:
Keith M Robinson, MD
Hospital of The University of Pennsylvania
34th F W Gates Bldg
3400 Spruce St
Philadelphia, PA 19104-4283
215-349-0574
Length: 3 Year(s) Total Positions: 13 (GYI: 0)
Program Id: 340-41-21-098

* Updated information not provided.
Pittsburgh
St Francis Medical Center Program
St Francis Medical Center
Mercy Hospital of Pittsburgh
St Margaret Memorial Hospital
Program Director:
Ronald L Zimmerman, MD
St Francis Medical Center
Medical Education Office
400 45th St
Pittsburgh, PA 15201
412 622-7187
Length: 4 Year(s) Total Positions: 15 (GYI: 3)
Program ID: 340-41-23-059

University Health Center of Pittsburgh Program
University Health Center of Pittsburgh
Harmarville Rehabilitation Center
Presbyterian University Hospital/UPMC
Program Director:
Louis E Penrod, MD
901 Lilliane Kaufmann Bldg
UPMC-200 Lothrop St
Pittsburgh, PA 15213-2582
412 648-6778
Length: 4 Year(s) Total Positions: 6 (GYI: 5)
Program ID: 340-41-21-075

Puerto Rico
San Juan
University of Puerto Rico Program
University of Puerto Rico School of Medicine
Puerto Rico Rehabilitation Center
University Hospital
Program Director:
William J Mchone, MD
University of Puerto Rico School of Medicine
Caparra Heights Station
Rio Piedras, PR 00935
809 789-4168
Length: 4 Year(s) Total Positions: 8 (GYI: 2)
Program ID: 340-42-31-082
Veterans Affairs Medical and Regional Office Center Program
Veterans Affairs Medical Center (San Juan)
Program Director:
Arturo Arche-Matta, MD
VA Medical Center
Dept of Physical Med & Rehab
One Veterans Plaza
San Juan, PR 00927-5800
809 758-7575
Length: 4 Year(s) Total Positions: 12 (GYI: 2)
Program ID: 340-42-31-063

South Carolina
Charleston
Medical University of South Carolina Program*
Medical University of South Carolina College of Medicine
MUSC Medical Center
Program Director:
James E Warmoth, MD
Medical University of South Carolina
171 Ashley Ave Room 335 CSB
Charleston, SC 29425
803 792-2791
Length: 3 Year(s)
Program ID: 340-45-21-092

Tennessee
Chattanooga
University of Tennessee College of Medicine at Chattanooga Program*
University of Tennessee College of Medicine-Chattanooga
Ezra Gross Medical Center
Program Director:
James P Little, MD
Siskin Hospital for Physical Medicine & Rehabilitation
One Siskin Plaza
Chattanooga, TN 37403
615 634-1216
Length: 3 Year(s) Total Positions: 15 (GYI: 3)
Program ID: 340-47-21-099

Texas
Dallas
Baylor University Medical Center Program
Baylor University Medical Center
Baylor Institute for Rehabilitation
Program Director:
Barry S Smith, MD
Baylor University Medical Center Dept of Phys Med and Rehab
3600 Gaston Ave
Dallas, TX 75246-2088
214 690-7162
Length: 3 Year(s) Total Positions: 8 (GYI: 0)
Program ID: 340-48-31-064
University of Texas Southwestern Medical School Program
University of Texas Southwestern Medical School
Dallas County Hospital District-Fort Worth Memorial Hospital
Dallas Rehabilitation Institute
Veterans Affairs Medical Center (Dallas)
Program Director:
Geetha Pandian, MD
The University of Texas Southwestern Medical School
Dept of Phys Med and Rehab
5523 Harry Hines Blvd
Dallas, TX 75235-0065
214 648-8282
Length: 3 Year(s) Total Positions: 17 (GYI: 0)
Program ID: 340-48-21-065

Houston
Baylor College of Medicine Program
Baylor College of Medicine
Harris County Hospital District-Ben Taub General Hospital
Institute for Rehabilitation and Research
Lyndon B Johnson General Hospital
Methodist Hospital
St Luke’s Episcopal Hospital
Texas Children’s Hospital
Veterans Affairs Medical Center (Houston)
Program Director:
G George Kevorkian, MD
Baylor College of Medicine
Dept of Physical Med & Rehab
Rm A2305 TIRR 1333 Moursund Ave
Houston, TX 77030
713 799-5033
Length: 3 Year(s) Total Positions: 50 (GYI: 0)
Program ID: 340-48-21-066

San Antonio
University of Texas Health Science Center at San Antonio Program
University of Texas Health Science Center at San Antonio
Audie Murphy Memorial Veterans Hospital (San Antonio)
San Antonio Warm Springs Rehabilitation Hospital
University Hospital-South Texas Medical Center
Program Director:
Riten B Leonard, MD
University of Texas Health Science Center
Dept of Rehabilitation Medicine
7700 Floyd Curl Dr
San Antonio, TX 78224-7798
210 567-5300
Length: 4 Year(s) Total Positions: 28 (GYI: 7)
Program ID: 340-49-21-087

Utah
Salt Lake City
University of Utah Program
University of Utah Medical Center
Veterans Affairs Medical Center (Salt Lake City)
Program Director:
James R Swenson, MD
Univ of Utah Medical Center Div of Phys Med and Rehab
50 N Medical Dr
Salt Lake City, UT 84132
801 581-7285
Length: 3 Year(s) Total Positions: 8 (GYI: 0)
Program ID: 340-49-21-068

Virginia
Charlottesville
University of Virginia Program
University of Virginia Medical Center
Mount Vernon Hospital
Program Director:
Margaret Di Benedetto, MD
Department of Physical Medicine and Rehabilitation
Box BHR-30 University of Virginia
Health Sciences Center
Charlottesville, VA 22901
804 924-8580
Length: 4 Year(s) Total Positions: 16 (GYI: 4)
Program ID: 340-51-21-069

Norfolk
Eastern Virginia Graduate School of Medicine Program
Eastern Virginia Graduate School of Medicine
DePauw Medical Center
Sentara Norfolk General Hospital
Veterans Affairs Medical Center (Hampton)
Program Director:
Cynthia L Flick, MD
Eastern Virginia Medical School
Dept of Physical Med & Rehab
825 Shiflett Ave
Norfolk, VA 23507-1912
804 446-5915
Length: 4 Year(s) Total Positions: 9 (GYI: 2)
Program ID: 340-51-23-081
Plastic Surgery

Alabama

University of Alabama Medical Center Program
University of Alabama Hospital
Survivors' Hospital of Alabama
Veterans Affairs Medical Center (Birmingham)

Program Director:
Luis Vazquez, MD
University of Alabama at Birmingham Div of Plastic Surgery
University Station (MBB-524)
1813 6th Ave S
Birmingham, AL 35229-3205
205 934-3245

Length: 2 Year(s)  Total Positions: 2
Program ID: 300-01-121

California

Loma Linda

Loma Linda University Program
Loma Linda University Medical Center
Jerry L. Pettis Memorial Veterans Hospital
Kaiser Foundation Hospital (Fontana)
Riverside General Hospital-University Medical Center

Program Director:
Robert A. Harlesley, MD
Loma Linda University
Div of Plastic & Reconstructive Surg
11234 Anderson St, Trailer C
Loma Linda, CA 92354
909 824-4176

Length: 3 Year(s)  Total Positions: 6
Program ID: 360-05-21-103

Los Angeles

UCLA Medical Center Program
UCLA School of Medicine
LAC-Olive View Medical Center
Los Angeles County Harbor- UCLA Medical Center
UCLA Medical Center
Veterans Affairs Medical Center (Sepulveda)
Veterans Affairs Medical Center (West Los Angeles)

Program Director:
William W. Shaw, MD
University of California Los Angeles Plastic Surgery
64-140 CHS
10833 LeConte Ave
Los Angeles, CA 90024-1050
310 822-5555

Length: 2 Year(s)  Total Positions: 6
Program ID: 360-05-21-009

San Francisco

St Francis Memorial Hospital Program
St Francis Memorial Hospital

Program Director:
Angelo Capozzi, MD
Attn: Program Coordinator
900 Hyde St
San Francisco, CA 94109
415 653-6000

Length: 2 Year(s)  Total Positions: 2
Program ID: 360-05-22-011

Washington

University of Washington Program
University of Washington School of Medicine
Children's Hospital and Medical Center Harborview Medical Center
University of Washington Medical Center
Veterans Affairs Medical Center (Seattle)

Program Director:
Teresa J. Massagli, MD
University of Washington
Dept of Rehabilitation Medicine
RJ 10
Seattle, WA 98195
206 667-0636

Length: 4 Year(s)  Total Positions: 32 (GTV: 3)
Program ID: 340-56-21-070

Wisconsin

University of Wisconsin Program
University of Wisconsin Hospital and Clinics

Program Director:
Keith S. Spierling, MD
Univ of Wisconsin Hospital and Clinics Dept of Rehab Med
600 Highland Ave E3048
Madison, WI 53792-0001
608 263-8601

Length: 4 Year(s)  Total Positions: 3 (GTV: 3)
Program ID: 340-56-21-072

Milwaukee

Medical College of Wisconsin Program
Medical College of Wisconsin Affiliated Hospitals Inc
Clement J Zablocki Veterans Affairs Medical Center
John E. Doyne Hospital
St Luke's Medical Center

Program Director:
Gerda E Klingbeil, MD
Medical College of Wisconsin
Dept of Physical Med & Rehab
1000 N 82nd St
Milwaukee, WI 53226
414 255-1414

Length: 4 Year(s)  Total Positions: 19 (GTV: 2)
Program ID: 340-56-21-071

University of Southern California Program
Los Angeles County- USC Medical Center
Children's Hospital of Los Angeles
City of Hope National Medical Center
Kaiser Foundation Hospital (West Los Angeles)
LAC-Sancho Los Amigos Medical Center
USC University Hospital

Program Director:
Randolph Sherman, MD
University of Southern California
Div of Plastic Surgery
1450 San Pablo St Ste 1900
Los Angeles, CA 90033-4809
213 342-0480

Length: 2 Year(s)  Total Positions: 8
Subspecialties: HSF
Program ID: 360-05-21-118

Orange

University of California (Irvine) Program*
University of California (Irvine) Medical Center
Veterans Affairs Medical Center (Long Beach)

Program Director:
David W. Furnas, MD
University of California (Irvine) Medical Center
101 City Dr S
Orange, CA 92668
714 456-5788

Length: 2 Year(s)  Total Positions: 3
Program ID: 360-05-21-008

Sacramento

University of California (Davis) Program
University of California (Davis) Medical Center
Kaiser Foundation Hospital (Sacramento)

Program Director:
Thomas R. Stevenson, MD
University of California (Davis) Medical Center
Div of Plastic Surgery
4801 X St
Sacramento, CA 95817
916 734-5555

Length: 2 Year(s)  Total Positions: 3
Program ID: 360-05-21-113

San Diego

University of California (San Diego) Program
University of California (San Diego) Medical Center
Children's Hospital and Health Center
Veterans Affairs Medical Center (San Diego)

Program Director:
Jack C. Fisher, MD
Div of Plastic Surgery
UCSD Medical Center
200 W Arbor Dr
San Diego, CA 92103-8880
619 543-0484

Length: 2 Year(s)  Total Positions: 2
Program ID: 360-05-21-010

San Francisco

St Francis Memorial Hospital Program
St Francis Memorial Hospital

Program Director:
Angelo Capozzi, MD
Attn: Program Coordinator
900 Hyde St
San Francisco, CA 94109
415 653-6000

Length: 3 Year(s)  Total Positions: 2
Program ID: 360-05-22-011

* Updated information not provided.
Connecticut

New Haven

Yale-New Haven Medical Center Program
Yale-New Haven Hospital
Hospital of St Raphael
Veterans Affairs Medical Center (West Haven)

Program Director:
John A Persing, MD
Yale University School of Medicine
Dept of Surgery (Plastics)
333 Cedar St YFB-2
New Haven, CT 06520-8041
203 785-2570

Length: 2 Year(s)  Total Positions: 6
Subspecialties: HP
Program ID: 360-08-21-015

District of Columbia

Washington

George Washington University Program
George Washington University School of Medicine
Children's National Medical Center

Program Director:
Mary H McGrath, MD
Div of Plastic Surgery
2150 Pennsylvania Ave NW
Washington, DC 20037-3306
202 994-8141

Length: 2 Year(s)  Total Positions: 2
Program ID: 360-10-21-018

Georgetown University/Howard University Program
Georgetown University Hospital
Fairfax Hospital
Howard University Hospital
Suburban Hospital
Union Memorial Hospital
Veterans Affairs Medical Center (Washington DC)

Program Director:
Scott L Spear, MD
Div of Plastic Surgery
Georgetown University Med Center
3800 Reservoir Rd NW PHC
Washington, DC 20007
202 657-6751

Length: 2 Year(s)  Total Positions: 6
Program ID: 360-10-21-017

Walter Reed Army Medical Center Program
Walter Reed Army Medical Center

Program Director:
Michael H Mayer, MD
Chief Plastic Surgery Service
Walter Reed Army Medical Center
6825 16th St NW
Washington, DC 20010-5001
202 570-1560

Length: 2 Year(s)  Total Positions: 4
Program ID: 360-10-11-003

Florida

Gainesville

University of Florida Program
University of Florida College of Medicine
Shands Hospital at the University of Florida Veterans Affairs Medical Center (Gainesville)

Program Director:
Hal B Lichtman, MD
University of Florida Medical Center
Div of Plastic Surgery
Box 106266 HMMC
Gainesville, FL 32610-0286
904 545-0365

Length: 2 Year(s)  Total Positions: 4
Program ID: 360-11-21-019

Miami

University of Miami-Jackson Memorial Medical Center Program
University of Miami-Jackson Memorial Medical Center Cedars Medical Center Veterans Affairs Medical Center (Miami)

Program Director:
Robert H Hunsaker, MD
University of Miami School of Medicine
Div of Plastic Surgery (8-58)
PO Box 019820
Miami, FL 33101
305 545-2646

Length: 2 Year(s)  Total Positions: 6
Program ID: 360-11-21-022

Tampa

University of South Florida Program
University of South Florida College of Medicine
All Children's Hospital
Florida Hospital
H Lee Moffitt Cancer Center
James A Haley Veterans Hospital
Tampa General Healthcare
Veterans Affairs Medical Center (Bay Pines)

Program Director:
Thomas J Krisaek, MD
University of South Florida
Harbourside Medical Tower S200
Four Columbia Dr
Tampa, FL 33606
813 258-0898

Length: 3 Year(s)  Total Positions: 8
Program ID: 360-11-21-128

Georgia

Atlanta

Emory University Program
Emory University School of Medicine
Crawford Long Hospital of Emory University
Emory University Hospital
Grady Memorial Hospital
Scottish Rite Children's Medical Center Veterans Affairs Medical Center (Atlanta)

Program Director:
John Bostwick III, MD
Div of Plastic Surgery
1327 Clifton Rd NE
Atlanta, GA 30322
404 241-5454

Length: 2 Year(s)  Total Positions: 6
Program ID: 360-12-21-024

* Updated information not provided.
Augusta
Medical College of Georgia Program
Medical College of Georgia Hospital and Clinics
Veterans Affairs Medical Center (Augusta)
Program Director:
Kenna S. Goven, MD
Medical College of Georgia
Div of Plastic Surgery
1115 15th St
Augusta, GA 30912
(706) 721-4629
Length: 2 Year(s) Total Positions: 4
Program ID: 360-12-21-111

Illinois
Chicago
McGaw Medical Center of Northwestern University Program*
Northwestern University Medical School
Children’s Memorial Medical Center
Vivianston Hospital
Northwestern Memorial Hospital
Shriners Hospital for Crippled Children (Chicago)
Program Director:
Thomas A. Mustoe, MD
Northwestern University Medical School
707 N Fairbanks Ct Ste 811
Chicago, IL 60611
(312) 505-9002
Length: 3 Year(s) Total Positions: 3
Program ID: 360-16-21-025

Rush-Presbyterian-St Luke’s Medical Center Program*
Rush-Presbyterian-St Luke’s Medical Center
Program Director:
Raeli B. McNulty, MD
Rush-Presbyterian-St Luke’s Medical Center
Dept of Plastic & Reconstruct Surg
1725 W Harrison St #160
Chicago, IL 60612
(312) 567-6152
Length: 2 Year(s) Total Positions: 2
Subspecialties: HSP
Program ID: 360-16-11-028

University of Chicago Program
University of Chicago Hospitals
Lutheran General Hospital
Program Director:
Robert J. Walton, MD
University of Chicago Medical Center
5841 S Maryland Ave MC0005
Chicago, IL 60637
(312) 724-5111
Length: 2 Year(s) Total Positions: 4
Program ID: 360-16-11-027

University of Illinois College of Medicine at Chicago Program
University of Illinois College of Medicine at Chicago
Cook County Hospital
Michael Reese Hospital and Medical Center
University of Illinois Hospital and Clinics
Program Director:
Minda N. Cohen, MD
University of Illinois at Chicago
Div of Plastic Surgery M/C 068
620 S Wood St Ste 615 CSF
Chicago, IL 60612-7346
(312) 696-9313
Length: 3 Year(s) Total Positions: 2
Program ID: 360-16-21-028

Maywood
Loyola University Program*
Foster G McGaw Hospital-Loyola University of Chicago
Children’s Memorial Medical Center
Cook County Hospital
Edward J Hines Jr Veterans Affairs Hospital
Program Director:
Raymond L. Warphi, MD
Foster G McGaw Hospital
2160 S First Ave
Bldg 66/Rm 253
Maywood, IL 60153
(708) 216-6000
Length: 3 Year(s) Total Positions: 4
Program ID: 360-16-21-029

Springfield
Southern Illinois University Program
Southern Illinois University School of Medicine
Memorial Medical Center
St John’s Hospital
Program Director:
Elvin G. Zook, MD
Southern Illinois University School of Medicine #1111
747 N Rutledge St
PO Box 19230
Springfield, IL 62794-0230
(217) 525-6514
Length: 2 Year(s) Total Positions: 4
Program ID: 360-16-21-030

Indiana
Indianapolis
Indiana University Medical Center Program
Indiana University Medical Center
Richard L. Roudebush Veterans Affairs Medical Center
William N. Waahard Memorial Hospital
Program Director:
John J. O’Leary III, MD
Indiana University Medical Center
Emerson Hall Rm 324
646 Barnhill Dr
Indianapolis, IN 46202-5124
(317) 274-6100
Length: 2 Year(s) Total Positions: 6
Program ID: 360-17-11-031

Kansas
Kansas City
University of Kansas Medical Center Program
University of Kansas School of Medicine
University of Kansas Medical Center
Program Director:
John M. Hiebert, MD
University of Kansas Medical Center
2601 Rainbow Blvd
Kansas City, KS 66146-7980
913.588.2000
Length: 2 Year(s) Total Positions: 4
Subspecialties: HSP
Program ID: 360-19-11-032

Kentucky
Lexington
University of Kentucky Medical Center Program
University Hospital-Albert B Chandler Medical Center
Veterans Affairs Medical Center (Lexington)
Program Director:
Edward A. Luce, MD
Kentucky Clinic
Div of Plastic Surgery
Ste K-454
Lexington, KY 40536-0284
(800) 333-8887
Length: 2 Year(s) Total Positions: 4
Program ID: 360-20-21-033

Louisville
University of Louisville Program
University of Louisville School of Medicine
Jewish Hospital
Kosair Children’s Hospital (Alliant Health System)
University of Louisville Hospital
Veterans Affairs Medical Center (Louisville)
Program Director:
John H. Barker, MD PhD
Div of Plastic and Reconstructive Surgery
Dept of Surgery
University of Louisville
Louisville, KY 40202
(502) 852-8888
Length: 2 Year(s) Total Positions: 5
Program ID: 360-20-21-034

Louisiana
New Orleans
Louisiana State University Program
Louisiana State University School of Medicine
Medical Center of Louisiana at New Orleans-LSU Division
Medical Center of Louisiana University Hospital Campus
Veterans Affairs Medical Center-LSU Service (New Orleans)
Program Director:
Robert J. Allen, MD
LSU Plastic Surgery Residency Program Dept of Surgery
Sect of Plastic & Reconstruct Surg
1542 Tulane Avenue
New Orleans, LA 70112-2823
504.638.7638
Length: 2 Year(s) Total Positions: 4
Subspecialties: HSP
Program ID: 360-21-11-035

Tulane University Program
Tulane University School of Medicine
Alton Ochsner Medical Foundation
Medical Center of Louisiana at New Orleans-Tulane Division
Touro Infirmary
Tulane University Hospital and Clinics
Program Director:
Samuel W. Parry, MD
Tulane University Dept of Surgery
Div of Plastic & Reconstruct Surgery
1430 Tulane Ave
New Orleans, LA 70112-2999
504.588.5340
Length: 2 Year(s) Total Positions: 6
Program ID: 360-21-21-036

*Updated information not provided.
Maryland

Baltimore
Johns Hopkins University/University of Maryland Program*
Johns Hopkins University School of Medicine
Children’s Hospital and Center for Reconstructive Surgery
Johns Hopkins Bayview Medical Center
Johns Hopkins Hospital
Union Memorial Hospital
University of Maryland Medical System

Program Director:
Paul N. Manson, MD
Nelson Goldberg, MD
Johns Hopkins Hospital
Div of Plastic Surgery
601 N Caroline St McRae 8
Baltimore, MD 21297-0800
410 955-6897
Length: 2 Year(s) Total Positions: 5
Program ID: 099-23-21-087

Massachusetts

Boston
Brigham and Women’s Hospital/Children’s Hospital Program
Brigham and Women’s Hospital
Brockton-West Roxbury Veterans Affairs Medical Center
Children’s Hospital

Program Director:
Kris Erikson, MD
Brigham and Women’s Hospital
75 Francis St
Boston, MA 02115
617 732-6234
Length: 2 Year(s) Total Positions: 4
Subspecialties: HSP
Program ID: 060-24-21-040

Massachusetts General Hospital Program
Massachusetts General Hospital
New England Medical Center Hospitals

Program Director:
James W. May Jr, MD
Massachusetts General Hospital Harvard Medical School
Div of Plastic Surgery
15 Parkman St Ste 400
Boston, MA 02114
617 726-8229
Length: 2 Year(s) Total Positions: 4
Subspecialties: HSP
Program ID: 099-23-21-039

New England Deaconess Hospital Program
New England Deaconess Hospital
Beth Israel Hospital
Cambridge Hospital
Newton-Wellesley Hospital

Program Director:
Francis G. Wolford, MD
New England Deaconess Hospital
110 Francis St
Boston, MA 02115
617 632-9200
Length: 2 Year(s) Total Positions: 5
Subspecialties: HSP
Program ID: 099-23-21-124

Burlington
Lahey Clinic Program
Lahey Clinic
Boston University Medical Center-University Hospital

Program Director:
Brooke R. Sickel, MD
Plastic and Reconstructive Surgery
Lahey Clinic Medical Center
41 Mall Rd
Burlington, MA 01805
617 275-9640
Length: 2 Year(s) Total Positions: 4
Program ID: 099-24-21-125

Worcester
University of Massachusetts Medical Center Program*
University of Massachusetts Medical Center

Program Director:
Douglas M. Rockhoff, MD
University of Massachusetts Medical Center
55 Lake Ave N
54-761
Worcester, MA 01655-9228
508 856-6644
Length: 2 Year(s) Total Positions: 4
Program ID: 099-24-21-117

Michigan

Ann Arbor
University of Michigan Program
University of Michigan Hospitals
St. Joseph Mercy Hospital (Katherine McAuley Health System)
Veterans Affairs Medical Center (Ann Arbor)

Program Director:
David J. Smith Jr, MD
University of Michigan Medical Center
Section of Plastic Surgery
1500 E Medical Center Dr
Ann Arbor, MI 48109-0240
313 936-8205
Length: 2 Year(s) Total Positions: 6
Program ID: 090-25-21-042

Detroit
Wayne State University/Detroit Medical Center Program
Wayne State University School of Medicine
Children’s Hospital of Michigan
Detroit Receiving Hospital and University Health Center
Grace Hospital
Harper Hospital
Veterans Affairs Medical Center (Allen Park)

Program Director:
Michael J. Busuito, MD
Wayne State University School of Medicine
6-D University Health Center
4201 St Antoine
Detroit, MI 48201
313 745-8773
Length: 2 Year(s) Total Positions: 6
Subspecialties: HSP
Program ID: 090-25-21-043

Grand Rapids
Grand Rapids Area Medical Education Center Program
Grand Rapids Area Medical Education Center
Bridgman Memorial Medical Center
Butterworth Hospital
St. Mary’s Health Services

Program Director:
John H. Beenink, MD
Grand Rapids Area Medical Education Center
240 Cherry St SE
Grand Rapids, MI 49503
616 732-3632
Length: 2 Year(s) Total Positions: 4
Program ID: 080-25-22-044

Royal Oak
William Beaumont Hospital Program
William Beaumont Hospital

Program Director:
Robert Polk, MD
William Beaumont Hospital
3601 W 13 Mile Rd
Royal Oak, MI 48073
810 651-6489
Length: 2 Year(s) Total Positions: 2
Program ID: 080-25-12-045

Southfield
Providence Hospital Program
Providence Hospital

Program Director:
Ian T. Jackson, MD
Providence Hospital
16601 W Nine Mile Rd Box 2043
Southfield, MI 48037
810 424-3000
Length: 2 Year(s) Total Positions: 4
Program ID: 080-25-31-046

Minnesota

Minneapolis
University of Minnesota Program
University of Minnesota Medical School
Methodist Hospital
North Memorial Medical Center
St. Paul-Ramsey Medical Center
University of Minnesota Hospital and Clinic
Veterans Affairs Medical Center (Minneapolis)

Program Director:
Bruce L. Cunningham, MD
University of Minnesota Hospital
515 Delaware St SE
11-248 MMT/Sbox 122 UMHC
Minneapolis, MN 55455
612 625-1188
Length: 3 Year(s) Total Positions: 3
Program ID: 080-26-21-131

* Updated information not provided.
Rochester
Mayo Graduate School of Medicine Program
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Rochester)
Rochester Methodist Hospital
St Mary's Hospital of Rochester
Program Director:
Ulha Bice, MD
Mayo Graduate School of Medicine Application Processing Ctr
Mayo Graduate School of Medicine
200 First St SW
Rochester, MN 55905
651 283-4068
Length: 2 Year(s)  Total Positions: 8
Program ID: 360-29-21-047

Missouri
Columbia
University of Missouri-Columbia Program
University of Missouri-Columbia School of Medicine
Harry S Truman Memorial Veterans Hospital
University and Children’s Hospital
Program Director:
Charles L. Puckett, MD
University of Missouri-Columbia
One Hospital Dr
Columbia, MO 65212
573 884-2270
Length: 2 Year(s)  Total Positions: 4
Program ID: 360-29-21-049

Kansas City
University of Missouri at Kansas City Program
University of Missouri-Kansas City School of Medicine
Children’s Mercy Hospital
Menorah Medical Center
St Luke’s Hospital
Truman Medical Center-West
Program Director:
Federico Gonzales, MD
Truman Medical Center Section of Plastic Surgery
2001 Holmes St
Kansas City, MO 64108
816 566-3577
Length: 2 Year(s)  Total Positions: 4
Program ID: 360-29-21-050

St Louis
St Louis University Group of Hospitals Program
St Louis University School of Medicine
Cardinal Glennon Children’s Hospital
St Louis University Hospital
St Mary’s Health Center
Veterans Affairs Medical Center (St Louis)
Program Director:
Sameer E Shehadie, MD
St Louis University School of Medicine
5635 Vista Ave at Grand Blvd
PO Box 10525
St Louis, MO 63110-0525
314 577-3733
Length: 2 Year(s)  Total Positions: 6
Program ID: 360-29-21-061

Washington University Program
Barnes Hospital
St Louis Children’s Hospital
St Louis Regional Medical Center
Program Director:
Pau M Weeks, MD
Plastic Surgery 1424 E Pavilion
One Barnes Hospital Plaza
St Louis, MO 63110
314 854-8568
Length: 2 Year(s)  Total Positions: 9
Subspeciality: HS
Program ID: 360-29-21-002

New Hampshire
Lebanon
Dartmouth-Hitchcock Medical Center Program
Mary Hitchcock Memorial Hospital
Veterans Affairs Medical Center (White River Junction)
Program Director:
Joseph M Rosen, MD
Dartmouth-Hitchcock Medical Center
One Medical Center Dr
Lebanon, NH 03756-0001
603 650-8969
Length: 2 Year(s)  Total Positions: 2
Program ID: 360-32-21-119

New Jersey
Camden
UMDNJ-Robert Wood Johnson Medical School (Camden) Program
Cooper Hospital-University Medical Center
Children’s Hospital of Philadelphia
St Agnes Medical Center
Program Director:
Arthur S Brown, MD
Cooper Hospital-University Medical Center
Div of Plastic & Reconsr Surg
3 Cooper Plaza Ste 411
Camden, NJ 08103
609 941-3114
Length: 2 Year(s)  Total Positions: 2
Program ID: 360-33-21-132

Newark
UMDNJ-New Jersey Medical School Program
UMDNJ-New Jersey Medical School
Children’s Hospital of New Jersey Fraudknecht Medical Center
UMDNJ-University Hospital
Program Director:
Gregory E Rauscher, MD
UMDNJ-New Jersey Medical School
D-361 University Hospital
100 Bergen St
Newark, NJ 07103
201 988-4616
Length: 2 Year(s)  Total Positions: 4
Program ID: 360-33-21-119

New Mexico
Albuquerque
University of New Mexico Program
University of New Mexico School of Medicine
Lovelace Medical Center
University Hospital
Veterans Affairs Medical Center (Albuquerque)
Program Director:
James G Hoehn, MD
University of New Mexico School of Medicine
Div of Plastic Surgery
2211 Lomas Blvd NE
Albuquerque, NM 87131-5341
505 277-4284
Length: 2 Year(s)  Total Positions: 2
Program ID: 360-34-21-054

New York
Albany
Albany Medical Center Program
Albany Medical Center Hospital
Child's Hospital
St Peter's Hospital
Veterans Affairs Medical Center (Albany)
Program Director:
James G Hoehn, MD
Albany Medical College
Div of Plastic Surgery A-61-PL
47 New Scotland Ave
Albany, NY 12208-3479
518 266-0762
Length: 2 Year(s)  Total Positions: 5
Program ID: 360-35-21-055

Bronx
Albert Einstein College of Medicine Program
Albert Einstein College of Medicine of Yeshiva University
Bronx Municipal Hospital Center
Fakhil Correctional Facility-NY State Dept of Correction
Montefiore Medical Center-Henry and Lucy Moses Division
Montefiore Medical Center-Weiler Hospital
North Central Bronx Hospital
Program Director:
Bernie Strauch, MD
AECOM/Montefiore Medical Center
Dept of Plastic Surgery
3831 Bainbridge Ave
Bronx, NY 10467
718 920-5561
Length: 2 Year(s)  Total Positions: 8
Program ID: 360-36-21-064

* Updated information not provided.
Brooklyn
SUNY Health Science Center at Brooklyn
Program
SUNY HSC at Brooklyn College of Medicine
Kings County Hospital Center
Maimonides Medical Center
New York Methodist Hospital
University Hospital-SUNY Health Science Center at
Brooklyn
Veterans Affairs Medical Center (Brooklyn)
Program Director:
In Chul Song, MD
SUNY Health Science Center at Brooklyn
450 Clarkson Ave
Box 40
Brooklyn, NY 11203
718-270-1965
Length: 2 Year(s) Total Positions: 6
Program ID: 360-35-21-069

East Meadow
Nassau County Medical Center Program
Nassau County Medical Center
North Shore University Hospital
Winthrop-University Hospital
Program Director:
Roger L. Simpson, MD
Nassau County Medical Center
2201 Hempstead Trpk
8th Floor DCB
East Meadow, NY 11554
516-572-6703
Length: 2 Year(s) Total Positions: 5
Program ID: 360-35-21-058

New York
Harlem Hospital Center Program
Harlem Hospital Center
Program Director:
Ferdinand A. Ofodile, MD
Harlem Hospital Center
506 Lenox Ave
New York, NY 10037
212-885-3537
Length: 2 Year(s) Total Positions: 2
Program ID: 360-35-21-129

Mount Sinai School of Medicine Program
Mount Sinai School of Medicine
Beth Israel Medical Center
Einhorn Hospital Center-Mount Sinai Services
Mount Sinai Medical Center
Veterans Affairs Medical Center (Bronx)
Westchester County Medical Center
Program Director:
Lester Silver, MD
Mt Sinai Hospital/Box 1259
One Gustave L. Levy Pl
New York, NY 10029
212-241-5873
Length: 3 Year(s) Total Positions: 6
Program ID: 360-35-21-065

New York Hospital/Cornell Medical Center Program
New York Hospital
Memorial Sloan-Kettering Cancer Center
Program Director:
Lloyd A. Hoffman, MD
New York Hospital
525 E 68th St
Box 115
New York, NY 10021
212-746-5511
Length: 2 Year(s) Total Positions: 6
Program ID: 360-35-21-060

New York University Medical Center Program
New York University Medical Center
Bellevue Hospital Center
Manhattan Eye, Ear and Throat Hospital
Veterans Affairs Medical Center (Manhattan)
Program Director:
Joseph G. McCarthy, MD
New York University Medical Center
Inst of Reconstit Plastic Surgery
550 First Ave
New York, NY 10016
212-263-5269
Length: 2 Year(s) Total Positions: 8
Subspecialties: ISP
Program ID: 360-35-21-066

Presbyterian Hospital in the City of New York Program
Presbyterian Hospital in the City of New York
Program Director:
Norman L. Hugo, MD
Presbyterian Hospital in the City of New York
622 W 168th St
New York, NY 10032-3784
212-305-5085
Length: 2 Year(s) Total Positions: 4
Subspecialties: ISP
Program ID: 360-35-21-067

St Luke’s-Roosevelt Hospital Center Program
St Luke’s-Roosevelt Hospital Center
St Luke’s-Roosevelt Hospital Center-Roosevelt Division
St Luke’s-Roosevelt Hospital Center-St Luke’s Division
Program Director:
Peter B. Cintielli, MD
St Luke’s-Roosevelt Hospital Center
114th St & Amsterdam Ave
Clark Build Rm 61002 10th Fl
New York, NY 10025
212-239-7755
Length: 3 Year(s) Total Positions: 3
Program ID: 360-35-21-068

Rochester
University of Rochester Program
Strong Memorial Hospital of the University of Rochester
Genesee Hospital
Rochester General Hospital
Program Director:
R. Christie Wray Jr, MD
Strong Memorial Hospital of The University of Rochester
601 Elmwood Ave Box 661
Rochester, NY 14642-8661
716-271-5818
Length: 2 Year(s) Total Positions: 4
Program ID: 360-35-12-070

North Carolina
Chapel Hill
University of North Carolina Hospitals Program
University of North Carolina Hospitals
Carolina Medical Center
Program Director:
W. Thomas Lawrence, MD
University of North Carolina School of Medicine
Wing D Medical School
CB 7196
Chapel Hill, NC 27596-7196
919-981-4446
Length: 2 Year(s) Total Positions: 4
Program ID: 360-35-11-072

Durham
Duke University Program
Duke University Medical Center
Duke University Medical Center
Program Director:
Donald Serafin, MD
Div of Plastic Reconstructive Maxillofacial & Oral
Surgery
Duke University Medical Center
Box 3372
Durham, NC 27710
919-684-5847
Length: 3 Year(s) Total Positions: 9
Program ID: 360-36-21-073

Winston-Salem
Bowman Gray School of Medicine Program*
North Carolina Baptist Hospital
Program Director:
Louis C. Argenta, MD
Bowman Gray School of Medicine
Medical Center Blvd
Winston-Salem, NC 27157-1075
919-716-4416
Length: 2 Year(s) Total Positions: 3
Program ID: 360-36-11-074

Ohio
Akron
Akron City Hospital (Summa Health System)/NEUCOM Program
Akron City Hospital (Summa Health System)
Akron General Medical Center
Children's Hospital Medical Center of Akron
Program Director:
James M. Lewis, MD
Dept of Plastic Surgery
525 E Market St
Akron, OH 44309
216-374-5633
Length: 2 Year(s) Total Positions: 4
Program ID: 360-38-21-075

Cincinnati
University of Cincinnati Hospital Group Program
University of Cincinnati Hospital
Program Director:
Henry W. Neale, MD
University of Cincinnati Medical Center
Mail Location 558
Cincinnati, OH 45267-4558
513-556-4634
Length: 2 Year(s) Total Positions: 4
Program ID: 360-38-21-112

* Updated information not provided.
Cleveland
Case Western Reserve University Program
University Hospitals of Cleveland
MetroHealth Medical Center
Mount Sinai Medical Center of Cleveland
Veterans Affairs Medical Center (Cleveland)
Program Director: Brian H Windle, MD
University Hospitals of Cleveland
Plastic & Reconstructive Surgery
11110 Euclid Ave
Cleveland, OH 44106-5044
216 844-4782
Length: 2 Year(s) Total Positions: 5
Program ID: 360-38-21-078

Cleveland Clinic Foundation Program
Cleveland Clinic Foundation
St Vincent Charity Hospital and Health Center
Program Director: Randall J Jetmay, MD
Cleveland Clinic Foundation
9500 Euclid Ave T702
Dept of Plastic Surgery
Cleveland, OH 44195-5242
216 444-5690
Length: 2 Year(s) Total Positions: 4
Program ID: 360-38-21-079

Columbus
Ohio State University Program
Ohio State University Medical Center
Children's Hospital
Mount Carmel Medical Center
Riverside Methodist Hospitals
Program Director: Robert L Rubberg, MD
Ohio State University Div of Plastic Surgery
525 NW 10th Ave
Columbus, OH 43210-1228
614 293-3656
Length: 2 Year(s) Total Positions: 5
Program ID: 360-38-21-080

Dayton (Kettering)
Wright State University Program
Kettering Medical Center
Children's Medical Center
St Elizabeth Medical Center
Program Director: James Ashley, MD
Kettering Medical Center
3555 Southern Blvd
Kettering, OH 45429
937 296-7200
Length: 2 Year(s) Total Positions: 4
Program ID: 360-38-21-083

Toledo
Medical College of Ohio at Toledo Program
Medical College of Ohio Hospital
St Vincent Medical Center
Program Director: George B Bialik, MD
St Vincent Medical Center
Section of Plastic Surgery
2213 Cherry St
Toledo, OH 43608
419 321-4613
Length: 2 Year(s) Total Positions: 4
Subspecialities: HSP
Program ID: 360-38-21-084

Oklahoma
Oklahoma City
University of Oklahoma Health Sciences Center Program
University of Oklahoma College of Medicine-Oklahoma City
Children's Hospital of Oklahoma University
Hospital and Clinics
Veterans Affairs Medical Center (Oklahoma City)
Program Director: Norman S Levine, MD
University of Oklahoma Health Sciences Center
4555 NW 10th Street
Oklahoma City, OK 73103
405 271-4806
Length: 2 Year(s) Total Positions: 2
Program ID: 360-38-21-085

Oregon
Portland
Oregon Health Sciences University Program*
Oregon Health Sciences University
Children's Hospital Medical Center (Portland)
Program Director: Alan E Seyfer, MD
Oregon Health Sciences University
3181 SW Sam Jackson Park Rd L252A
Portland, OR 97239-3088
503 494-7884
Length: 2 Year(s) Total Positions: 5
Subspecialities: HSP
Program ID: 360-40-21-116

Pennsylvania
Allentown
Lehigh Valley Hospital/Pennsylvania State University Program
Lehigh Valley Hospital
Program Director: Walter J Olszewski, MD
Plastic Surgeons Professional Group
1230 S Cedar Crest Blvd
Ste #304
Allentown, PA 18103
610 432-1953
Length: 3 Year(s) Total Positions: 1
Program ID: 360-41-22-086

Hershey
Milton S Hershey Medical Center of Pennsylvania State University Program
Penn State University Hospital-Milton S Hershey Med Ctr
Harrisburg Hospital
Pohylcynic Medical Center
York Hospital
Program Director: Ernest K Maders, MD
Milton S Hershey Medical Center of Penn State University
PO Box 850
Hershey, PA 17033
717 531-8372
Length: 2 Year(s) Total Positions: 4
Program ID: 360-41-21-087

Philadelphia
Temple University Program
Temple University Hospital
Abington Memorial Hospital
St Christopher's Hospital for Children
Program Director: Amalakha Mitra, MD
Temple University Hospital
Dept of Plastic Surgery
3401 N Broad St
Philadelphia, PA 19140
215 797-2893
Length: 2 Year(s) Total Positions: 4
Program ID: 360-41-21-088

University of Pennsylvania Program
Hospital of the University of Pennsylvania
Bryn Mawr Hospital
Children's Hospital of Philadelphia
Program Director: Lynn A Whitaker, MD
University of Pennsylvania Medical Center
Div of Plastic Surgery
3400 Spruce St 10 Penn Tower
Philadelphia, PA 19104-4835
215 662-7075
Length: 2 Year(s) Total Positions: 6
Program ID: 360-41-21-089

Pittsburgh
University Health Center of Pittsburgh Program
University Health Center of Pittsburgh
Allegheny General Hospital
Children's Hospital of Pittsburgh
Presbyterian University Hospital/UPMC
Western Pennsylvania Hospital
Program Director: J William Patrell, MD
University of Pittsburgh School of Medicine
668 Scaife Hall
Pittsburgh, PA 15261
412 648-9673
Length: 2 Year(s) Total Positions: 8
Subspecialities: HSP
Program ID: 360-41-21-090

Rhode Island
Providence
Brown University Program
Rhode Island Hospital
Roger Williams Medical Center
Veterans Affairs Medical Center (Providence)
Program Director: Lee E Edstrom, MD
Rhode Island Hospital
Dept of Plastic Surgery
110 Lockwood St Ste 236
Providence, RI 02903
401 444-1188
Length: 2 Year(s) Total Positions: 4
Program ID: 360-43-21-092

* Graduate Medical Education Directory 697
South Carolina

Charleston

Medical University of South Carolina Program

Medical University of South Carolina College of Medicine
Charleston Memorial Hospital
MUSC Medical Center
Veterans Affairs Medical Center (Charleston)

Program Director:
Richard G. Hagerty, MD
Medical Univ of South Carolina Div of Plastic Surgery
Rm 425 Clinical Science Bldg
171 Ashley Ave
Charleston, SC 29425-2271
803 792-4273

Length: 2 Year(s)  Total Positions: 4
Program ID: 360-4522-003

Texas

Dallas

University of Texas Southwestern Medical Program

University of Texas Southwestern Medical School
Baylor University Medical Center
Children's Medical Center of Dallas
Dallas County Hospital District-Parishland Memorial Hospital
Veterans Affairs Medical Center (Dallas)
Zale-Lipshy University Hospital

Program Director:
Rod J Rubrich, MD
University of Texas Southwestern Medical Center
Div of Plastic Surgery
5323 Harry Hines Blvd
Dallas, TX 75390-0132
214 648-3671

Length: 2 Year(s)  Total Positions: 10
Subspecialties: HSP
Program ID: 360-46-21-097

Galveston

University of Texas Medical Branch Hospitals Program

University of Texas Medical Branch Hospitals
Shriners Burns Institute

Program Director:
Linda G Phillips, MD
Div of Plastic Surgery
University of Texas Med Branch
901 University Blvd
Galveston, TX 77550-0724
409 766-1155

Length: 2 Year(s)  Total Positions: 10
Program ID: 360-46-11-098

Houston

Baylor College of Medicine Program

Baylor College of Medicine
Baylor University Hospital
Methodist Hospital
St Luke's Episcopal Hospital
Texas Children's Hospital
University of Texas M D Anderson Cancer Center
Veterans Affairs Medical Center (Houston)

Program Director:
Saleh M Shereef, MD
Baylor College of Medicine
Div of Plastic Surgery
6559 Fannin #906
Houston, TX 77030
713 798-6141

Length: 2 Year(s)  Total Positions: 6
Subspecialties: HSP
Program ID: 360-46-31-099

St Joseph Hospital Program

St Joseph Hospital

Program Director:
Benjamin E Cohen, MD
St Joseph Hospital
1919 La Branch
1-GWS - Library
Houston, TX 77002
713 737-1000

Length: 2 Year(s)  Total Positions: 4
Program ID: 360-46-12-100

Tennessee

Chattanooga

University of Tennessee College of Medicine at Chattanooga Program*

University of Tennessee College of Medicine-Chattanooga
Erlanger Medical Center

Program Director:
John D Franklin, MD
Chattanooga Unit-University of Tennessee College of Medicine
Dept of Plastic Surgery
970 E Third St Ste 800
Chattanooga, TN 37403
615 758-7134

Length: 2 Year(s)  Total Positions: 5
Program ID: 360-46-11-094

Memphis

University of Tennessee Program*

University of Tennessee College of Medicine
Baptist Memorial Hospital
Methodist Hospital-Central Unit
Regional Medical Center at Memphis
University of Tennessee Medical Center
Veterans Affairs Medical Center (Memphis)

Program Director:
Charles E White, MD
Dept of Plastic Surgery
956 Court Ave Rm G230
Memphis, TN 38183
901 577-4641

Length: 2 Year(s)  Total Positions: 4
Program ID: 360-47-31-006

Nashville

Vanderbilt University Program

Vanderbilt University Medical Center
Baptist Hospital
Metropolitan Nashville General Hospital
Veterans Affairs Medical Center (Nashville)

Program Director:
John B Lynch, MD
Vanderbilt University Hospital
1201 Pierce Ave
200 MCS
Nashville, TN 37232-9601
615 936-0990

Length: 2 Year(s)  Total Positions: 6
Program ID: 360-47-21-096

Utah

Salt Lake City

University of Utah Program

University of Utah Medical Center
Holy Cross Hospital
Primary Children's Medical Center
Veterans Affairs Medical Center (Salt Lake City)

Program Director:
Laurel B Chick, MD
Div of Plastic and Reconstructive Surgery
60 N Medical Dr #9217
Salt Lake City, UT 84132
801 888-7719

Length: 2 Year(s)  Total Positions: 5
Program ID: 360-49-21-103

* Updated information not provided.
Virginia

Charlottesville

University of Virginia Program
University of Virginia Medical Center
Program Director:
Raymond F. Morgan, MD
University of Virginia Health Sciences Center
Box 376
Charlottesville, VA 22908
804 924-1254
Length: 2 Year(s) Total Positions: 4
Subspecialties: N/A
Program ID: 360-01-11-104

Richmond

Medical College of Virginia/Virginia Commonwealth University Program
Medical College of Virginia/Virginia Commonwealth University
Hunter Holmes McGuire VA Medical Center (Richmond)
Medical College of Virginia Hospitals
St Mary's Hospital
Program Director:
Austin I Mehrhof Jr, MD DDS
MCV/Virginia Commonwealth Univ
PO Box 980154
Richmond, VA 23298-0154
804 828-3030
Length: 2 Year(s) Total Positions: 4
Program ID: 360-01-21-108

Washington

Seattle

University of Washington Program
University of Washington School of Medicine
Children's Hospital and Medical Center
Harborview Medical Center
University of Washington Medical Center
Valley Medical Center
Veterans Affairs Medical Center (Seattle)
Program Director:
Loren H Engvall, MD
University of Washington
School of Medicine
Mail Stop 2A-16
Seattle, WA 98104
206 222-2009
Length: 3 Year(s) Total Positions: 3
Program ID: 360-04-31-123

Wisconsin

Madison

University of Wisconsin Program
University of Wisconsin Hospital and Clinics
Mertter Hospital
St Mary's Hospital Medical Center
Program Director:
David G Dibble, Jr, MD
Univ of Wisconsin Hosp and Clinics
600 Highland Ave Ste GS-356
Madison, WI 53792
608 263-1367
Length: 2 Year(s) Total Positions: 4
Program ID: 360-04-31-109

Preventive Medicine-Aerospace Medicine (Preventive Medicine-General)

Florida

Pensacola

Naval Aerospace and Operational Medical Institute Program*
Naval Aerospace and Operational Medical Institute
Program Director:
F H Jenkins, MD MPH
Naval Aerospace & Operational Medical Institute
Academicia Dept Code 32
230 Hewy Rd
Pensacola, FL 32508-1047
904 452-2741
Length: 1 Year(s) Total Positions: 15 (GYF: 0)
Program ID: 385-11-21-082

Ohio

Dayton

Wright State University Program*
Wright State University School of Medicine
Program Director:
Stanley R Mohler, MD
Wright State Univ Sch of Med Dept of Community Health Aerospace Medicine
PO Box 927
Dayton, OH 45401-0927
513 276-8398
Length: 2 Year(s) Total Positions: 11 (GYF: 0)
Program ID: 385-38-21005

Texas

San Antonio

USAF School of Aerospace Medicine Program*
USAF School of Aerospace Medicine
Program Director:
Theo J Geise, MD MPH
USAF School of Aerospace Medicine/AF
Dept of Aerospace Medicine
Brooks AFB, TX 78235-5801
512 536-2544
Length: 1 Year(s) Total Positions: 57 (GYF: 0)
Program ID: 385-48-21-001

* Updated information not provided.
Preventive Medicine-General

Arizona

Tucson

University of Arizona Program
University of Arizona College of Medicine
University Medical Center
Program Director:
D T Cordes, MD MPH
University of Arizona Health Sciences Center
Dept of Family and Community Med
Tucson, AZ 85724
602 931-4089
Length: 2 Year(s)  Total Positions: 10  (GY: 0)
Program ID: 380-03-31-007

California

Berkeley

University of California School of Public Health Program
University of California School of Public Health
Program Director:
James P Seward, MD MPP
University of California Berkeley
School of Public Health
140 Earl Warren Hall
Berkeley, CA 94720
510 642-6679
Length: 2 Year(s)  Total Positions: 13  (GY: 6)
Program ID: 380-03-31-008

Loma Linda

Loma Linda University Program
Loma Linda University Medical Center
Program Director:
Linda F Ferry, MD MPH
Loma Linda University Medical Center
Nichol Hall Rm 1202
Loma Linda, CA 92354
909 824-4918
Length: 3 Year(s)  Total Positions: 15  (GY: 2)
Program ID: 380-06-31-003

Los Angeles

UCLA School of Public Health Program
UCLA School of Public Health
Program Director:
Alfred K Neumann, MD MPH
University of California Los Angeles School of Public Health
Preventive Medicine Pmc
10833 Le Conte Ave. 71-236C CHS
Los Angeles, CA 90024-1772
310 825-6061
Length: 2 Year(s)  Total Positions: 8  (GY: 6)
Program ID: 380-05-31-010

San Diego

University of California (San Diego)/San Diego State University Program
University of California (San Diego) Medical Center
Graduate School of Public Health
Program Director:
Linda Hill, MD MPH
UCSD-SDSU Dept of General Preventive Medicine
San Diego State University
5300 Campanile Dr
San Diego, CA 92182-0667
619 594-5353
Length: 2 Year(s)  Total Positions: 9  (GY: 0)
Program ID: 380-06-31-038

Colorado

Denver

University of Colorado Program
University of Colorado Health Sciences Center
Program Director:
William M Marine, MD MPH
University of Colorado Health Sciences Center
Box C-245 4200 E Ninth Ave
Denver, CO 80262
303 270-6666
Length: 2 Year(s)  Total Positions: 8  (GY: 0)
Program ID: 380-07-31-041

District of Columbia

Washington

Walter Reed Army Institute of Research Program
Walter Reed Army Institute of Research
Program Director:
Bruce P Petruccelli, MD MPH
Dir of Preventive Medicine WRAIR
Bldg 40 Rm 2084
6935 16th St NW
Washington, DC 20007-5100
202 782-1312
Length: 2 Year(s)  Total Positions: 4  (GY: 0)
Program ID: 380-10-31-002

Hawaii

Honolulu

University of Hawaii School of Public Health Program
University of Hawaii at Manoa School of Public Health
Program Director:
Alan R Katz, MD MPH
University of Hawaii School of Public Health
1960 East-West Rd D-104-D
Honolulu, HI 96822
808 956-0785
Length: 2 Year(s)  Total Positions: 20  (GY: 0)
Program ID: 380-14-12-012

Kentucky

Lexington

University of Kentucky Medical Center Program
University Hospital-Albert B Chandler Medical Center
University of Kentucky College of Medicine
Program Director:
Terence R Collins, MD
University of Kentucky College of Medicine
Dept of Preventive Medicine
1141 Bed Mile Rd Ste 301
Lexington, KY 40504
606 323-6166
Length: 2 Year(s)  Total Positions: 2  (GY: 0)
Program ID: 380-33-31-009

Louisiana

New Orleans

Tulane University School of Public Health and Tropical Medicine Program
Tulane Univ School of Public Health and Tropical Medicine
Program Director:
Marie A Kreiss-Wood, MD MSPH
Community Medical Prgm
1430 Tulane Ave SL14
New Orleans, LA 70112-2989
504 988-5071
Length: 2 Year(s)  Total Positions: 8  (GY: 0)
Program ID: 380-21-31-014

Maryland

Baltimore

Johns Hopkins University School of Hygiene and Public Health Program*
Johns Hopkins University School of Hygiene/Public Health
Program Director:
Andrew L Dannenberg, MD MPH
Johns Hopkins Univ School of Hygiene and Public Health
624 N Broadway St 627
Baltimore, MD 21205
410 965-3630
Length: 2 Year(s)  Total Positions: 26  (GY: 1)
Program ID: 380-23-11-016

University of Maryland Program
University of Maryland School of Medicine
Program Director:
Judith D Robin, MD MPH
Dep of Epidemiology & Preventive Medicine
Univ of Maryland School of Medicine
659 W Redwood St
Baltimore, MD 21201-1586
410 706-2864
Length: 2 Year(s)  Total Positions: 7  (GY: 0)
Program ID: 380-33-11-016

* Updated information not provided.
Accredited Programs in Preventive Medicine-General

Bethesda

Uniformed Services University of the Health Sciences Program
USUHS F Edward Herbert School of Medicine
Program Director:
Brian H Feighner, MD MPH
Uniformed Serv University of the Health Sciences
Box A1024 P hub
4301 Jones Bridge Rd
Bethesda, MD 20814-4799
301 285-3717
Length: 2 Year(s) Total Positions: 16 (GY: 0)
Program ID: 380-22-31444

Massachusetts

Boston

Boston University Program*
Boston University Medical Center-University Hospital
Boston Department of Health and Hospitals
Boston University School of Medicine
Boston University School of Public Health
Edith Nourse Rogers Memorial Veterans Hospital
Program Director:
Donald C Berns, MD
Boston University Medical Center
720 Harrison Ave Ste 1108
Boston, MA 02118
617 638-5470
Length: 2 Year(s)
Program ID: 380-24-21-037
Carney Hospital Program
Carney Hospital
Boston University School of Public Health
Program Director:
Paul Hartto, MD
Carney Hospital
2100 Dorchester Ave
Boston, MA 02124-6666
617 296-4220
Length: 2 Year(s) Total Positions: 20 (GY: 0)
Program ID: 380-24-21-043

Worcester

University of Massachusetts Medical Center Program*
University of Massachusetts Medical Center
University of Massachusetts School of Medicine
Program Director:
Roger S Lackman, MD
Department of Family and Community Medicine
Univ of Massachusetts Medical Ctr
65 Lake Av N
Worcester, MA 01655
508 856-4150
Length: 2 Year(s) Total Positions: 2 (GY: 0)
Program ID: 380-24-21-018

Minnesota

Rochester

Mayo Graduate School of Medicine Program
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Rochester)
University of Minnesota School of Public Health
Program Director:
Robert Orford, MD MS MPH
Mayo Graduate School of Medicine Application
Processing Ctr
Mayo Graduate School of Medicine
200 First St SW
Rochester, MN 55905
612 284-3128
Length: 2 Year(s) Total Positions: 3 (GY: 0)
Program ID: 385-35-31-047

New York

Buffalo

SUNY at Buffalo Graduate Medical-Dental Education Consortium Program
SUNY at Buffalo Grad Medical-Dental Education Consortium
Buffalo General Hospital
Program Director:
Michael P New, MD MPH
State University of New York at Buffalo
Dept of Social and Preventive Med
3455 Main St 270 Farber Hall
Buffalo, NY 14214
716 829-3975
Length: 2 Year(s) Total Positions: 6 (GY: 0)
Program ID: 380-35-21-045

New York

Cornell University Medical College Program
Cornell University Medical College
Program Director:
Lewis M Drusin, MD MPH
New York Hospital-Cornell Medical Center
525 E 68th St
New York, NY 10021
212 746-1754
Length: 2 Year(s) Total Positions: 2 (GY: 0)
Program ID: 380-35-21-023

Mount Sinai School of Medicine Program
Mount Sinai School of Medicine
Mount Sinai Medical Center
Program Director:
Clyde B Schechter, MD
One Gustave L Levy Pl
Box 1043
New York, NY 10029
212 241-7544
Length: 2 Year(s) Total Positions: 8 (GY: 0)
Program ID: 380-35-21-024

North Carolina

Chapel Hill

University of North Carolina Hospitals Program
University of North Carolina Hospitals
University of North Carolina School of Medicine
Program Director:
Desmond K Rundam, MD DRPH
Preventive Medicine Residency Program
Wing D CB47240
University of North Carolina Chapel Hill, NC 27599-7240
919 962-1136
Length: 2 Year(s) Total Positions: 10 (GY: 0)
Program ID: 380-35-31-056

Tennessee

Nashville

George W Hubbard Hospital of Meharry Medical College Program*
George W Hubbard Hospital of Meharry Medical College
Program Director:
Richard A Carter, MD MPH
Meharry Medical College
20 B Todd Jr Blvd
Nashville, TN 37208
615 327-8737
Length: 3 Year(s)
Program ID: 380-47-31-028

Wisconsin

Milwaukee

Medical College of Wisconsin Program
Medical College of Wisconsin Affiliated Hospitals Inc
Medical College of Wisconsin
Program Director:
Mark A Roberts, MD PhD
Dept of Preventive Medicine
Medical College of Wisconsin
8701 Watertown Plank Rd
Milwaukee, WI 53226
414 456-4500
Length: 2 Year(s) Total Positions: 4 (GY: 0)
Subspecialities: OM
Program ID: 380-35-21-011

* Updated information not provided.

Graduate Medical Education Directory
Preventive Medicine-Occupational Medicine (Preventive Medicine-General)

Alabama

Birmingham

University of Alabama Medical Center Program
University of Alabama at Birmingham: School of Public Health
University of Alabama at Birmingham School of Medicine
Program Director: Timothy J Key, MD
University of Alabama Medical Center
600 20th St S
Birmingham, AL 35205
266-397-7093
Length: 2 Year(s) Total Positions: 6 (GY: 0)
Program ID: 390-01-21-049

Arizona

Tucson

University of Arizona Program
University of Arizona College of Medicine
Program Director: D E Cordes, MD MPH
University of Arizona Health Sciences Center
Dept of Family and Community Med
Tucson, AZ 85724
602-626-4609
Length: 2 Year(s) (GY: 0)
Program ID: 390-04-21-022

California

Davis

University of California (Davis) Program
University of California (Davis) School of Medicine
University of California (Davis) Medical Center Hospital
University of California at Davis School of Public Health
Program Director: Stephen A McCurdy, MD
University of California Davis
Occupational/Environ Med & Epidemiology
5170 Old Davis Rd
Davis, CA 95616-5848
916-752-3311
Length: 2 Year(s) Total Positions: 7 (GY: 2)
Program ID: 390-05-21-048

Irvine

University of California (Irvine) Program
University of California (Irvine) College of Medicine
UCLA School of Public Health
Program Director: Dean B Baker, MD MPH
University of California Irvine
Irvine Occupational Health Center
19222 MacArthur Blvd
Irvine, CA 92715
714-856-8761
Length: 2 Year(s) Total Positions: 0 (GY: 0)
Program ID: 390-06-21-046

Los Angeles

University of Southern California Program
University of Southern California School of Medicine
UCLA School of Public Health
Program Director: John M Peters, MD
Division of Occupational & Environmental Medicine
USC School of Medicine
1540 Alcove Street Ste 236
Los Angeles, CA 90033
213-342-1066
Length: 2 Year(s) Total Positions: 4 (GY: 0)
Program ID: 390-06-21-036

San Francisco

University of California (San Francisco) Program
University of California (San Francisco) School of Medicine
San Francisco General Hospital Medical Center
University of California School of Public Health
Program Director: John B Balboni, MD
University of California (San Francisco)
Campus Box 0843
San Francisco, CA 94143-0843
415-253-6300
Length: 2 Year(s) Total Positions: 5 (GY: 0)
Program ID: 390-05-21-028

Connecticut

Farmington

University of Connecticut Program
University of Connecticut School of Medicine
UConn Health Center/John Dempsey Hospital
Program Director: Michael J Hodgson, MD MPH
University of Connecticut Health Center
Bidg 12 MC 6100
Farmington, CT 06030
203-787-2684
Length: 2 Year(s) Total Positions: 4 (GY: 0)
Program ID: 390-08-21-058

New Haven

Yale-New Haven Medical Center Program
Yale-New Haven Hospital
Program Director: Mark B Cullen, MD
Occupational and Environmental Medicine
Yale University School of Medicine
135 College St Rm 366
New Haven, CT 06511-2483
203-737-5960
Length: 2 Year(s) Total Positions: 6 (GY: 0)
Program ID: 390-09-21-047

District of Columbia

Washington

George Washington University Program
George Washington University School of Medicine
George Washington University Hospital
Program Director: Rosemary K Sokas, MD
GWU/Div of Occupational Health
The Warwick Bldg
2230 K St NW Rm 201
Washington, DC 20007
202-994-1734
Length: 2 Year(s) Total Positions: 2 (GY: 0)
Program ID: 390-19-21-004

Florida

Tampa

University of South Florida Program
University of South Florida College of Medicine
Tampa General Hospital
University of South Florida College of Public Health
Program Director: Stuart M Brooks, MD
Dept of Environment & Occupational Health
U of South Florida Coll of Pub Hlth
13201 Bruce B Downs Blvd
Tampa, FL 33612-3906
813-974-0620
Length: 2 Year(s) Total Positions: 2 (GY: 0)
Program ID: 390-11-21-060

* Updated information not provided.
| State   | City                  | Institution Name                                         | Program Name                                                   | Program Director                                      | Program Director Email | Length (Years) | Total Positions | Program ID:     |
|---------|-----------------------|----------------------------------------------------------|----------------------------------------------------------------|-------------------------------------------------------|-------------------------|----------------|----------------|----------------|----------------|
| Georgia | Atlanta               | Emory University                                          | Emory University Program                                       | Howard Frumkin, MD DrPH                                |                        | 2             | 4 (GY: 0)      | 390-12-21-404 |
| Illinois| Chicago               | Cook County Hospital                                     | Cook County Hospital Program                                    | SkyeSten M Hasel, MD MPH                               |                        | 2             | 8 (GY: 3)      | 390-16-21-030 |
|         |                       | University of Illinois College of Medicine at Chicago     | University of Illinois College of Medicine at Chicago Program   | Stephen Hasel, MD MPH                                   |                        | 2             | 5 (GY: 0)      | 390-10-12-007 |
|         |                       | University of Illinois College of Medicine at Chicago     | University of Illinois College of Medicine at Chicago Program   | Stephen Hasel, MD MPH                                   |                        | 2             | 5 (GY: 0)      | 390-10-12-007 |
| Kentucky| Lexington             | University of Kentucky Medical Center Program            | University of Kentucky Medical Center Program                  | Arthur L. Frank, MD                                    |                        | 2             | 8 (GY: 0)      | 390-30-21-039 |
| Maryland| Aberdeen Proving Ground | US Army Environmental Hygiene Agency Program               | US Army Center for Health Promotion and Preventive Medicine     | John Hopkins University School of Hygiene/Public Health |                        | 2             | 8 (GY: 0)      | 390-23-12-001 |
|         |                       | Aberdeen Proving Ground                                   | Aberdeen Proving Ground                                         | John Hopkins University School of Hygiene/Public Health |                        | 2             | 8 (GY: 0)      | 390-23-12-001 |
| Boston  | Bethesda             | Uniformed Services University of the Health Sciences Program | Uniformed Services University of the Health Sciences Program    | Gail M. Gallickson, MD                                  |                        | 2             | 16 (GY: 0)     | 390-23-21-046 |
|         |                       | University of Massachusetts Medical Center Program*       | University of Massachusetts Medical Center Program              | Glenn Przynski, MD MPH                                 |                        | 2             | 4 (GY: 0)      | 390-24-21-051 |

*Updated information not provided.
Michigan

Ann Arbor

University of Michigan School of Public Health Program

University of Michigan School of Public Health
Program Director:
David H. Garnir, MD
University of Michigan School of Public Health
1420 Washington Heights
Ann Arbor, MI 48109-2029
313 764-2594
Length: 2 Year(s) Total Positions: 14 (GYI: 0)
Program ID: 390-35-21-031

New Jersey

Piscataway

UMDNJ-Robert Wood Johnson Medical School Program

UMDNJ-Robert Wood Johnson Medical School
Program Director:
Michael S. Schreiber, MD
UMDNJ Robert Wood Johnson Medical School
Dept. of Envir. & Comm. Medicine
670 Hoes Ln
Piscataway, NJ 08854-5635
908 922-0190
Length: 2 Year(s) Total Positions: 4 (GYI: 0)
Program ID: 390-38-21-039

Ohio

Cincinnati

University of Cincinnati Hospital Group Program

University of Cincinnati Hospital
Program Director:
Douglas H. Linz, MD
Occupational & Environmental Medicine
University of Cincinnati
PO Box 670182
Cincinnati, OH 45267-0182
513 558-0830
Length: 2 Year(s) Total Positions: 8 (GYI: 0)
Program ID: 390-35-21-017

Oklahoma

Oklahoma City

University of Oklahoma Health Sciences Center Program

University of Oklahoma College of Medicine-Oklahoma City
Mediwork Occupational Health Network (Tulsa)
University Hospital and Clinics
Program Director:
Lynn V. Mitchell, MD
University of Oklahoma Health Sciences Center
Dept of Family Medicine
800 NE 15th St Rm 520
Oklahoma City, OK 73104
405-271-6177
Length: 2 Year(s) Total Positions: 14 (GYI: 0)
Program ID: 390-39-21-040

Pennsylvania

Pittsburgh

University of Pittsburgh Graduate School of Public Health Program

University of Pittsburgh Graduate School of Public Health
Program Director:
David J. Tollefson, MD
Bertram D. Finneman, MD
University of Pittsburgh Graduate School of Public Health
10111 Parran Hall
Pittsburgh, PA 15261
412 624-3155
Length: 2 Year(s) Total Positions: 6 (GYI: 0)
Program ID: 390-41-21-098

Tennessee

Nashville

George W. Hubbard Hospital of Meharry Medical College Program

George W. Hubbard Hospital of Meharry Medical College
Program Director:
Joe S. Simon, MD
Meharry Medical College
Dept of Family and Preventive Med
1005 Dr. B. Todd Jr Blvd
Nashville, TN 37208
615 237-6736
Length: 3 Year(s) Total Positions: 6 (GYI: 2)
Program ID: 390-47-21-029

* Updated information not provided.
Texas

Houston
University of Texas School of Public Health Program
University of Texas School of Public Health
Program Director:
George L Delclos, MD MPH
University of Texas School of Public Health
PO Box 20186
Houston, TX 77225-0186
713 792-7456
Length: 2 Year(s) Total Positions: 6 (GYI: 0)
Program ID: 390-48-21-019

Tyler
University of Texas Health Center at Tyler Program
University of Texas Health Center at Tyler
University of Texas School of Public Health
Program Director:
Johney L Lovin, MD MSPH
Dir of Occupational & Environmental Medicine
PO Box 2003
Tyler, TX 75711
903 877-7202
Length: 2 Year(s) Total Positions: 6
Program ID: 390-48-21-061

Utah

Salt Lake City
University of Utah Program
University of Utah Medical Center
University of Utah School of Medicine
Program Director:
Royce Yosser Jr, MD
Anthony Surula, MD MPH
University of Utah KCOM/DFFP Program
Occupational Medicine Program
Edg 512
Salt Lake City, UT 84112
801 581-3841
Length: 2 Year(s) Total Positions: 6 (GYI: 0)
Program ID: 390-49-21-026

Washington

Seattle
University of Washington School of Public Health and Community Medicine Program
University of Washington School of Public Health
Program Director:
Scott Barnhart, MD MPH
Harborview Medical Center
325 Ninth Ave ZA-06
Seattle, WA 98104-2400
206 225-3368
Length: 2 Year(s) Total Positions: 7 (GYI: 3)
Program ID: 390-54-21-034

West Virginia

Morgantown
West Virginia University Program
West Virginia University School of Medicine
Kanawha-Charleston Health Department
West Virginia University Hospitals
Program Director:
Alan Dutra, MD
West Virginia University School of Medicine
PO Box 9190
Morgantown, WV 26506-9190
304 293-3601
Length: 1 Year(s) Total Positions: 6 (GYI: 3)
Program ID: 390-56-21-055

Wisconsin

Milwaukee
Medical College of Wisconsin Program A
Medical College of Wisconsin Affiliated Hospitals Inc
Medical College of Wisconsin
Program Director:
Mark A Roberts, MD PhD
Occupational Medicine Pgrn Dir
8701 Watertown Plank Rd
Milwaukee, WI 53226
414 456-4500
Length: 2 Year(s) Total Positions: 6 (GYI: 0)
Program ID: 390-56-21-056

Medical College of Wisconsin Program B
Medical College of Wisconsin Affiliated Hospitals Inc
Medical College of Wisconsin
Program Director:
J Steven Moore, MD
Medical College of Wisconsin
Dept of Preventive Medicine
8701 Watertown Plank Rd
Milwaukee, WI 53226
414 456-4500
Length: 1 Year(s) Total Positions: 3 (GYI: 0)
Program ID: 390-56-31-039

Florida

West Palm Beach
Palm Beach County Public Health Unit Program
Palm Beach County Public Health Unit
Program Director:
Jean M Maleck, MD MPH
Palm Beach County Public Health Unit
PO Box 29
826 Evernia St
West Palm Beach, FL 33402
407 355-3119
Length: 2 Year(s) Total Positions: 4 (GYI: 2)
Program ID: 390-111-11-04

Illinois

Springfield
Illinois Department of Public Health Program
Illinois Department of Public Health
University of Illinois School of Public Health
Program Director:
Byron J Frank, MD
Illinois Department of Public Health
525 W Jefferson St
Springfield, IL 62751
217 785-7105
Length: 2 Year(s) Total Positions: 2 (GYI: 0)
Program ID: 396-196-21-005

* Updated information not provided.
Maryland

Baltimore

Maryland State Department of Health and Mental Hygiene Program
Maryland State Department of Health and Mental Hygiene
George Washington University Hospital
Johns Hopkins University School of Hygiene/Preventive Medicine
Program Director:
Chinnamural Devadason, MD DPH
Department of Health and Mental Hygiene
201 W Preston St
Baltimore, MD 21201
410 225-5300
Length: 2 Year(s) Total Positions: 2 (GYI: 0)
Program ID: 395-23-32-001

Missouri

St Louis

St Louis University School of Medicine Program
St Louis University School of Medicine Missouri Department of Health
Program Director:
James R Kinney, MD MPH
A Lesley Maclaren, MD MPH
St Louis University Health Science Centers
Office of the Vice President 3550 Caroline St
St Louis, MO 63104-1085
314 577-8100
Length: 2 Year(s) Total Positions: 2 (GYI: 0)
Program ID: 395-26-01-026

New Jersey

Trenton

New Jersey State Department of Health Program
State of New Jersey Department of Health
Program Director:
Andrew D Miller, MD MPH
New Jersey Department of Health
CN 364
50 E State St 6th Fl
Trenton, NJ 08625-0864
609 292-4093
Length: 2 Year(s) Total Positions: 2 (GYI: 0)
Program ID: 395-39-21-011

New York

New York City Department of Health Program
New York City Department of Health Columbia University School of Public Health
Program Director:
Doris Goldberg, MD MPH
New York City Department of Health Box 25 CMC N1085
366 Broadway
New York, NY 10013
212 443-3535
Length: 1 Year(s) Total Positions: 2 (GYI: 0)
Program ID: 395-36-21-013

Oregon

Portland

Oregon Health Sciences University Program
Oregon Health Sciences University Hospital
Program Director:
Evelyn P Whislock, MD MPH
Oregon Health Sciences University CB 669
Dept of Public Health & Prev Med
3181 SW Sam Jackson Park Rd
Portland, OR 97201-3089
503 494-2559
Length: 1 Year(s) Total Positions: 4 (GYI: 0)
Program ID: 395-40-01-016

Texas

Austin

Texas Department of Health Program
Texas Department of Health
Program Director:
Richard O Proctor, MD MPH
Texas Department of Health
15000 Forum Place Dr
Ste 100
Houston, TX 77060-8569
713 414-5000
Length: 1 Year(s) Total Positions: 4 (GYI: 0)
Program ID: 395-49-12-018

Virginia

Richmond

Medical College of Virginia/Virginia Commonwealth University Program
Medical College of Virginia/Virginia Commonwealth University
Commonwealth of Virginia Department of Health Medical College of Virginia Hospitals
Program Director:
William R Nelson, MD MPH
Medical College of Virginia Commonwealth Univ PO Box 890112
Richmond, VA 23298-0212
804 828-8785
Length: 2 Year(s) Total Positions: 1 (GYI: 0)
Program ID: 396-61-51-029

Washington

Tacoma

Madigan Army Medical Center Program*
Madigan Army Medical Center
Program Director:
Margot R Krauss, MD MPH
Madigan Army Medical Center
Preventive Medicine Service
Tacoma, WA 98431
206 968-4479
Length: 2 Year(s) Total Positions: 6 (GYI: 0)
Program ID: 395-54-21-026

* Updated information not provided.
Preventive Medicine-Public Health and General Preventive Medicine (Preventive Medicine-General)

Georgia

Atlanta

Centers for Disease Control and Prevention Program*
Centers for Disease Control and Prevention
1600 Clifton Rd NE MS C08
Atlanta, GA 30333
404 639-3187
Length: 2 Year(s) Total Positions: 27 (GYI: 15)
Program ID: 397-12-21-011

Emory University Program*
Emory University School of Medicine
Emory University School of Public Health
Georgia Dept of Human Resources-Division of Public Health
Grady Memorial Hospital
Veterans Affairs Medical Center (Atlanta)
Program Director:
Richard B Rothenberg, MD MPH
Dept of Family and Preventive Medicine
Emory Univ School of Public Health
69 Butler St SE
Atlanta, GA 30303
404 615-5696
Length: 2 Year(s) Total Positions: 12
Program ID: 397-12-21-015

Morehouse School of Medicine Program
Morehouse School of Medicine
Georgia Dept of Human Resources-Division of Public Health
Program Director:
Beverly D Taylor, MD
Morehouse School of Medicine Dept Community Health/Pree Med
720 Westview Dr SW
Atlanta, GA 30310-1405
404 755-1920
Length: 2 Year(s) Total Positions: 7 (GYI: 0)
Program ID: 397-12-21-008

New York

Albany

SUNY at Albany School of Public Health Program
New York State Department of Health
University of Albany School of Public Health
Program Director:
Guthrie S Birkhead, MD MPH
651 Corning Tower
Empire State Plaza
Albany, NY 12237
518 473-4405
Length: 2 Year(s) Total Positions: 4 (GYI: 0)
Program ID: 397-56-21-010

Stony Brook

SUNY at Stony Brook Program
University Hospital-SUNY at Stony Brook
Columbia University School of Public Health
Nassau County Department of Health
Suffolk County Department of Health Services
Program Director:
Dorothy S Lane, MD MPH
State University of New York at Stony Brook
School of Medicine
Stony Brook, NY 11794-8006
631 444-3902
Length: 2 Year(s) Total Positions: 7 (GYI: 0)
Program ID: 397-36-21-004

Washington

Seattle

University of Washington School of Public Health and Community Medicine Program
University of Washington School of Public Health
Program Director:
Gary M Goldbaum, MD MPH
University of Washington
School of Public Health SC-30
1959 NE Pacific St
Seattle, WA 98195
206 543-1444
Length: 2 Year(s) Total Positions: 15 (GYI: 0)
Program ID: 397-54-21-006

Ohio

Columbus

Ohio State University Program
Ohio State University Medical Center
Ohio State University College of Medicine
Program Director:
John V Griesman, MD
Ohio State University
Dept of Preventive Medicine
B-116 Starling-Loving Hall
Columbus, OH 43210-1140
614 293-3907
Length: 2 Year(s) Total Positions: 3 (GYI: 2)
Program ID: 397-38-21-012

South Carolina

Columbia

University of South Carolina School of Medicine Program
University of South Carolina School of Medicine
Program Director:
Ernest P McCutcheon, MD MPH
Div of Preventive Medicine
Dept of Family and Preventive Med
Six Richland Medical Park
Columbia, SC 29009
803 444-5116
Length: 2 Year(s) Total Positions: 6 (GYI: 0)
Program ID: 397-45-21-006

* Updated information not provided.
Psychiatry

Alabama

Birmingham

University of Alabama Medical Center Program
University of Alabama Hospital
Veterans Affairs Medical Center (Birmingham)
Program Director:
Natan B Sault, MD
University of Alabama at Birmingham School of Medicine
 Dept of Psychiatry
UAB Station
Birmingham, AL 35294
205 996-8541
Length: 4 Year(s) Total Positions: 14 (GYI: 6)
Program ID: 406-01-11-049

Mobile

University of South Alabama Program
University of South Alabama Medical Center
Sealy State Hospital
USA Doctors Hospital
USA Knollwood Park Hospital
Program Director:
Daniel Daniels, MD
University of South Alabama
Dept of Psychiatry
3411 Medical Park Dr W #2
Mobile, AL 36603
205 661-3799
Length: 4 Year(s) Total Positions: 16 (GYI: 3)
Program ID: 408-01-22-232

Arizona

Phoenix

Good Samaritan Regional Medical Center Program
Good Samaritan Regional Medical Center
Program Director:
James B McLeod, MD
Good Samaritan Regional Medical Center
Samaritan Behavioral Health Ctr
925 E McDowell Rd 4th Fl
Phoenix, AZ 85006
602 239-6389
Length: 4 Year(s) Total Positions: 15 (GYI: 4)
Program ID: 408-04-12-010

Maricopa Medical Center Program
Maricopa Medical Center
Program Director:
Steven F Dingle, MD
Maricopa Medical Center
9061 E Roosevelt
Phoenix, AZ 85008
602 297-5751
Length: 4 Year(s) Total Positions: 24 (GYI: 6)
Program ID: 408-03-22-011

Tucson

University of Arizona Program
University of Arizona College of Medicine
Kino Community Hospital
University Medical Center
Veterans Affairs Medical Center (Tucson)
Program Director:
Rebecca L Potter, MD
University of Arizona
Dept of Psychiatry
1601 N Campbell Ave
Tucson, AZ 85724
520 626-7065
Length: 4 Year(s) Total Positions: 21 (GYI: 7)
Program ID: 408-03-21-012

Arkansas

Little Rock

University of Arkansas for Medical Sciences Program
University of Arkansas College of Medicine
Arkansas Children's Hospital
Arkansas State Hospital-Little Rock Hospital
John L McClellan Memorial Veteran Hospital
University Hospital of Arkansas
Program Director:
David B Matthew, MD PhD
University of Arkansas for Medical Sciences
4201 W Markham
Sed 539
Little Rock, AR 72205
501 549-0929
Length: 4 Year(s) Total Positions: 28 (GYI: 7)
Subspecialties: CHP
Program ID: 408-04-23-014

California

Fresno

University of California (San Francisco)/Fresno Program
UCSF Fresno Medical Education Program
Valley Medical Center of Fresno
Veterans Affairs Medical Center (Fresno)
Program Director:
Royle Leigh, MD
University of California San Francisco - Fresno
Dept of Psychiatry 116A
2615 E Clinton Ave
Fresno, CA 93703
559 239-5031
Length: 4 Year(s) Total Positions: 10 (GYI: 5)
Program ID: 408-05-21-018

Loma Linda

Loma Linda University Program
Loma Linda University Medical Center
Jerry L Pettis Memorial Veteran Hospital
Program Director:
William H McGhee, MD ED
Dept of Psychiatry
Loma Linda University
PO Box 1007
Loma Linda, CA 92354
909 799-6804
Length: 4 Year(s) Total Positions: 22 (GYI: 6)
Program ID: 408-05-21-021

Los Angeles

Cedars-Sinai Medical Center Program
Cedars-Sinai Medical Center
Los Angeles County-USC Medical Center
Program Director:
Dr. James Schoon, MD
Cedars-Sinai Medical Center Psychiatry Dept
Thalians Mental Health Center W155
8730 Aiden Dr
Los Angeles, CA 90048-0750
310 260-3800
Length: 4 Year(s) Total Positions: 16 (GYI: 4)
Program ID: 408-05-11-022

Charles R Drew University Program
Charles R Drew University of Medicine and Science
LAC-King/Drew Medical Center
Program Director:
Vijayakalakshmi M Rangadurai, MD
King Drew Medical Center Dept of Psychiatry
1720 E 120th St
Los Angeles, CA 90059
310 669-3588
Length: 4 Year(s) Total Positions: 28 (GYI: 7)
Program ID: 408-05-35-024

UCLA Medical Center Program*
UCLA School of Medicine
UCLA Neuropsychiatric Hospital
Program Director:
Joel Yager, MD
UCLA Neuropsychiatric Hosp
760 Westwood Plaza C8-849
Los Angeles, CA 90095-1754
310 825-0007
Length: 4 Year(s) Total Positions: 60 (GYI: 11)
Subspecialties: CHP
Program ID: 408-05-21-025

University of Southern California Program
Los Angeles County-USC Medical Center
Program Director:
Charles W Patterson, MD
Dept of Psychiatry
LAC+USC Medical Center
1934 Hospital Pl
Los Angeles, CA 90033
312 236-4945
Length: 4 Year(s) Total Positions: 71 (GYI: 10)
Program ID: 408-05-11-023

Los Angeles (Sepulveda)

UCLA San Fernando Valley Program
Veterans Affairs Medical Center (Sepulveda)
LAC-Gilbey View Medical Center
Program Director:
Murray Brown, MD
Education Office (116A) Psychiatry Dept
Sepulveda VA Medical Center
16111 Plummer St
Sepulveda, CA 91343-2036
818 896-0049
Length: 4 Year(s) Total Positions: 31 (GYI: 6)
Program ID: 408-05-11-032

*Updated information not provided.
Napa
Napa State Hospital Program
Napa State Hospital
Marin County Mental Health Services
Solano County Mental Health Clinic
Program Director: Edwin P Breman, MD
Napa State Hospital
2100 Napa Valley Hwy
Napa, CA 94558-6293
707-233-5661
Length: 4 Year(s) Total Positions: 12 (GYI: 0)
Program ID: 400-05-22-019

Orange
University of California (Irvine) Program
University of California (Irvine) Medical Center
Veterans Affairs Medical Center (Long Beach)
Program Director: Rhoda Hahn, MD
University of California (Irvine) Medical Center
101 City Dr S
Orange, CA 92868
714-856-5770
Length: 4 Year(s) Total Positions: 36 (GYI: 9)
Program ID: 400-05-21-040

Sacramento
University of California (Davis) Program
University of California (Davis) Medical Center
Program Director: Mark B Severn, MD
University of California (Davis) Medical Center
2315 Stockton Blvd
Sacramento, CA 95817
916-734-3614
Length: 4 Year(s) Total Positions: 21 (GYI: 4)
Subspecialties: CHP
Program ID: 400-05-31-017

San Diego
Naval Medical Center (San Diego) Program
Naval Medical Center (San Diego)
Program Director: Capt Lindsey J Faden, MD
Naval Medical Center
San Diego, CA 92134-5000
619-522-6522
Length: 4 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 400-05-21-283

San Francisco
California Pacific Medical Center Program
California Pacific Medical Center
California Pacific Medical Center (Pacific Campus)
Program Director: Thomas C Nesland, MD
California Pacific Medical Center
2500 Clay St 7th Fl
San Francisco, CA 94115
415-923-3257
Length: 4 Year(s) Total Positions: 13 (GYI: 0)
Program ID: 400-05-22-025

University of California (San Francisco) Program
University of California (San Francisco) School of Medicine
Langley Porter Psychiatric Hospital and Clinics
San Francisco General Hospital Medical Center
University of California (San Francisco) Medical Center
Veterans Affairs Medical Center (San Francisco)
Program Director: Marc Jacobs, MD
University of California (San Francisco) School of Medicine
401 Parnassus Ave Box 88064
San Francisco, CA 94143
415-476-7577
Length: 4 Year(s) Total Positions: 64 (GYI: 14)
Program ID: 400-05-21-030

San Mateo
San Mateo Community Mental Health Services Program*
San Mateo County General Hospital
Program Director: A Wayne Lewis, MD
Psychiatry Residency Training Program
San Mateo County General Hospital
222 W 35th Ave
San Mateo, CA 94403
415-573-2500
Length: 4 Year(s) Total Positions: 16 (GYI: 4)
Program ID: 400-05-22-001

Stanford
Stanford University Program
Stanford University Hospital
Kaiser Permanente Medical Center (Santa Clara)
Veterans Affairs Medical Center (Palo Alto)
Program Director: Alaa F Schiffberg, MD
Stanford University Medical Center
Dept of Psych and Behavioral Sci
101 Querry Rd Rm 21168 MC 5543
Stanford, CA 94305-5543
415-723-5601
Length: 4 Year(s) Total Positions: 45 (GYI: 9)
Program ID: 400-05-95-033

Torrance
Los Angeles County-Harbor-UCLA Medical Center Program
Los Angeles County-Harbor-UCLA Medical Center
Program Director: Ira M Lessin, MD
Harbor-UCLA Medical Center
Dept of Psychiatry Box 488
1000 W Carson St
Torrance, CA 90509
310-222-1327
Length: 4 Year(s) Total Positions: 29 (GYI: 8)
Subspecialties: CHP
Program ID: 400-05-11-035

Colorado
Denver
University of Colorado Program
University of Colorado Health Sciences Center
Denver Health and Hospitals
Veterans Affairs Medical Center (Denver)
Program Director: Robert M House, MD
University of Colorado School of Medicine
4200 E 20th Ave Box 2249
Denver, CO 80262
303-735-7501
Length: 4 Year(s) Total Positions: 54 (GYI: 11)
Subspecialties: CHP
Program ID: 400-07-21-038

Connecticut
Farmington
Institute of Living/University of Connecticut Program
University of Connecticut School of Medicine
Hartford Hospital
Institute of Living
Univ of Connecticut Health Center/John Dempsey Hospital
Program Director: David A Goldberg, MD
University of Connecticut Health Center
Dept of Psychiatry
10 Talbot Notch Rd E MC 6410
Farmington, CT 06032-1806
203-777-5725
Length: 4 Year(s) Total Positions: 24 (GYI: 6)
Program ID: 400-05-21-266

Middletown
Connecticut Valley Hospital Program*
Connecticut Valley Hospital
Connecticut Mental Health Center
Hospital of St Raphael
Program Director: Robert Sabatino, MD
Connecticut Valley Hospital
PO Box 251
Middletown, CT 06457
203-544-2401
Length: 4 Year(s) Total Positions: 18 (GYI: 4)
Program ID: 400-05-31-041

New Haven
Yale-New Haven Medical Center Program
Yale-New Haven Hospital
Connecticut Mental Health Center
Greenwich Hospital
Hospital of St Raphael
Norwalk Hospital
Veterans Affairs Medical Center (West Haven)
Yale Psychiatric Institute
Yale University Health Service
Program Director: David Greenfield, MD
Yale-New Haven Medical Center
25 Park St Grace Edac Bldg
New Haven, CT 06519
203-780-2990
Length: 4 Year(s) Total Positions: 13 (GYI: 9)
Program ID: 400-05-21-042

* Updated information not provided.
Norwich
Norwich Hospital Program*
Norwich Hospital
Community Mental Health Services of southeastern Connecticut
University of Connecticut Health Center/John Dempsey Hospital
William W. Backus Hospital
Program Director:
Christian D. Van Der Voide, MD
Norwich Hospital
PO Box 605
Norwich, CT 06350
203-871-6665
Length: 3 Year(s) Total Positions: 19 (GYI: 0)
Program ID: 400-06-12-045

Howard University Program
Howard University Hospital
Children's National Medical Center
Veterans Affairs Medical Center (Washington DC)
Program Director:
William J. Klein, MD
Howard University Hospital
Department of Psychiatry
2041 Georgia Ave NW
Washington, DC 20059
202-685-6611
Length: 4 Year(s) Total Positions: 13 (GYI: 2)
Program ID: 400-10-11-049

St. Elizabeth's Hospital Program
DC Commission on Mental Health Services- St. Elizabeth's Campus
George Washington University Hospital
Washington School of Psychiatry
Program Director:
Roger P. Pede, MD
Saint Elizabeth's Campus Barton Hall Rm 201-A,
2700 Martin Luther King Jr SE
Washington, DC 20032
202-276-7583
Length: 4 Year(s) Total Positions: 10 (GYI: 5)
Program ID: 400-10-11-239

Walter Reed Army Medical Center Program
Walter Reed Army Medical Center
Program Director:
Col. Normand Wong, MD
Dept. of Psychiatry
Walter Reed Army Medical Center
6825 16th St NW
Washington, DC 20307-5001
202-567-1256
Length: 4 Year(s) Total Positions: 22 (GYI: 5), Subspecialties: CHP
Program ID: 400-10-11-003

Tampa
University of South Florida Program
University of South Florida College of Medicine
James A. Haley Veterans Hospital
Tampa General Healthcare
TGH University Psychiatry Program
Program Director:
Kallie R. Shaw, MD
University of South Florida Psychiatry Center
3515 E Fletcher Ave
Tampa, FL 33613
813-975-7050
Length: 4 Year(s) Total Positions: 22 (GYI: 7)
Subspecialties: CHP
Program ID: 400-11-21-052

Georgia

Atlanta
Emory University Program
Emory University School of Medicine
Emory University Hospital Grady Memorial Hospital
Veterans Affairs Medical Center (Atlanta)
Program Director:
Miles K. Crowder, MD
Emory University Dept of Psychiatry & Behavioral Sciences
1701 Upper Dr E Rm 153
Atlanta, GA 30322
404-277-5157
Length: 4 Year(s) Total Positions: 51 (GYI: 12)
Program ID: 400-10-11-053

Morehouse School of Medicine Program
Morehouse School of Medicine
Brawner Psychiatric Institute
Telfair County Health Department
Georgia Regional Hospital at Atlanta
Grady Memorial Hospital
HCA West Paces Ferry Hospital
The Ridgeway Institute
Veterans Affairs Medical Center (Tuskegee)
Program Director:
Jozabiben C. Ball Jr, MD
Morehouse School of Medicine
Dept of Psychiatry
730 Westview Dr SE
Atlanta, GA 30310-1405
404-756-1440
Length: 4 Year(s) Total Positions: 16 (GYI: 4)
Program ID: 400-12-21-282

Florida

Gainesville
University of Florida Program
University of Florida College of Medicine
Shands Hospital at the University of Florida Veterans Affairs Medical Center (Gainesville)
Program Director:
John K. Kudla, MD
University of Florida Health Science Center Dept of Psychiatry
Box 100256
Gainesville, FL 32610-0026
904-392-3684
Length: 4 Year(s) Total Positions: 37 (GYI: 7)
Subspecialties: CHP
Program ID: 400-11-11-050

Miami
University of Miami-Jackson Memorial Medical Center Program
University of Miami-Jackson Memorial Medical Center
Veterans Affairs Medical Center (Miami)
Program Director:
Richard M. Steinbock, MD
University of Miami Sch of Med D20 Dept of Psychiatry
PO Box 019950
Miami, FL 33101-6100
305-566-2035
Length: 4 Year(s) Total Positions: 49 (GYI: 8)
Program ID: 400-11-11-041

District of Columbia

Washington
George Washington University Program
George Washington University School of Medicine
George Washington University Hospital
Program Director:
Julia A. Frank, MD
George Washington University Hospital
2150 Pennsylvania Ave NW
Suite 8-129
Washington, DC 20037-2396
202-994-7375
Length: 4 Year(s) Total Positions: 18 (GYI: 4)
Program ID: 400-10-11-048

Georgetown University Program
Georgetown University Hospital
Fairfax Hospital
Veterans Affairs Medical Center (Washington DC)
Program Director:
Nathan Billig, MD
Georgetown University School of Medicine
Dept of Psychiatry
3600 Wisconsin Avenue NW
Washington, DC 20007-2297
202-877-5577
Length: 4 Year(s) Total Positions: 26 (GYI: 6)
Subspecialties: CHP
Program ID: 400-10-11-047

* Updated information not provided.
Illinois

Chicago

McGaw Medical Center of Northwestern University (Evanston) Program
Northwestern University Medical School
Evanston Hospital
Program Director:
Rachel Yudkowski, MD
Dept of Psychiatry
3650 Ridge Ave
Evanston, IL 60201
708 570-3650
Length: 4 Year(s) Total Positions: 14 (GY: 4)
Program ID: 408-16-21-290

Macon

Mercer University School of Medicine Program
Mercer University School of Medicine
Central Georgia Medical Center
Central Georgia Health Center
Program Director:
Michael J. Elliott, MD
Dept of Psychiatry & Behavioral Science
Mercer University School of Medicine
1900 College St
Macon, GA 31207
912 753-4048
Length: 4 Year(s)
Program ID: 408-12-21-281

Hawaii

Honolulu

University of Hawaii Program
University of Hawaii John A Burns School of Medicine
Hawai`i State Hospital
Queen's Medical Center
Program Director:
John P McDonald Jr, MD
University of Hawaii
Dept of Psychiatry
1350 Lusitana St Suite P
Honolulu, HI 96813
808 555-2899
Length: 4 Year(s) Total Positions: 25 (GY: 5)
Program ID: 408-143-1-006

Tripler AMC

Tripler Army Medical Center Program
Tripler Army Medical Center
Program Director:
Charles S Miliken, MD
Rebb Immonen, DO
Tripler Army Medical Center
Dept of Psychiatry
Honolulu, HI 86855-5900
808 433-2436
Length: 4 Year(s) Total Positions: 19 (GY: 5)
Subspecialties: CHP
Program ID: 408-14-1-233

Maywood

Loyola University Program
Foster G McGaw Hospital-Loyola University of Chicago Edward J Hines Jr Veterans Affairs Hospital
Program Director:
Amin Daghastani, MD
Loyola University Medical Center
Dept of Psychiatry
2100 S First Ave Bloq G
Maywood, IL 60153
708 216-3273
Length: 4 Year(s) Total Positions: 29 (GY: 9)
Program ID: 408-16-21-204

North Chicago

Fitch University of Health Sciences/Chicago Medical School Program
Fitch University of Health Sciences/Chicago Medical School
Mount Sinai Hospital Medical Center of Chicago Veterans Affairs Lakeside Medical Center (Chicago)
Program Director:
Richard F Krause, MD
Northwestern Univ Med Schl Dept of Psychiatry
Faasavant Pavilion Room 504
300 E Superior St
Chicago, IL 60611
312 995-8058
Length: 4 Year(s) Total Positions: 24 (GY: 6)
Subspecialties: CHP
Program ID: 408-16-21-060

Rush-Presbyterian-St Luke's Medical Center Program
Rush-Presbyterian-St Luke's Medical Center
Program Director:
Michael Schrift, MD
Rush-Presbyterian-St Luke's Med Cir Dept of Psychiatry
1720 W Polk St
Chicago, IL 60612
312 942-2089
Length: 4 Year(s) Total Positions: 25 (GY: 5)
Program ID: 408-14-1-011

University of Chicago Program
University of Chicago Hospitals
Program Director:
Larry S Goldman, MD
University of Chicago Hospitals
Dept of Psychiatry
5841 S Maryland Ave MC-3077
Chicago, IL 60637-1470
312 702-5050
Length: 4 Year(s) Total Positions: 26 (GY: 7)
Subspecialties: CHP
Program ID: 408-16-31-062

University of Illinois College of Medicine at Chicago Program
University of Illinois College of Medicine at Chicago University of Illinois Hospital and Clinics Veterans Affairs Lakeside Medical Center (Chicago)
Program Director:
Surinder Nand, MD
University of Illinois at Chicago
Dept of Psychiatry (MC 913)
925 S Wood St
Chicago, IL 60612
312 996-7380
Length: 4 Year(s) Total Positions: 51 (GY: 15)
Subspecialties: CHP
Program ID: 408-16-21-063

Park Ridge

Lutheran General Hospital Program
Lutheran General Hospital
Program Director:
Gustavo Hernandez, MD
Lutheran General Hospital
1775 Dempster St
Dept of Psychiatry Box 106
Park Ridge, IL 60068
847 696-5987
Length: 4 Year(s) Total Positions: 12 (GY: 3)
Program ID: 408-16-21-207

Springfield

Southern Illinois University Program
Southern Illinois University School of Medicine Memorial Medical Center St John's Hospital
Program Director:
Karen B Brodere, MD
Southern Illinois University School of Medicine
PO Box 18230
Springfield, IL 62704-6230
217 544-4885
Length: 4 Year(s) Total Positions: 28 (GY: 7)
Program ID: 408-16-21-065

* Updated information not provided.
Indiana

Indianapolis

Indiana University Medical Center Program

Indiana University Medical Center
Laurel B Carter Memorial Hospital
Richard L Roudebush Veterans Affairs Medical Center
William N Winship Memorial Hospital

Program Director:  
John H. Bova, MD
Indiana University Medical Center
Clinical Ed 225 895
541 Clinical Dr
Indianapolis, IN 46202-5111
317-274-1254

Length: 4 Year(s)  Total Positions: 38 (GY: 8)  Subspecialties: CHP
Program ID: 400-17-21-066

Wichita

University of Kansas (Wichita) Program
University of Kansas School of Medicine (Wichita)
Charter Wichita Behavioral System
St. Francis Regional Medical Center
St. Joseph Medical Center
Veterans Affairs Medical Center (Wichita)

Program Director:  
George E. Dugan, MD
University of Kansas School of Medicine - Wichita
1010 N Kansas
Wichita, KS 67214-3189
913-261-3245

Length: 4 Year(s)  Total Positions: 22 (GY: 5)  Subspecialties: CHP
Program ID: 400-19-31-254

Kentucky

Lexington

University of Kentucky Medical Center Program
University of Kentucky Medical Center
Veterans Affairs Medical Center (Lexington)

Program Director:  
Robert F. Kraus, MD
University Hospital-Allen B Chandler Medical Center
Dept of Psychiatry
Annex 210
Lexington, KY 40536-0620
606-257-3267

Length: 4 Year(s)  Total Positions: 21 (GY: 4)  Subspecialties: CHP
Program ID: 400-20-21-074

Louisville

University of Louisville Program
University of Louisville School of Medicine
Child Psychiatric Services (Bingham Child Guidance Clinic)
Lifespring Mental Health Services
Norton Hospital (Alliant Health System)
University of Louisville Hospital
Veterans Affairs Medical Center (Louisville)

Program Director:  
Gordon D. Strauss, MD
University of Louisville Medical Center
Dept of Psychiatry
Louisville, KY 40292-0001
502-852-3385

Length: 4 Year(s)  Total Positions: 41 (GY: 8)  Subspecialties: CHP
Program ID: 400-20-21-075

Louisiana

New Orleans

Alton Ochsner Medical Foundation Program

Alton Ochsner Medical Foundation

Program Director:  
Charles W Billings, MD
Alton Ochsner Medical Foundation
Dept of Graduate Med Educ
1516 Jefferson Hwy
New Orleans, LA 70121
504-842-4178

Length: 4 Year(s)  Total Positions: 18 (GY: 3)  Subspecialties: CHP
Program ID: 400-21-11-077

Louisiana State University Program
Louisiana State University School of Medicine
Medical Center of Louisiana at New Orleans-LSU Division
Touro Infirmary

Program Director:  
Larry Carter, MD
Louisiana State University Medical Center
1542 Tulane Ave
New Orleans, LA 70112-3822
504-568-4001

Length: 4 Year(s)  Total Positions: 32 (GY: 8)  Program ID: 400-21-31-076

Tulane University Program

Tulane University School of Medicine
Medical Center of Louisiana at New Orleans-Tulane Division
Tulane University Hospital and Clinics
Veterans Affairs Medical Center-Tulane Service (New Orleans)

Program Director:  
Patrick T. O'Neill, MD
Tulane University School of Medicine
1436 Tulane Ave
New Orleans, LA 70112
504-587-3162

Length: 4 Year(s)  Total Positions: 26 (GY: 2)  Subspecialties: CHP
Program ID: 400-21-21-078

Shreveport

Louisiana State University (Shreveport) Program

Louisiana State University School of Medicine
Shreveport
Charter Forest Hospital
Louisiana State University Medical Center-Shreveport
Overton Brooks Veterans Affairs Medical Center

Program Director:  
Mary Jo Pitts-Gerald, MD
Louisiana State University Medical Center
Med Ed - Psychiatry
1501 Kings Hwy PO Box 33802
Shreveport, LA 71130-9382
318-675-6040

Length: 4 Year(s)  Total Positions: 12 (GY: 3)  Subspecialties: CHP
Program ID: 400-21-21-074

Maine

Portland

Maine Medical Center Program

Maine Medical Center

Program Director:  
George N McNeil, MD
Maine Medical Center
22 Bramhall St
Portland, ME 04102
207-871-3588

Length: 4 Year(s)  Total Positions: 14 (GY: 3)  Subspecialties: CHP
Program ID: 400-22-11-090

* Updated information not provided.

712  Graduate Medical Education Directory
Maryland
Andrews AFB
Malcolm Grow USAF Medical Center Program* 8th Medical Group
Program Director: M Richard Fragola, MD
38428-014 of Mental Health
Malcolm Grow USAF Medical Center
Anders AF, MD 20331-5000
301 901-7021
Length: 4 Year(s) Total Positions: 12 (GYI: 3)
Program ID: 408-23-1-271

Baltimore
Johns Hopkins University Program
Johns Hopkins University School of Medicine
Johns Hopkins Bayview Medical Center
Johns Hopkins Hospital Program
Program Director: Glenn J. Tisianan, MD PhD
Johns Hopkins Hospital Program
500 N Wolfe St
5-119
Baltimore, MD 21287-741
410 955-323
Length: 4 Year(s) Total Positions: 42 (GYI: 6)
Subspecialties: CHP
Program ID: 408-23-2-1-086
Sheppard and Enoch Pratt Hospital Program
Sheppard and Enoch Pratt Hospital
Franklin Square Hospital Center Program
Program Director: Donald R. Rees, MD
Division of Education and Residency Training
6001 N Charles St Box 6165
Baltimore, MD 21285-6165
410 955-3000
Length: 4 Year(s) Total Positions: 31 (GYI: 6)
Program ID: 408-23-2-2-061

University of Maryland Program
University of Maryland Medical System
Spring Grove Hospital Center
Veterans Affairs Medical Center (Baltimore)
Wallace F. Carter Center Program
Program Director: George G. Balle, MD
Department of Psychiatry
University of Maryland
640 W Redwood St
Baltimore, MD 21291
410 226-6112
Length: 4 Year(s) Total Positions: 62 (GYI: 12)
Program ID: 408-23-3-1-082

Bethesda
National Institutes of Health Program* NIH Warren Grant Magnuson Clinical Center
Program Director: David R. Rubinsow, MD
Clinical Director National Institute of Mental Health
The Clinical Center 10S2008
Bethesda, MD 20892
301 496-4588
Length: 1 Year(s) Total Positions: 23 (GYI: 6)
Program ID: 408-23-1-245

National Naval Medical Center (Bethesda) Program*
National Naval Medical Center (Bethesda)
Program Director: Michael P. Dineen, MD
National Naval Medical Center
5810 Wisconsin Ave
Bethesda, MD 20885-5000
202-296-2549
Length: 4 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 408-23-31-006

Massachusetts
Boston University Program
Boston University Medical Center University Hospital
Boston City Hospital
Edward Nourse Rogers Memorial Veterans Hospital
Solomon Carter Fuller Mental Health Center
Veterans Affairs Medical Center (Boston)
Program Director: Robert Goldman, MD
Boston University School of Medicine
Dept. of Psychiatry
720 Harrison Ave DOB 404
Boston, MA 02118
617 855-2724
Length: 4 Year(s) Total Positions: 10 (GYI: 8)
Program ID: 408-24-2-1-086

Tufts University Program
New England Medical Center Hospitals
Lunell Shattuck Hospital
Program Director: Deborah Spitz, MD
New England Medical Center
Dept. of Psychiatry
790 Washington St
Boston, MA 02111
617 855-1222
Length: 4 Year(s) Total Positions: 23 (GYI: 6)
Program ID: 408-23-2-1-086

Brockton
Harvard Medical School (South Shore) Program*
Brockton-West Roxbury Veterans Affairs Medical Center
Program Director: Graces J. Mashburn, MD
Dept. of Psychiatry
VA Med Ctr Brockton/West Roxbury
840 Belmont St 11th Fl
Brockton, MA 02441
617 855-4500
Length: 4 Year(s) Total Positions: 62 (GYI: 12)
Program ID: 408-24-2-2-1-061

Cambridge
Cambridge Hospital Program
Cambridge Hospital
Program Director: Lillian L. Havens, MD
Kimberly A. White, MD
Cambridge Hospital
Dept. of Psychiatry
1490 Cambridge St
Cambridge, MA 02139
617 496-1137
Length: 4 Year(s) Total Positions: 28 (GYI: 6)
Subspecialties: CHP
Program ID: 408-24-3-1-094

Pittsfield
Berkshire Medical Center Program* Berkshire Medical Center
Program Director: Richard M. Berlin, MD
Dept. of Psychiatry & Behavioral Sciences
Berkshire Medical Center
725 North St
Pittsfield, MA 01201
413 447-2161
Length: 4 Year(s) Total Positions: 4 (GYI: 4)
Program ID: 408-24-2-1-275

program directory.

* Updated information not provided.
Stockbridge
Austen Riggs Center Program
Austen Riggs Center
Program Director:
James L. Bickfeld, MD
Austen Riggs Center
Dept of Psychiatry
28 Main St
Stockbridge, MA 01262-0984
413 298-5611
Length: 1 Year(s)  Total Positions: 5  (GYI: 1)
Program ID: 400-64-1-284

Worcester
University of Massachusetts Medical Center Program*
University of Massachusetts Medical Center
Program Director:
Paul J. Barreira, MD
University of Massachusetts Medical Center
55 Lake Ave N
Worcester, MA 01655
508 865-6087
Length: 4 Year(s)  Total Positions: 30  (GYI: 6)
Program ID: 400-24-21-234

Michigan
Ann Arbor
University of Michigan Program
University of Michigan hospitals
Veterans Affairs Medical Center (Ann Arbor)
Program Director:
Michelle Ribn, MD
University of Michigan Hospitals
Dept of Psychiatry
1500 E Medical Center Dr
Box 0704
Ann Arbor, MI 48109-0704
313 764-6975
Length: 4 Year(s)  Total Positions: 47  (GYI: 9)
Program ID: 400-25-21-067

Detroit
Henry Ford Hospital Program
Henry Ford Hospital
Cottage Hospital of Grosse Pointe
Kingswood Hospital
Program Director:
Carlye Prank, MD
Henry Ford Hospital
Dept of Psychiatry
2799 W Grand Blvd
Detroit, MI 48202
313 997-3500
Length: 4 Year(s)  Total Positions: 24  (GYI: 6)
Program ID: 400-25-21-235

Sinai Hospital Program
Sinai Hospital
Hawthorne Center Hospital
Lafayette Clinic
Program Director:
eithert Luby, MD
Sinai Hospital
- Med Staff Office
7017 W Outer Dr
Detroit, MI 48235-2899
313 490-0550
Length: 4 Year(s)  Total Positions: 24  (GYI: 1)
Program ID: 400-25-21-100

Wayne State University/Detroit Medical Center
Wayne State University School of Medicine
Harper Hospital
28301 Harper Blvd
Detroit, MI 48201
313 577-2057
Length: 4 Year(s)
Program ID: 400-25-21-283

Wayne State University/Detroit Psychiatric Institute Program
Wayne State University School of Medicine
Detroit Psychiatric Institute
Providence Hospital
Program Director:
Thomas W. Udde, MD
88 University Health Center
4201 St Antoine
Detroit, MI 48201
313 677-1998
Length: 4 Year(s)  Total Positions: 10  (GYI: 7)
Program ID: 400-25-21-098

Wayne State University/Lafayette Clinic Program
Wayne State University School of Medicine
Harper Hospital
Lafayette Clinic
Program Director:
Thomas W. Udde, MD
98 University Health Center
4201 St Antoine
Detroit, MI 48201
313 677-1998
Length: 4 Year(s)  Total Positions: 48  (GYI: 12)
Program ID: 400-25-11-099

East Lansing
Michigan State University Program
Michigan State University College of Human Medicine
Michigan Capital Medical Center-Pennsylvania Campus
Michigan State University Clinical Center
Friso Best Christian Hospital
St Lawrence Hospital and HealthCare Services
St Mary's Health Services
Program Director:
Jed O. Mager, DO
Michigan State University
Dept of Psychiatry
B-109 W Fee
East Lansing, MI 48824-1316
517 353-4402
Length: 4 Year(s)  Total Positions: 30  (GYI: 6)
Program ID: 400-25-21-101

Minnesota
Minneapolis
University of Minnesota Program
University of Minnesota Medical School
Hennepin County Medical Center
St Paul-Kassey Medical Center
University of Minnesota Hospital and Clinic
Veterans Affairs Medical Center (Minneapolis)
Program Director:
Gary Christensen, MD
University of Minnesota Hospital & Clinics
Box 395 Mayo Memorial Bldg
420 Delaware St SE
Minneapolis, MN 55455
612 626-7603
Length: 4 Year(s)  Total Positions: 33  (GYI: 6)
Subspecialties: CHIP
Program ID: 400-26-21-100

Rochester
Mayo Graduate School of Medicine Program
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic Rochester
St Mary's Hospital of Rochester
Program Director:
Joyce A. Tinsley, MD
MGSM Application Processing Center
Mayo Graduate School of Medicine
200 First St SW
Rochester, MN 55905
507-284-2312
Length: 4 Year(s)  Total Positions: 30  (GYI: 6)
Program ID: 400-26-21-107

Mississippi
Jackson
University of Mississippi Medical Center Program
University of Mississippi School of Medicine
Mississippi State Hospital
University Hospital
Veterans Affairs Medical Center (Jackson)
Program Director:
Angelos Halairis, MD
University of Mississippi School of Medicine
Psychiatry Box 139
2500 N State St
Jackson, MS 39216-4506
601 889-5215
Length: 4 Year(s)  Total Positions: 30  (GYI: 4)
Program ID: 400-27-11-108

* Updated information not provided.
Missouri

Columbia

University of Missouri-Columbia Program
University of Missouri-Columbia School of Medicine
Harry S Truman Missouri Veterans' Hospital
MediAmerica Mental Health Center
University and Children's Hospital
Program Director: Cheryl A. Hume, MD
University of Missouri-Columbia
Dept of Psychiatry
Three Hospital Dr
Columbia, MO 65201
314-882-3176
Length: 4 Year(s) Total Positions: 22 (GYT: 6) Subspecialities: CHP
Program ID: 400-28-21-109

Kansas City

University of Missouri at Kansas City Program
University of Missouri-Kansas City School of Medicine
Western Missouri Mental Health Center
Program Director: Stuart Muro, MD
Dept of Psychiatry UMKC School of Medicine
600 E 22nd St
Kansas City, MO 64108-2620
816-294-6905
Length: 4 Year(s) Total Positions: 35 (GYT: 8)
Program ID: 400-28-21-110

St Louis

St Louis University Group of Hospitals Program
St Louis University School of Medicine
St Louis University Hospital
Veterans Affairs Medical Center (St Louis)
Program Director: C Leon McGhee, MD
David F Wold Sr Memorial Institute
1221 S Grand Blvd
St Louis, MO 63104
314-577-8728
Length: 4 Year(s) Total Positions: 16 (GYT: 6)
Program ID: 400-29-21-118

Washington University Program
Barnes Hospital
Jewish Hospital of St Louis
Malcolm Bliss Mental Health Center
Program Director: Eugene H Rubin, MD PhD
Washington University School of Medicine
Dept of Psychiatry
4900 Children's Pl
St Louis, MO 63110
314-362-2662
Length: 4 Year(s) Total Positions: 41 (GYT: 9)
Subspecialities: CHP
Program ID: 400-28-21-114

Nebraska

Omaha

Creighton University/University of Nebraska Program
Creighton/Nebraska University Health Foundation
AMRI St Joseph Center for Mental Health
University of Nebraska Medical Center
Veterans Affairs Medical Center (Omaha)
Program Director: Carl B Grewe, MD
Creighton-Nebraska Department of Psychiatry
600 S 42nd St
PO Box 965575
Omaha, NE 68198-5775
402-556-6676
Length: 4 Year(s) Total Positions: 32 (GYT: 8)
Program ID: 400-30-21-116

Nevada

Reno

University of Nevada Program
University of Nevada School of Medicine
Innais A Langarlas Veterans Affairs Medical Center
Nevada Mental Health Institute
University Medical Center of Southern Nevada
West Vilas Hospital
Program Director: Grant D Miller, MD
University of Nevada School of Medicine
Dept of Psychiatry & Behavioral Sci
214 Reno, NV 89557-0046
702-784-4917
Length: 4 Year(s) Total Positions: 4 (GYT: 4)
Program ID: 400-28-21-203

New Hampshire

Lebanon

Dartmouth-Hitchcock Medical Center Program
Mary Hitchcock Memorial Hospital
New Hampshire Hospital
Veterans Affairs Medical Center (White River Junction)
Program Director: Ronald J. Green, MD
Dartmouth-Hitchcock Medical Center
One Medical Center Dr
Lebanon, NH 03756
603-650-5620
Length: 4 Year(s) Total Positions: 36 (GYT: 19)
Program ID: 400-28-21-117

New Jersey

Camden

UMDNJ-Robert Wood Johnson Medical School (Camden) Program
Cooper Hospital/University Medical Center
Atlantic City Medical Center
Program Director: C Pirooz Shokier, MD
UMDNJ-Robert Wood Johnson Medical School
Dept of Psychiatry
460 Haddon Ave 3rd Fl
Camden, NJ 08103
844-757-7799
Length: 4 Year(s) Total Positions: 16 (GYT: 4)
Program ID: 400-33-21-255

Newark

UMDNJ-New Jersey Medical School Program
UMDNJ-New Jersey Medical School
Dept of Veterans Affairs Medical Center (East Orange)
Hackensack Medical Center
St Barnabas Medical Center
UMDNJ-New Jersey Medical School
University Hts 1501 Admin Complex
50 Bergen St
Newark, NJ 07107-3000
201-581-4670
Length: 4 Year(s) Total Positions: 36 (GYT: 5)
Program ID: 400-33-21-119

Paramus

Bergen Pines County Hospital Program
Bergen Pines Hospital
Program Director: M Aved Iqbal, MD
Dir Psychiatry Educa
Bergen Pines County Hospital
Bldg 14 E Ridgewood Ave
Paramus, NJ 07652
201-867-4132
Length: 4 Year(s) Total Positions: 24 (GYT: 5)
Program ID: 400-32-12-120

Piscataway

UMDNJ-Robert Wood Johnson Medical School Program
UMDNJ-Robert Wood Johnson Medical School
Robert Wood Johnson University Hospital
Program Director: Stuart Schwartz, MD
UMDNJ-Robert Wood Johnson Medical School
Dept of Psychiatry
671 Hoes Ln CMHC C-205
Piscataway, NJ 08854-5635
908-325-4736
Length: 4 Year(s) Total Positions: 24 (GYT: 5)
Program ID: 400-33-21-231

* Updated information not provided.
Accredited Programs in Psychiatry

West Trenton

Trenton Psychiatric Hospital Program
Trenton Psychiatric Hospital
Greater Trenton Community Mental Health Center
UMDNJ-Community Mental Health Center at Plainsawy
Veterans Affairs Medical Center (Lyons)
Program Director:
Elizabeth H Levin, MD
Trenton Psychiatric Hospital
PO Box 7000
Sullivan Way
West Trenton, NJ 08608
609 690-1521
Length: 4 Year(s)  Total Positions: 18  (GYI: 4)
Program ID: 400-33-21-122

New Mexico

Albuquerque

University of New Mexico Program
University of New Mexico School of Medicine
University Hospital
Veterans Affairs Medical Center (Albuquerque)
Program Director:
Nancy K Morrison, MD
Univ of New Mexico School of Medicine Dep of Psychiatry
2400 Tucker NE
Family Practice Bldg 4th Fl
Albuquerque, NM 87108-5926
505 277-5416
Length: 4 Year(s)  Total Positions: 38  (GYI: 8)
Program ID: 400-34-21-123

New York

Albany

Albany Medical Center Program
Albany Medical Center-Hospital
Capital District Psychiatric Center
Veterans Affairs Medical Center (Albany)
Program Director:
Victoria Balkoski, MD
Dept of Psychiatry (A-164)
Albany Medical Center
New Scotland Ave
Albany, NY 12208
518 263-5511
Length: 4 Year(s)  Total Positions: 24  (GYI: 6)
Program ID: 400-36-22-124

Bronx

Albert Einstein College of Medicine at Bronx-Lefrak Hospital Center Program
Bronx-Lebanon Hospital Center
Program Director:
Nalin V Jhurani, MD
Bronx-Lebanon Hospital Center
1276 Fulton Ave
4-South
Bronx, NY 10461
718 901-8633
Length: 4 Year(s)  Total Positions: 20  (GYI: 5)
Program ID: 400-35-21-135

Albert Einstein College of Medicine Program
Albert Einstein College of Medicine of Yeshiva University
Bronx Municipal Hospital Center
Bronx Psychiatric Center
Montefiore Medical Center-Henry and Lucy Moses Division
Program Director:
Peter J Buckley, MD
James David, MD
Albert Einstein College of Medicine
1200 Morris Ave Belfer 402
Bronx, NY 10461
718 490-2030
Length: 4 Year(s)  Total Positions: 61  (GYI: 16)
Subspecialties: 15P
Program ID: 400-39-11-181

Brooklyn

Brooklyn Hospital Center Medical Center Program
Brooklyn Hospital Medical Center
Program Director:
Nyapati's Rao, MD
Dept of Psychiatry
Brooklyn Hospital Medical Center
Linden Blvd & Eastridge Plaza
Brooklyn, NY 11212
718 426-5667
Length: 4 Year(s)  Total Positions: 20  (GYI: 5)
Program ID: 400-34-21-129

Maimonides Medical Center Program
Maimonides Medical Center
Program Director:
Jeffrey Goldberg, DO
Maimonides Med Ctr
Dep of Psychiatry
4650 Tenth Ave
Brooklyn, NY 11219
718 283-5184
Length: 4 Year(s)  Total Positions: 26  (GYI: 5)
Program ID: 400-35-21-143

SUNY Health Science Center at Brooklyn Program
Program Director:
Erich Weitnzer, MD
SUNY Health Science Center at Brooklyn
450 Clarkson Ave Box 1208
Brooklyn, NY 11203
718 270-2922
Length: 4 Year(s)  Total Positions: 40  (GYI: 10)
Program ID: 400-35-21-164

Buffalo

SUNY at Buffalo Graduate Medical-Dental Education Consortium Program
SUNY at Buffalo Grad Medical-Dental Education Consortium
Erie County Medical Center
Veterans Affairs Medical Center (Buffalo)
Program Director:
S K Park, MD
Erie County Medical Center
482 Grider St
Buffalo, NY 14215
716 898-4231
Length: 4 Year(s)  Total Positions: 26  (GYI: 7)
Program ID: 400-35-21-126

East Meadow

Nassau County Medical Center Program
Nassau County Medical Center
Program Director:
Jacoby Notin, MD
Nassau County Medical Center
2201 Hempstead Tpky
East Meadow, NY 11554-5400
516 572-6511
Length: 4 Year(s)  Total Positions: 23  (GYI: 6)
Program ID: 400-35-11-128

Manhasset

North Shore University Hospital Program
North Shore University Hospital
Program Director:
Stephen C Bate, MD
North Shore University Hospital
Dep of Psychiatry
400 Community Dr
Manhasset, NY 11030
115 562-3961
Length: 4 Year(s)  Total Positions: 20  (GYI: 4)
Program ID: 400-35-11-129

Middletown

Middletown Psychiatric Center Program
Middletown Psychiatric Center
Program Director:
Peter M Semiski, MD
Middletown Psychiatric Center
141 Monmouth Ave PO Box 1453
Middletown, NY 10940-5168
914 342-5511
Length: 4 Year(s)  Total Positions: 6  (GYI: 0)
Program ID: 400-35-31-130

New Hyde Park

Albert Einstein College of Medicine at Long Island Jewish Medical Center Program
Long Island Jewish Medical Center
Hillside Hospital-Long Island Jewish Medical Center
Program Director:
Bruce R Levy, MD
Long Island Jewish Medical Center
New Hyde Park, NY 11042
718 775-9095
Length: 4 Year(s)  Total Positions: 48  (GYI: 12)
Program ID: 400-35-21-142

New York

Albert Einstein College of Medicine at Beth Israel Medical Center Program
Beth Israel Medical Center
Program Director:
Harold Bein, MD
Beth Israel Medical Center
Dep of Psychiatry
First Ave at 16th St
New York, NY 10003
212 242-2376
Length: 4 Year(s)  Total Positions: 40  (GYI: 10)
Program ID: 400-35-11-134

* Updated information not provided.
Columbia University Program
Presbyterian Hospital in the City of New York
New York State Psychiatric Institute
Overlook Hospital
Program Director:
Emanuel O. Rieder, MD
New York State Psychiatric Institute
722 W 168th St
New York, NY 10032
212-966-5553
Length: 4 Year(s) Total Positions: 48 (GY: 16)
Subspecialization: Child & Adolescent
Program ID: 400-35-21-138

Harlem Hospital Center Program*
Harlem Hospital Center
Program Director:
Henry L. McCullum, MD
Harlem Hospital Center
506 Lenox Ave
New York, NY 10037
212-938-3600
Length: 4 Year(s)
Subspecialization: Child Psychiatrist
Program ID: 400-35-11-140

Mount Sinai School of Medicine
School of Medicine
Mount Sinai Hospital Center-Mount Sinai Hospital
Program Director:
Amy S. Hoffmann, MD
Mount Sinai School of Medicine
Elmhurst Hospital Center
70-02 Broadway Rd C10-27
Elmhurst, NY 11373
718-334-3308
Length: 4 Year(s) Total Positions: 40 (GY: 10)
Program ID: 400-35-11-242

Mount Sinai School of Medicine Program
Mount Sinai School of Medicine
Mount Sinai Medical Center
Veterans Affairs Medical Center (Bronx)
Program Director:
Michael J. Serby, MD
Mount Sinai Hospital
One Gustave L. Levy Pl
Box 1230
New York, NY 10029-6574
212-241-4024
Length: 4 Year(s) Total Positions: 61 (GY: 18)
Program ID: 400-35-11-146

New York Hospital-Westchester Division/Cornell Medical Center Program
New York Hospital-Westchester Division
New York Hospital
New York Hospital-Cornell-Westchester Div
21 Bloomingdale Rd
White Plains, NY 10605
914-997-2710
Length: 4 Year(s) Total Positions: 32 (GY: 6)
Program ID: 400-35-21-164

New York Hospital/Cornell Medical Center Program
New York Hospital-Payne Whitney Psychiatric Clinic
New York Hospital
Program Director:
Stefan F. Stein, MD
New York Hospital-Payne Whitney Psychiatric Center
Payne Whitney Clinic (Box 140)
125 E 68th St
New York, NY 10021
212-434-5510
Length: 4 Year(s) Total Positions: 42 (GY: 8)
Program ID: 400-35-11-147

New York University Medical Center Program
New York University Medical Center
Bellevue Hospital Center
Manhattan Psychiatric Center
Veterans Affairs Medical Center (Manhattan)
Program Director:
Carol Ann Brownstein, MD
New York University Medical Center
500 First Ave
New York, NY 10016
212-263-3000
Length: 4 Year(s) Total Positions: 72 (GY: 16)
Program ID: 400-35-21-149

St. Luke's-Roosevelt Hospital Center Program
St. Luke's-Roosevelt Hospital Center
St. Luke's-Roosevelt Hospital Center-Roosevelt Division
St. Luke's-Roosevelt Hospital Center-St Luke's Division
Program Director:
Steven Wagner, MD
St. Luke's-Roosevelt Hospital Center
Dept of Psychiatry
1111 Amsterdam Ave
New York, NY 10025
212-595-5989
Length: 4 Year(s) Total Positions: 36 (GY: 9)
Subspecialization: Child Psychiatrist
Program ID: 400-35-21-270

Queens Village
Creedmoor Psychiatric Center Program
Creedmoor Psychiatric Center
Wyckoff Heights Medical Center
Program Director:
Mark F. Scesniero, MD
Creedmoor Psychiatric Center
80-45 Winchester Blvd
Bldg 51
Queens Village, NY 11427-2199
718-394-9030
Length: 4 Year(s) Total Positions: 19 (GY: 6)
Program ID: 400-35-12-139

Rochester
University of Rochester Program
Strong Memorial Hospital & University of Rochester
Program Director:
Hannah F. Uemura, MD
University of Rochester Medical Center
300 Crittenden Blvd
Rochester, NY 14642-8409
716-675-4985
Length: 4 Year(s) Total Positions: 26 (GY: 5)
Program ID: 400-35-11-158

Stony Brook
SUNY at Stony Brook Program
University Hospital SUNY at Stony Brook
Veterans Affairs Medical Center (Northport)
Program Director:
Jay E. Harris, MD
SUNY at Stony Brook Hlth Sc Ctr
T-10 Rm 600 Dept of Psychiatry
Stony Brook, NY 11794-8101
516-444-3065
Length: 4 Year(s) Total Positions: 36 (GY: 6)
Program ID: 400-35-21-169

Syracuse
SUNY Health Science Center at Syracuse Program
University Hospital-SUNY Health Science Center at Syracuse
Richard H. Hutchings Psychiatric Center
Veterans Affairs Medical Center (Syracuse)
Program Director:
Mantas Dewan, MD
SUNY Health Science Center at Syracuse
760 E Adams St
Syracuse, NY 13210
315-464-3105
Length: 4 Year(s) Total Positions: 21 (GY: 7)
Program ID: 400-35-21-160

Valhalla
New York Medical College (Cabrin) Program
New York Medical College
Cabrini Medical Center
Program Director:
Giovanni Caraco, MD
Cabrini Medical Center
237 E 16th Ss
New York, NY 10003-3609
212-866-6035
Length: 4 Year(s) Total Positions: 17 (GY: 4)
Program ID: 400-35-31-137

New York Medical College (Lincoln) Program
New York Medical College
Lincoln Medical and Mental Health Center
Westchester County Medical Center
Program Director:
Henry W. Weiman, MD
Lincoln Medical and Mental Health Center
234 E 149th St
Bronx, NY 10451
718-578-0124
Length: 4 Year(s) Total Positions: 21 (GY: 5)
Program ID: 400-35-11-133

New York Medical College (Metropolitan) Program
New York Medical College
Metropolitan Hospital Center
Program Director:
Richard A. Winters, MD
Metropolitan Hospital Center
1501 First Ave
Room 34-4-4
New York, NY 10029
212-423-7657
Length: 4 Year(s) Total Positions: 25 (GY: 8)
Subspecialization: Child Psychiatrist
Program ID: 400-35-11-149

New York Medical College (Richmond) Program
New York Medical College
St Vincent's Medical Center of Richmond
Bayley Seton Hospital
Program Director:
Richard J. Farnan, MD
St Vincent's Medical Center of Richmond
365 Bard Ave
Staten Island, NY 10310
718-976-4101
Length: 4 Year(s) Total Positions: 18 (GY: 4)
Program ID: 400-35-12-153

* Updated information not provided.

Graduate Medical Education Directory 717
New York Medical College at St Vincent's Hospital and Medical Center of New York Program
New York Medical College
St Vincent's Hospital and Medical Center of New York
Program Director: Mark B Nathanson, MD
St Vincent's Hospital and Medical Center of New York
144 W 12th St
New York, NY 10011
212-799-6236
Length: 4 Year(s) Total Positions: 7 (GYI: 7)
Subspecialties: CHP
Program ID: 400-35-12-152

New York Medical College at Westchester County Medical Center Program
New York Medical College
Dahbury Hospital
St Vincent's Hospital of New York-Westchester Branch
Stamford Hospital
Westchester County Medical Center
Program Director: Bruno M Malbrieri, MD
Westchester County Medical Center
Psychiatric Institute
3rd Fl Rm N3231
Valhalla, NY 10595
914-285-7120
Length: 4 Year(s) Total Positions: 45 (GYI: 8)
Subspecialties: CHP
Program ID: 400-35-21-162

North Carolina
Chapel Hill
University of North Carolina Hospitals Program
University of North Carolina Hospitals
Dorothea Dix Hospital
Program Director: Allan A Maloef, MD
University of North Carolina School of Medicine
Dept of Psychiatry Room 248
CM7100 Medical School Wing C
Chapel Hill, NC 27599-7150
919-966-5127
Length: 4 Year(s) Total Positions: 66 (GYI: 15)
Program ID: 400-38-21-166

Durham
Duke University Program
Duke University Medical Center
Veterans Affairs Medical Center (Durham)
Program Director: Tahna A Grady, MD
Duke University Medical Center Dept of Psychiatry
PO Box 3537
Durham, NC 27710
919-644-2255
Length: 4 Year(s) Total Positions: 58 (GYI: 14)
Program ID: 400-36-21-167

Greenville
East Carolina University Program
East Carolina University School of Medicine
Pitt County Mental Health-Mental Retardation and Sub Abuse Ctr
Pitt County Memorial Hospital
Program Director: Stanley P Oakley Jr, MD
East Carolina University School of Medicine
Dept of Psychiatric Medicine
Greenville, NC 27834-4854
919-866-2885
Length: 4 Year(s) Total Positions: 26 (GYI: 6)
Subspecialties: CHP
Program ID: 400-36-21-169

Winston-Salem
Bowman Gray School of Medicine Program
North Carolina Baptist Hospital
Program Director: Stephen I Kramer, MD
Dept of Psychiatry
Bowman Gray School of Med/NC Baptist Hosp Medical Center
Winston-Salem, NC 27157-1087
919-716-8930
Length: 4 Year(s) Total Positions: 36 (GYI: 6)
Subspecialties: CHP
Program ID: 400-36-21-171

Grand Forks
University of North Dakota Program
Univ of North Dakota School of Medicine
Veterans Affairs Medical and Regional Office Center (Fargo)
Lakeside Mental Health Center
Southeast Human Service Center
St Luke's Hospitals
Program Director: R Dennis Skaton, MD PhD
University of North Dakota Dept of Neurosciences
1918 N Elm St
Fargo, ND 58102
701-293-4183
Length: 4 Year(s) Total Positions: 14 (GYI: 6)
Program ID: 400-37-31-251

North Dakota
Ohio
Cincinnati
University of Cincinnati Hospital Group Program
University of Cincinnati Hospital
Veterans Affairs Medical Center (Cincinnati)
Program Director: Warren M Lunig, MD
University of Cincinnati Medical Center
Dept of Psychiatry
PO Box 670509
Cincinnati, OH 45267-0509
513-588-5180
Length: 4 Year(s) Total Positions: 36 (GYI: 6)
Subspecialties: CHP
Program ID: 400-36-21-173

Cleveland
Case Western Reserve University (MetroHealth) Program
MetroHealth Medical Center
Cleveland Psychiatric Institute
Cleveland Psychoanalytic Institute
Program Director: Jonathan P Dunn, MD PhD
MetroHealth Medical Center
2500 MetroHealth Dr
Cleveland, OH 44106-1966
216-449-9287
Length: 4 Year(s) Total Positions: 20 (GYI: 3)
Program ID: 400-38-21-240

Case Western Reserve University Program
University Hospitals of Cleveland Veterans Affairs Medical Center (Cleveland)
Program Director: Michael A Schwartz, MD
University Hospitals
Dept of Psychiatry Office of Educa
11180 Euclid Ave
Cleveland, OH 44106-5000
216-944-5450
Length: 4 Year(s) Total Positions: 37 (GYI: 8)
Program ID: 400-39-21-174

Cleveland Clinic Foundation Program
Cleveland Clinic Foundation
Program Director: Kathleen N Fream, MD
Cleveland Clinic Foundation
Dept of Psychiatry
9000 Euclid Ave
Cleveland, OH 44195-5324
216-444-5680
Length: 4 Year(s) Total Positions: 25 (GYI: 6)
Program ID: 400-38-22-175

Columbus
Ohio State University Program
Ohio State University Medical Center
Mount Carmel Medical Center
Program Director: Ronald A Weller, MD
Ohio State University Hospital-Findlay
1670 Uptown Dr
Columbus, OH 43210
614-283-4540
Length: 4 Year(s) Total Positions: 12 (GYI: 0)
Program ID: 400-38-31-179

Ohio State University/Harding Hospital Program
Ohio State University Medical Center
Harding Hospital
Mount Carmel Medical Center
Program Director: Ronald A Weller, MD
Dept of Psychiatry
1670 Uptown Dr
Columbus, OH 43210
614-283-4540
Length: 4 Year(s) Total Positions: 32 (GYI: 8)
Subspecialties: CHP
Program ID: 400-38-21-281

* Updated information not provided.
Dayton
Wright State University Program
Wright State University School of Medicine
Good Samaritan Hospital and Health Center
Rettinger Medical Center
USAF Medical Center (Wright-Patterson)
Veterans Affairs Medical Center (Dayton)
Program Director:
David G Bienenfeld, MD
Wright State University School of Medicine
Dept of Psychiatry
PO Box 727
Dayton, OH 45401-0827
613 276-6229
Length: 4 Year(s) Total Positions: 40 (GY: 10)
Subspecialties: CHP
Program ID: 400-38-21-178

Rootstown
Northeastern Ohio Universities College of Medicine Program
Northeastern Ohio Universities College of Medicine
Akron General Medical Center
Children's Hospital Medical Center of Akron
St Thomas Hospital (Summa Health System)
Program Director:
Jeffrey L Moore, MD
Northeastern Ohio Universities College of Medicine
240 Wabash Ave
Akron, OH 44327
216 394-6440
Length: 4 Year(s) Total Positions: 16 (GY: 4)
Program ID: 400-38-21-189

Toledo
Medical College of Ohio at Toledo Program
Medical College of Ohio Hospital
St Vincent Medical Center
Toledo Mental Health Center
Program Director:
Marvin E Gottlieb, MD
PO Box 10008
3000 Arlington Ave
Toledo, OH 43699-0008
419 261-6798
Length: 4 Year(s) Total Positions: 16 (GY: 4)
Program ID: 400-38-21-181

Worthington
Harding Hospital Program
Harding Hospital
Ohio State University Medical Center
Riverside Methodist Hospitals
Program Director:
Marshall G Cary, MD
Harding Hospital
446 E Granville Rd
Worthington, OH 43085-3195
614 786-7417
Length: 4 Year(s) Total Positions: 3 (GY: 0)
Program ID: 400-38-0-1-192

Oklahoma
Norman
Griffin Memorial Hospital Program
Griffin Memorial Hospital
Children's Hospital of Oklahoma
Program Director:
Ernest G Shadid, MD
Griffin Memorial Hospital
900 E Main
PO Box 151
Norman, OK 73070
405 321-4880
Length: 4 Year(s) Total Positions: 19 (GY: 5)
Program ID: 400-38-21-183

Oklahoma City
University of Oklahoma Health Sciences Center Program
University of Oklahoma College of Medicine-Oklahoma City
Children's Hospital of Oklahoma
University Hospital and Clinics
Veterans Affairs Medical Center (Oklahoma City)
Program Director:
Jay Legongr, MD
Dept of Psychiatry & Behavioral Sciences
Univ of Oklahoma Health Sci Ctr
RV Box 262001 South Pavilion 5th Fl
Oklahoma City, OK 73106-3040
405 271-5000
Length: 4 Year(s) Total Positions: 16 (GY: 4)
Subspecialties: CHP
Program ID: 400-38-21-184

Tulsa
University of Oklahoma College of Medicine-Tulsa Program
University of Oklahoma College of Medicine-Tulsa
Children's Hospital Medical Center
Lauren Psychiatric Clinic and Hospital
Parkside Inc
Program Director:
Thomas S Parrow, MD
University of Oklahoma College of Medicine-Tulsa
Dpt of Psychiatry
2908 S Sheridan Rd
Tulsa, OK 74129-1077
918 838-4645
Length: 4 Year(s) Total Positions: 16 (GY: 4)
Program ID: 400-38-21-146

Pennsylvania
Hershey
Milton S Hershey Medical Center of Pennsylvania State University Program
Penn State University Hospital Milton S Hershey Med Ctr
Program Director:
Eron D Martin, MD
Pennsylvania State University Psychiatry Dept
Milton S Hershey Medical Center
PO Box 80 900 University Dr
Hershey, PA 17033
717/531-8388
Length: 4 Year(s) Total Positions: 19 (GY: 6)
Subspecialties: CHP
Program ID: 400-41-11-187

Norristown
Norristown State Hospital Program
Norristown State Hospital
Medical College of Pennsylvania Hospital
Program Director:
Sharon M Curli, DO
Norristown State Hospital
1001 Steigere St
Norristown, PA 19401-5397
610 279-3041
Length: 4 Year(s) Total Positions: 21 (GY: 6)
Program ID: 400-41-31-188

Philadelphia
Albert Einstein Medical Center Program
Albert Einstein Medical Center
Belmont Center for Comprehensive Treatment
Program Director:
Frederick G Miller, MD
Albert Einstein Medical Center
5601 Old York Rd
Philadelphia, PA 19141-3009
215 456-7045
Length: 4 Year(s) Total Positions: 33 (GY: 9)
Subspecialties: CHP
Program ID: 400-41-31-189

MCP/UPenn/Hahnemann University Hospital Program
Hahnemann University Hospital
Abington Memorial Hospital
Cooper-Chester Medical Center
Program Director:
Byron Templeton, MD
Hahnemann University Hospital
245 N Broad & Vine St M5 409
17000 New College Blvd
Philadelphia, PA 19106-1192
215 762-5125
Length: 4 Year(s) Total Positions: 27 (GY: 8)
Subspecialties: CHP
Program ID: 400-41-21-1191

MCP/Hahnemann University Hospital Program
Hahnemann University Hospital
Abington Memorial Hospital
Cooper-Chester Medical Center
Program Director:
Douglas F Lovinston, MD
Medical College of Pennsylvania
Dept of Psychiatry
3300 Henry Ave
Philadelphia, PA 19129
215 844-1418
Length: 4 Year(s) Total Positions: 33 (GY: 10)
Program ID: 400-41-21-192

* Updated information not provided.

Graduate Medical Education Directory 719
Accredited Programs in Psychiatry

Pennsylvania Hospital Program* Pennsylvania Hospital
Program Director: Melvin Sliger, MD
Institure of Pe Pennsylvania Hospital
111 N 49th St
Philadelphia, Pa 19139
215 471-2011
Length: 4 Year(s) Total Positions: 24 (GYI: 6)
Program ID: 400-41-11-193

Temple University Program Temple University Hospitals
Program Director: Karen T Jordan, MD PhD
Temple University Hospital Dept of Psychiatry
3401 N Broad St
Philadelphia, PA 19140
215 707-5560
Length: 4 Year(s) Total Positions: 34 (GYI: 7)
Program ID: 400-41-31-189

Thomas Jefferson University Program Thomas Jefferson University Hospital
C chef-Chek Center Medical Partner
Friends Hospital
Northwestern Institute of Psychiatry
Program Director: Edward K Silberman, MD
Thomas Jefferson University Hospital
1025 Walnut St
Osulak Bldg RM 327G
Philadelphia, PA 19107
215 655-8104
Length: 4 Year(s) Total Positions: 33 (GYI: 8)
Program ID: 400-41-31-196

University of Pennsylvania Program Hospital of the University of Pennsylvania
Pennsylvania Hospital
Philadelphia Child Guidance Center
Veterans Affairs Medical Center (Philadelphia)
Program Director: A John Sargent, MD
University of Pennsylvania Dept of Psychiatry
1 Maloney Bldg
3600 Spruce St
Philadelphia, PA 19104-4283
215 662-6310
Length: 4 Year(s) Total Positions: 44 (GYI: 13)
Program ID: 400-41-31-197

Pittsburgh MCPH/Allegheny General Hospital Program
Allegheny General Hospital
Program Director: Kathleen A Payer, MD MPH
Dept of Psychiatry
Allegheny General Hospital
320 E North Ave
Pittsburgh, PA 15212
412 359-8188
Length: 4 Year(s) Total Positions: 16 (GYI: 4)
Program ID: 400-41-21-272

St Francis Medical Center Program
St Francis Medical Center
Program Director: David J Lynn, MD
Dept of Psychiatry
St Francis Medical Center
400 40th St
Pittsburgh, PA 15201
412 222-301
Length: 3 Year(s) Total Positions: 16 (GYI: 4)
Program ID: 400-41-21-343

University Health Center of Pittsburgh Program
University Health Center of Pittsburgh
Montefiore-University Hospital (UPMC)
Presbyterian-University Hospital (UPMC)
Veterans Affairs Medical Center (Pittsburgh)
Western Psychiatric Institute and Clinic (UPMC)
Program Director: Lauret P Bernstein, MD
Western Psychiatric Institute Clinic
3811 O'Hara St
Pittsburgh, PA 15213-2583
412 664-2976
Length: 4 Year(s) Total Positions: 33 (GYI: 9)
Program ID: 400-41-31-198

Puerto Rico
San Juan
Puerto Rico Institute of Psychiatry Program
Puerto Rico Institute of Psychiatry
Program Director: Myrna Segarra Par, MD
Puerto Rico Institute of Psychiatry
GPO Box 332741
San Juan, PR 00914-2741
809-774-5940
Length: 3 Year(s) Total Positions: 20 (GYI: 10)
Program ID: 400-41-22-200

University of Puerto Rico Program
University of Puerto Rico School of Medicine
University Hospital
Veterans Affairs Medical Center (San Juan)
Program Director: Haydee Costos-Louada, MD
Dept of Psychiatry
GPO Box 332741
San Juan, PR 00914-2741
809-774-5940
Length: 4 Year(s) Total Positions: 23 (GYI: 8)
Program ID: 400-41-31-201

Rhode Island
Providence
Brown University Program
Brown University Hospital
Miriam Hospital
Rhode Island Hospital
Roger Williams Medical Center
Veterans Affairs Medical Center (Providence)
Program Director: Ronald M Wintrob, MD
Brown University Hospital
345 Blackstone Blvd
Providence, RI 02905
401 460-6700
Length: 4 Year(s) Total Positions: 36 (GYI: 9)
Program ID: 400-41-21-203

South Carolina
Charleston
Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
Charleston Memorial Hospital
MUSC Medical Center
Veterans Affairs Medical Center (Charleston)
Program Director: Al Saxon, MD
Medical Univ of South Carolina Dept of Psych and Behav Sci
171 Ashley Ave
Charleston, SC 29425
803 792-8778
Length: 4 Year(s) Total Positions: 58 (GYI: 14)
Subspecialties: CHP
Program ID: 400-41-22-204

Columbia
William S Hall Psychiatric Institute-University of South Carolina School of Medicine Program
William S Hall Psych Inst-Univ of South Carolina Sch of Med
Richland Memorial Hospital-Univ of South Carolina Sch of Med
Williams Jennings Bryan Dorn Veterans Hospital
Program Director: Peter H Swann, MD
William S Hall Psychiatric Institute
1900 Colonial Dr
PO Box 202
Columbia, SC 29022
803 774-7897
Length: 4 Year(s) Total Positions: 27 (GYI: 4)
Subspecialties: CHP
Program ID: 400-41-31-205

South Dakota
Sioux Falls
University of South Dakota Program
University of South Dakota School of Medicine
McKinnon Hospital
Royal C Johnson Veterans Affairs Medical Center
Southeastern Mental Health Center
Program Director: K Lynn Paul, MD
University of South Dakota
Dept of Psychiatry
800 E 21st St
Sioux Falls, SD 57104
605 339-2840
Length: 4 Year(s) Total Positions: 16 (GYI: 4)
Subspecialties: CHP
Program ID: 400-41-21-209

* Updated information not provided.
Tennessee

John Johnson City

East Tennessee State University Program
James H Quillen College of Medicine
Johnson City Medical Center Hospital
Veterans Affairs Medical Center (Mountain Home)
Woodridge Hospital
Program Director:
Brent R Copple, MD
East Tennessee State Univ James H Quillen Coll of Med
Dept of Psychiatry
Box 70567
Johnson City, TN 37614-0567
615-461-7055
Length: 4 Year(s) Total Positions: 18 (GYT: 5)
Program ID: 400-47-21-258

Memphis

University of Tennessee Program
University of Tennessee College of Medicine
Regional Medical Center at Memphis
Veterans Affairs Medical Center (Memphis)
Program Director:
David M Allen, MD
Univ of Tennessee Memphis
Dept of Psychiatry
66 N Pauline Ste 633
Memphis, TN 38105
901-448-4507
Length: 4 Year(s) Total Positions: 25 (GYT: 5)
Subspecialties: CHP
Program ID: 400-47-21-206

Nashville

George W Hubbard Hospital of Meharry Medical College Program* 
George W Hubbard Hospital of Meharry Medical College
Alvin C York Veterans Affairs Medical Center
Middle Tennessee Mental Health Institute
Program Director:
Madeline E Farmer, MD
Meharry Medical College Dept of Psychiatry
1000 David B Todd Blvd
Nashville, TN 37208
615-327-6491
Length: 4 Year(s) Total Positions: 16 (GYT: 4)
Program ID: 400-47-21-207

Vanderbilt University Program
Vanderbilt University Medical Center
Program Director:
James L Nash, MD
Vanderbilt University School of Medicine
Dept of Psychiatry
Village at Vanderbilt Suite 2300
Nashville, TN 37212-7046
615-934-4736
Length: 4 Year(s) Total Positions: 32 (GYT: 6)
Program ID: 400-47-11-208

Texas

Austin

Austin State Hospital Program
Austin State Hospital
Austin-Travis County Mental Health and Retardation Center
Central Texas Medical Foundation
Program Director:
Beverly Sutton, MD
Austin State Hospital
4110 Guadalupe
Austin, TX 78751-2496
512-471-6614
Length: 4 Year(s) Total Positions: 16 (GYT: 4)
Program ID: 400-48-12-209

Dallas

University of Texas Southwestern Medical School Program
University of Texas Southwestern Medical School
Dallas County Hospital District-Parkland Memorial Hospital
Presbyterian Hospital of Dallas
Terrell State Hospital
Veterans Affairs Medical Center (Dallas)
Zales-Lipshy University Hospital
Program Director:
Paul C Mohl, MD
University of Texas Southwestern Medical School
5333 Harry Hines Blvd
Dallas, TX 75390-3070
214-648-2216
Length: 4 Year(s) Total Positions: 63 (GYT: 11)
Subspecialties: CHP
Program ID: 400-49-21-311

El Paso

Texas Tech University (El Paso) Program
Texas Tech University Health Sciences Center at El Paso
R J Thomason General Hospital
Program Director:
David P Striemes, MD
Texas Tech University Health Sciences Center
4800 Alberta
El Paso, TX 79905-1288
915-545-6830
Length: 4 Year(s) Total Positions: 14 (GYT: 3)
Program ID: 400-48-11-217

Fort Worth

John Peter Smith Hospital (Tarrant County Hospital District) Program
John Peter Smith Hospital (Tarrant County Hospital District)
Program Director:
Douglas P Myra, MD
Dept of Psychiatry
1500 S Main St
Fort Worth, TX 76104
817-927-3036
Length: 4 Year(s) Program ID: 400-48-21-382

Galveston

University of Texas Medical Branch Hospitals Program
University of Texas Medical Branch Hospitals
Program Director:
Joan A Lang, MD
University of Texas Medical Branch
Dept of Psychiatry
Roe 0490
Galveston, TX 77555-0490
409-772-4833
Length: 4 Year(s) Total Positions: 32 (GYT: 8)
Program ID: 400-49-11-212

Houston

Baylor College of Medicine Program
Baylor College of Medicine
Harris County Hospital District-Sen Taub General Hospital
Methodist Hospital
Veterans Affairs Medical Center (Houston)
Program Director:
James W Lomax, MD
Baylor College of Medicine Dept of Psychiatry
One Baylor Plaza Ste 810D
Houston, TX 77030
713-798-4873
Length: 4 Year(s) Total Positions: 44 (GYT: 10)
Program ID: 400-48-21-213

University of Texas at Houston Program
University of Texas Medical School at Houston
Harris County Psychiatric Center
Hearn Hospital
University of Texas M D Anderson Cancer Center
Programs Director:
Edward L Reilly, MD
University of Texas Mental Sciences Institute
1300 Moursund Ave
Houston, TX 77030-3497
713-794-1453
Length: 4 Year(s) Total Positions: 45 (GYT: 12)
Program ID: 400-49-31-216

Lackland AFB

Wofford Hall USAF Medical Center Program
Wofford Hall USAF Medical Center (SG)
Program Director:
Kenneth L Philbrick, MD
Wofford Hall USAF Medical Center
2200 Bergquist Dr Ste 1
PSOC(209)MC
Lackland AFB, TX 78236-5300
210-670-7725
Length: 4 Year(s) Total Positions: 28 (GYT: 7)
Program ID: 400-48-21-001

Lubbock

Texas Tech University (Lubbock) Program
Texas Tech University Health Sciences Center at Lubbock
St Mary of the Plains Hospital
University Medical Center
Program Director:
Elizabth Sturt, MD
Texas Tech University Health Sciences Center
Lubbock, TX 79430
806-743-2800
Length: 4 Year(s) Total Positions: 12 (GYT: 3)
Program ID: 400-49-21-288

* Updated Information not provided.
Accredited Programs in Psychiatry

San Antonio
University of Texas Health Science Center at San Antonio Program
University of Texas Medical School at San Antonio
Audie L. Murphy Memorial Veterans Hospital (San Antonio) (San Antonio)
University Hospital-South Texas Medical Center
Program Director:
Kenneth L. Matthews, MD
University of Texas Health Science Center
Dept of Psychiatry
7703 Floyd Curl Dr
San Antonio, TX 78284-7702
210 567-5480
Length: 4 Year(s) Total Positions: 40 (GY: 8)
Program ID: 400-48-31-218

Temple
Texas A&M College of Medicine-Scott and White Program
Scott and White Memorial Hospital
Program Director:
Jack D. Burke Jr, MD MPH
Scott and White Memorial Hospital
2401 S 31st St
Temple, TX 76508
254 774-7186
Length: 4 Year(s) Total Positions: 16 (GY: 4)
Program ID: 400-48-31-276

Virginia
Charlottesville
University of Virginia Program
University of Virginia Medical Center
Veterans Affairs Medical Center (Salem)
Program Director:
John Buckman, MD
University of Virginia
Dept of Psychiatric Medicine
Blue Ridge Hospital Drawer D
Charlottesville, VA 22901
804 244-5488
Length: 4 Year(s) Total Positions: 32 (GY: 8)
Program ID: 400-48-31-220

Norfolk
Eastern Virginia Graduate School of Medicine Program
Eastern Virginia Graduate School of Medicine
Sentara Norfolk General Hospital
Veterans Affairs Medical Center (Hampton)
Program Director:
Maria R. Urbano, MD
Eastern Virginia Medical School
Dept of Psychiatry
PO Box 1599
Norfolk, VA 23501
804 446-5884
Length: 4 Year(s) Total Positions: 5 (GY: 1)
Program ID: 400-48-31-221

Portsmouth
Naval Medical Center (Portsmouth) Program*
Naval Medical Center (Portsmouth)
Program Director:
Capt Benjamin A. Carey, MD
Naval Hospital
Dept of Psychiatry
Portsmouth, VA 23708-5000
804 388-5381
Length: 4 Year(s) Total Positions: 17
Program ID: 400-48-31-207

Richmond
Medical College of Virginia/Virginia Commonwealth University Program
Medical College of Virginia/Virginia Commonwealth University
Program Director:
John R. Urbach, MD
MC/Virginia Commonwealth Univ
PO Box 980710
Richmond, VA 23298-0710
804 828-3157
Length: 4 Year(s) Total Positions: 36 (GY: 9)
Program ID: 400-48-31-220

Roanoke
University of Virginia (Roanoke-Salem) Program
Carilion Health System
Roanoke Memorial Hospitals
Veterans Affairs Medical Center (Salem)
Program Director:
Wilton W. Spradlin, MD
Roanoke Memorial Hospital
PO Box 13367
Roanoke, VA 24033
703 961-7856
Length: 4 Year(s) Total Positions: 27 (GY: 8)
Program ID: 400-48-31-237

Washington
Seattle
University of Washington Program
University of Washington School of Medicine
Harborview Medical Center
Sacred Heart Medical Center
University of Washington Medical Center
Veterans Affairs Medical Center (Seattle)
Program Director:
Johan Verbalis, MD
Dept of Psychiatry & Behavioral Sciences (WD-46)
4225 Roosevelt Way NE
Ste 306
Seattle, WA 98105
206 543-5077
Length: 4 Year(s) Total Positions: 55 (GY: 10)
Program ID: 400-48-31-225

West Virginia
Charleston
West Virginia University (Charleston Division) Program
Charleston Area Medical Center
Program Director:
T O Dickey III, MD
Dept of Behavioral Medicine and Psychiatry
Robert C Byrd HSC/WVU/Charleston
PO Box 1547
Charleston, WV 25325
304 341-5000
Length: 4 Year(s) Total Positions: 16 (GY: 4)
Subspecialties: CHP
Program ID: 400-48-31-204

Morgantown
West Virginia University Program*
West Virginia University Hospitals
Charleston Area Medical Center
Program Director:
Dianne W. Trumbull, MD
Dept of Behavioral Medicine and Psychiatry
West Virginia University Med Ctr
930 Chestnut Ridge Rd
Morgantown, WV 26506
304 265-2441
Length: 4 Year(s) Total Positions: 33 (GY: 8)
Program ID: 400-48-31-226

* Updated information not provided.
Accredited Programs in Pulmonary Disease (Internal Medicine)

Wisconsin
Madison
University of Wisconsin Program
University of Wisconsin Hospital and Clinics
Mertler Hospital
William S Middleton Veterans Hospital
Program Director:
Stephen J Weiler, MD
University of Wisconsin Hospital Clinics
600 Highland Ave
866/214
Madison, WI 53792-2475
608 255-6092
Length: 4 Year(s) Total Positions: 32 (GYT: 8)
Program ID: 400-08-21-228

Milwaukee
Medical College of Wisconsin Program
Medical College of Wisconsin
Children's Hospital of Wisconsin
Clement J Zablocki Veterans Affairs Medical Center
Columbia Hospital
Foodert Memorial Lutheran Hospital
Milwaukee County Mental Health Complex
Milwaukee Psychiatric Hospital-Dewey Center
Program Director:
Carlyle H Chan, MD
Dept of Psychiatry
Medical College of Wisconsin
8701 Watertown Plank Rd
Milwaukee, WI 53226-4901
414 257-5695
Length: 4 Year(s) Total Positions: 33 (GYT: 7)
Subspecialty: CHF
Program ID: 40046-21-239
University of Wisconsin (Milwaukee) Program
Sinai Samaritan Medical Center
University of Wisconsin Hospital and Clinics
Program Director:
Gregory R Winter, MD
Sinai Samaritan Medical Center
PO Box 342
Milwaukee, WI 53201-0342
414 637-5491
Length: 4 Year(s) Total Positions: 18 (GYT: 5)
Program ID: 400-08-21-239

Winnebago
Winnebago Mental Health Institute Program
Winnebago Mental Health Institute
Mercy Medical Center of Oshkosh
Program Director:
Thomas Kelley, MD
Winnebago Mental Health Institute
Box 5
Butler Ave
Winnebago, WI 54985-0009
414 256-2509
Length: 4 Year(s) Total Positions: 12 (GYT: 3)
Program ID: 400-06-12-228

Pulmonary Disease (Internal Medicine)

Alabama
Birmingham
University of Alabama Medical Center Program
University of Alabama Hospital
Program Director:
K Randall Young Jr, MD
University of Alabama Hospital
215 Tuttle Harrison Tower
1500 University Blvd
Birmingham, AL 35294
205 934-5400
Length: 2 Year(s) Total Positions: 2
Program ID: 149-08-11-129

Mobile
University of South Alabama Program
University of South Alabama Medical Center
Program Director:
John B Bass Jr, MD
University of South Alabama Medical Center
2451 Pribble St
10th Fl Ste G
Mobile, AL 36617
205 471-7888
Length: 2 Year(s) Total Positions: 4
Program ID: 149-08-11-048

Arizona
Phoenix
Good Samaritan Regional Medical Center Program
Good Samaritan Regional Medical Center
Carl T Hayden Veterans Affairs Medical Center (Phoenix)
Program Director:
Jay J Botteveder, MD
Bernard E Levine, MD
Chief Pulmonary Disease Section
Carl T Hayden VA Medical Center
650 E Indian School Rd
Phoenix, AZ 85012
602 277-5551
Length: 2 Year(s) Total Positions: 4
Program ID: 149-08-31-099

California
Loma Linda
Loma Linda University Program
Loma Linda University Medical Center
Jerry L Pettis Memorial Veterans Hospital
Program Director:
Philip M Gold, MD
Loma Linda University Medical Center
PO Box 2000
Loma Linda, CA 92354
909 824-4400
Length: 2 Year(s) Total Positions: 3
Program ID: 149-05-21-083

Los Angeles
Cedars-Sinai Medical Center Program
Cedars-Sinai Medical Center
Program Director:
Spencer K Koerner, MD
Cedars-Sinai Med Ctr
5700 Beverly Blvd
Los Angeles, CA 90048
310 855-4655
Length: 2 Year(s) Total Positions: 9
Program ID: 149-08-11-126

Charles R Drew University Program*
Charles R Drew University of Medicine and Science
LAC-King/Drew Medical Center
Program Director:
Alberi II Niderer, MD
LA County-Martin Luther King Jr-Drew Medical Center
12001 S Washington Ave
Los Angeles, CA 90056
213 600-4597
Length: 2 Year(s) Total Positions: 4
Program ID: 149-08-11-129

UCLA Medical Center Program
UCLA School of Medicine
UCLA Medical Center
Program Director:
Paul B Bellamy, MD
UCLA Sch of Med
100 Van de Wiele Ave
Los Angeles, CA 90034-1736
213 825-5316
Length: 2 Year(s) Total Positions: 8
Program ID: 149-08-11-127

Veterans Affairs Medical Center (West Los Angeles) Program
Veterans Affairs Medical Center (West Los Angeles)
Program Director:
Silverio M Santiago, MD
11300 Wilshire Blvd
Los Angeles, CA 90073
310 824-3206
Length: 2 Year(s) Total Positions: 3
Program ID: 149-08-31-090

Los Angeles (Sepulveda)
UCLA San Fernando Valley Program
Veterans Affairs Medical Center (Sepulveda)
LAC Olive View Medical Center
UCLA Medical Center
Program Director:
Michael E Litter, MD
VA Medical Center
16111 S Sepulveda St
Sepulveda, CA 91433-2099
818 885-0965
Length: 2 Year(s) Total Positions: 4
Program ID: 149-08-31-124

San Francisco
California Pacific Medical Center Program
California Pacific Medical Center
California Pacific Medical Center (Pacific Campus)
Program Director:
Ronald Eiken, MD
Pacific Presbyterian Medical Center
Dept of Medicine
2100 Webster St Ste 110
San Francisco, CA 94115
415 749-5769
Length: 2 Year(s) Total Positions: 2
Program ID: 149-05-12-147

* Updated information not provided.

Graduate Medical Education Directory 723
Terrance
Los Angeles County-Harbor-UCLA Medical Center Program
Los Angeles County-Harbor-UCLA Medical Center
Program Director: Darryl Y Sue, MD
Los Angeles County-Harbor-UCLA Medical Center Respiratory Medicine SB-2
1000 W Carson St
Torrance, CA 90609
310 232-3001
Length: 2 Year(s) Total Positions: 6
Program ID: 149-05-11-170

Colorado
Denver
University of Colorado Program
University of Colorado Health Sciences Center
Denver Health and Hospitals
Veterans Affairs Medical Center (Denver)
Program Director: Marvin L Schwartz, MD
Univ of Colorado Health Sciences Center Dept of Medicine
4200 E Ninth Ave
Box G727
Denver, CO 80262
303 279-7997
Length: 2 Year(s) Total Positions: 18
Program ID: 149-07-21-058

Connecticut
Bridgeport
Yale University (Bridgeport) Program
Bridgeport Hospital
Yale-New Haven Hospital
Program Director: Raymond G Haddad, MD
Bridgeport Hospital
267 Grant St
Bridgeport, CT 06610
203 334-3794
Length: 2 Year(s) Total Positions: 2
Program ID: 149-08-21-199

New Haven
Yale-New Haven Medical Center Program*
Yale-New Haven Hospital
Hospital of St Raphaels
Veterans Affairs Medical Center (West Haven)
Waterbury Hospital Health Care
Program Director: Richard A Matta, MD
Yale Univ School of Medicine Dept of Medicine
Pulmonary/Critical Care (LCI 105)
333 Cedar St PO Box 208167
New Haven, CT 06520-8167
203 785-4196
Length: 2 Year(s) Total Positions: 8
Program ID: 149-08-21-024

Florida
Tampa
University of South Florida Program
University of South Florida College of Medicine
James A Haley Veterans Hospital
Tampa General Healthcare
Vencor Hospital
Veterans Affairs Medical Center (Bay Pines)
Program Director: Allan L Goldman, MD
University of South Florida College of Medicine
Div of Pulmonary/Critical Care 111C
13900 Bruce B Downs Blvd
Tampa, FL 33612-4708
813 972-7543
Length: 2 Year(s) Total Positions: 9
Program ID: 149-11-21-037

Illinois
Chicago
University of Chicago Program
University of Chicago Hospitals
Program Director: Lawrence D H Wood, MD PhD
University of Chicago Hospitals
5841 S Maryland Ave
MC0036 Em M-659
Chicago, IL 60637-1470
312 702-1450
Length: 2 Year(s) Total Positions: 8
Program ID: 149-08-11-060

North Chicago
Finch University of Health Sciences/Chicago Medical School Program
Finch University of Health Sciences/Chicago Medical School
Mount Sinai Hospital Medical Center of Chicago
Veterans Affairs Medical Center (North Chicago)
Program Director: Eric H Gluck, MD
University of Health Science/The Chicago Medical School
Dept of Medicine
333 Green Bay Rd
North Chicago, IL 60064-3085
708 575-3291
Length: 2 Year(s) Total Positions: 4
Program ID: 149-16-21-051

Springfield
Southern Illinois University Program
Southern Illinois University School of Medicine
Memorial Medical Center
St John's Hospital
Program Director: lanie E Eagleton, MD
Southern Illinois University School of Medicine
880 N Rutledge
PO Box 19230
Springfield, IL 62704-9230
217 785-0187
Length: 2 Year(s) Total Positions: 4
Program ID: 149-16-21-184

* Updated information not provided.

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Graduate Medical Education Directory
Indiana

Indianapolis

Methodist Hospital of Indiana Program
Methodist Hospital of Indiana
Program Director: Stephen J. Jay, MD
Methodist Hospital of Indiana
I-65 at 21st St
PO Box 1367
Indianapolis, IN 46206-1367
317 928-8226
Length: 2 Year(s)  Total Positions: 2
Program ID: 149-17-11-110

Kentucky

Lexington

University of Kentucky Medical Center Program
University Hospital-Albert B. Chandler Medical Center
Veterans Affairs Medical Center (Lexington)
Program Director: Naushberhan Burki, MD
University Hospital-Albert B. Chandler Medical Center
800 Rose St MN 578
Lexington, KY 40536
606 323-5465
Length: 2 Year(s)  Total Positions: 6
Program ID: 149-20-21-172

Louisville

University of Louisville Program
University of Louisville School of Medicine
University of Louisville Hospital
Veterans Affairs Medical Center (Louisville)
Program Director: Eugene C. Fletcher, MD
University of Louisville
Dept of Medicine
Ambulatory Care Bldg 3rd Fl
Louisville, KY 40292
502 852-5841
Length: 2 Year(s)  Total Positions: 6
Program ID: 149-20-31-097

Louisiana

New Orleans

Alton Ochsner Medical Foundation Program
Alton Ochsner Medical Foundation
Program Director: John M. Ondrus, MD
Alton Ochsner Medical Foundation
Dept of Grad Med Educ
1516 Jefferson Hwy
New Orleans, LA 70121
504 543-4085
Length: 2 Year(s)  Total Positions: 3
Program ID: 149-21-23-143

Tulane University Program
Tulane University School of Medicine
Medical Center of Louisiana at New Orleans-Tulane Division
Tulane University Hospital and Clinics
Veterans Affairs Medical Center-Tulane Service (New Orleans)
Program Director: Mitchell Friedland, MD
Tulane Medical Center
1430 Tulane Ave
New Orleans, LA 70112-2000
504 588-2250
Length: 2 Year(s)  Total Positions: 8
Program ID: 149-21-21-106

Maryland

Baltimore

University of Maryland Program
University of Maryland Medical System
Veterans Affairs Medical Center (Baltimore)
Program Director: Lewis J. Rubin, MD
University of Maryland Medical Center
Div of Pulmonary & Critical Care
10 S. Pine St Ste 900
Baltimore, MD 21201-1189
410 706-5344
Length: 2 Year(s)  Total Positions: 9
Program ID: 149-23-21-439

Bethesda

National Naval Medical Center (Bethesda) Program
National Naval Medical Center (Bethesda)
Program Director: Angeline A. Lazarus, MD
National Naval Medical Center
Pulmonary Medicine
800 Wisconsin Ave
Bethesda, MD 20889-5600
301 265-4161
Length: 2 Year(s)  Total Positions: 1
Program ID: 149-23-11-150

Massachusetts

Boston

Boston University Program
Boston University School of Medicine
Boston City Hospital
Boston University Medical Center-Veterans Affairs Medical Center (Boston)
Program Director: David M. Center, MD
Jeffrey S. Berman, MD
Boston University School of Medicine
80 E. Concord St S-600
Boston, MA 02118
617 638-4909
Length: 2 Year(s)  Total Positions: 16
Program ID: 149-24-21-151

Brigham and Women's Hospital Program
Brigham and Women's Hospital
Program Director: Barry D. Pach, MD
West Roxbury VA Medical Center
1400 VFW Pkwy
West Roxbury, MA 02132
617 285-7700
Length: 2 Year(s)  Total Positions: 4
Program ID: 149-24-21-008

Massachusetts General Hospital Program
Massachusetts General Hospital
Program Director: David M. Symptom, MD
Massachusetts General Hospital
Pulmonary Section
One Deaconess Rd
Boston, MA 02125
617 632-0675
Length: 2 Year(s)  Total Positions: 15
Program ID: 149-24-11-063

New England Deaconess Hospital Program
New England Deaconess Hospital
Program Director: Ronald C. Silvester, MD
Deaconess Hospital
Pulmonary Section
One Deaconess Rd
Boston, MA 02215
617 632-0675
Length: 2 Year(s)  Total Positions: 2
Program ID: 149-24-21-175

Worcester

University of Massachusetts Medical Center Program
University of Massachusetts Medical Center
Program Director: John M. Madison, MD
University of Massachusetts Medical Center
55 Lake Ave N
Worcester, MA 01655
508 856-3212
Length: 2 Year(s)  Total Positions: 4
Program ID: 149-24-21-008

Michigan

Detroit

Sinai Hospital Program
Sinai Hospital
Program Director: Bohdan Pichasko, MD
Sinai Hospital
Medical Staff Office
6767 W Outer Dr
Detroit, MI 48235-2999
313 482-5780
Length: 2 Year(s)  Total Positions: 2
Program ID: 149-25-11-192

* Updated information not provided.
Wayne State University/Detroit Medical Center Program
Wayne State University School of Medicine
Detroit Receiving Hospital and University Health Center
Harper Hospital
Veterans Affairs Medical Center (Allen Park)
Program Director:
Barzin A Debaijoe, MD
Harper Hospital Dept of Medicine
3800 John R 3 Hudson
Detroit, MI 48204
313 745-0030
Length: 2 Year(s)  Total Positions: 6
Program ID: 149-25-21-045

East Lansing
Michigan State University Program
Michigan State University College of Human Medicine
Michigan State Medical Center
Program Director:
Garren R Khasnabish, MD
Michigan State Medical Center
401 W Greenlaw
Lansing, MI 48910-2819
517 335-6944
Length: 2 Year(s)
Program ID: 149-25-21-073

Nebraska
Omaha
Creighton University Program
Creighton/Nebraska University Health Foundation
AMI St Joseph Hospital at Creighton Univ Medical Center
Veterans Affairs Medical Center (Omaha)
Program Director:
Walter J O’Donohue Jr, MD
Pulmonary Medicine Ste 3820
601 N 30th St
Omaha, NE 68131-2100
402 449-4498
Length: 2 Year(s)  Total Positions: 2
Program ID: 149-20-11-104

University of Nebraska Program
University of Nebraska Medical Center
Veterans Affairs Medical Center (Omaha)
Program Director:
John R Spurny, MD
Univ of Nebraska Medical Center Pulmonary Section
600 S 42nd St
Omaha, NE 68198-5000
402 559-4498
Length: 2 Year(s)  Total Positions: 6
Program ID: 149-20-21-155

New York
Bronx
Albert Einstein College of Medicine Program
Albert Einstein College of Medicine of Yeshiva University
Bronx Municipal Hospital Center
Montefiore Medical Center-Henry and Lucy Moses Division
Program Director:
Thomas K Aldrich, MD
Montefiore Medical Center Pulmonary Div
111 E 210th St
Bronx, NY 10467
718 926-6087
Length: 2 Year(s)  Total Positions: 15
Program ID: 149-25-21-101

Bronx-Lebanon Hospital Center Program
Bronx-Lebanon Hospital Center
Program Director:
Jerome Ernst, MD
Bronx-Lebanon Hospital Center
1276 Fulton Ave
Bronx, NY 10456
718 961-8646
Length: 2 Year(s)  Total Positions: 8
Program ID: 149-25-21-102

Brooklyn
Brookdale Hospital Medical Center Program
Brookdale Hospital Medical Center
Program Director:
Eliott Bondi, MD
Brookdale Hospital and Medical Center
Linden Blvd at Brookdale Plaza
Brooklyn, NY 11212-3108
718 240-6238
Length: 2 Year(s)  Total Positions: 6
Program ID: 149-25-11-117

Brooklyn Hospital Center Program
Brooklyn Hospital Center
Program Director:
Ramesh S Guptani, MD
The Brooklyn Hospital Center
121 Dekalb Ave
Brooklyn, NY 11201
718 250-8650
Length: 2 Year(s)  Total Positions: 3
Program ID: 149-25-12-185

Coney Island Hospital Program
Coney Island Hospital
Program Director:
Sashi R Dhar, MD
Coney Island Hospital
851 Ocean Pkwy
Brooklyn, NY 11235
718 615-5370
Length: 2 Year(s)  Total Positions: 4
Program ID: 149-25-11-178

Interfaith Medical Center Program
Interfaith Medical Center
Program Director:
Gerald M Greenberg, MD
Interfaith Medical Center
1 Sadie St
Brooklyn, NY 11239
718 935-7003
Length: 2 Year(s)  Total Positions: 4
Program ID: 149-25-21-179

Minnesota
Minneapolis
University of Minnesota Program*
University of Minnesota Medical School
University of Minnesota Hospital and Clinic
Veterans Affairs Medical Center (Minneapolis)
Program Director:
Varies
Pulmonary Disease
University of Minnesota Hospital and Clinic
Dept of Medicine Box 132
420 Delaware St SE
Minneapolis, MN 55455
612 624-8909
Length: 2 Year(s)  Total Positions: 11
Program ID: 149-20-21-114

Mississippi
Jackson
University of Mississippi Medical Center Program
University of Mississippi School of Medicine
University Hospital
Veterans Affairs Medical Center (Jackson)
Program Director:
Joe R Norman, MD
University Hospital
2200 N State St
Jackson, MS 39216-4565
601 667-0009
Length: 2 Year(s)  Total Positions: 4
Program ID: 149-27-31-074

New Jersey
South Orange
Seton Hall University School of Graduate Medical Education Program
Seton Hall University School of Graduate Medical Education
St Joseph’s Hospital and Medical Center
Program Director:
M Azeez Khan, MD
St Joseph’s Hospital and Medical Center
705 Nain St
Paterson, NJ 07503
201 877-3288
Length: 2 Year(s)  Total Positions: 7
Program ID: 149-29-11-159

New Mexico
Albuquerque
University of New Mexico Program
University of New Mexico School of Medicine
University Hospital
Veterans Affairs Medical Center (Albuquerque)
Program Director:
Howard Levy, MD
University of New Mexico Dept of Medicine
2211 Lomas Blvd NE
5th Fl Ambulatory Care Otr
Albuquerque, NM 87131-0271
505 272-4751
Length: 2 Year(s)  Total Positions: 5
Program ID: 149-24-21-177

* Updated information not provided.
Long Island College Hospital Program
Long Island College Hospital
Woodhull Medical and Mental Health Center
Program Director:
Mardel S Remnick, MD
Long Island College Hospital
34-96 Henry St
Brooklyn, NY 11201
718 280-1766
Length: 2 Year(s) Total Positions: 5
Program ID: 149-35-11-104

Maimonides Medical Center Program
Maimonides Medical Center
Program Director:
Sidney Tasser, MD
Maimonides Medical Center
4802 10th Ave
Brooklyn, NY 11219
718 283-8900
Length: 2 Year(s) Total Positions: 4
Program ID: 149-35-11-108

New York Methodist Hospital Program
New York Methodist Hospital
Program Director:
Nassar Anandanary, MB BS
The Methodist Hosp.
500 Sixth St
Brooklyn, NY 11215
718 789-2245
Length: 2 Year(s) Total Positions: 3
Program ID: 149-35-11-091

SUNY Health Science Center at Brooklyn Program
SUNY HSC at Brooklyn College of Medicine
Kings County Hospital Center
University Hospital-SUNY Health Science Center at Brooklyn
Veterans Affairs Medical Center (Brooklyn)
Program Director:
Linda S Effron, MD
SUNY Health Science Center at Brooklyn
450 Clarkson Ave Box 10
Brooklyn, NY 11203-2098
718 270-7770
Length: 2 Year(s) Total Positions: 11
Program ID: 149-35-21-064

East Meadow
SUNY at Stony Brook (East Meadow) Program
Nassau County Medical Center
Program Director:
Linda Bajaj, MD
Nassau County Medical Center
2201 Hempstead Tpke
East Meadow, NY 11554-5400
516 573-6714
Length: 2 Year(s) Total Positions: 3
Program ID: 149-35-21-069

Flushing
New York Hospital Medical Center of Queens Program*
New York Hospital Medical Center of Queens
Program Director:
Stephen Karbowits, MD
The New York Hospital Medical Center of Queens
56-45 Main St
Flushing, NY 11355-5095
718 570-1405
Length: 2 Year(s) Total Positions: 3
Program ID: 149-35-11-090

Jamaica
Catholic Medical Center of Brooklyn and Queens Program
Catholic Medical Center of Brooklyn and Queens Inc
Catholic Medical Center (Manhattan Medical Center)
Catholic Medical Center (St John's Queens Hospital)
Program Director:
Albert Miller, MD
Catholic Medical Center
88-25 103rd St
Jamaica, NY 11432
718 588-7255
Length: 2 Year(s) Total Positions: 4
Program ID: 149-35-22-047

New York
Harlem Hospital Center Program*
Harlem Hospital Center
Program Director:
Charles P Pelton, MD
Harlem Hospital Center
Dept of Medicine Rm 14-101
506 Lenox Ave
New York, NY 10037
212 938-1401
Length: 2 Year(s) Total Positions: 4
Program ID: 149-35-11-108

Lenox Hill Hospital Program
Lenox Hill Hospital
Program Director:
Nathan S Serlet, MD
Section of Pulmonary Medicine
Lenox Hill Hospital
100 E 77th St
New York, NY 10021-1883
212 454-2145
Length: 2 Year(s) Total Positions: 2
Program ID: 149-35-11-181

Mount Sinai School of Medicine (Elmhurst) Program
Mount Sinai School of Medicine
Elmhurst Hospital Center-Mount Sinai Services
Mount Sinai Medical Center
Program Director:
Harvey M Shante, PhD MD
Elmhurst Hospital Center
Dept of Internal Medicine
70-01 Broadway
Elmhurst, NY 11373
718 594-3122
Length: 2 Year(s) Total Positions: 4
Program ID: 149-35-11-116

New York Hospital/Cornell Medical Center Program
Mount Sinai School of Medicine
Mount Sinai-Kettering Cancer Center
Program Director:
Diane S Stow, MD
Mount Sinai-Kettering Cancer Center
Pulmonary Service
1275 York Ave Rm C-576
New York, NY 10021
212 650-8300
Length: 2 Year(s) Total Positions: 6
Program ID: 149-35-31-173

New York Hospital/Cornell Medical Center Program 1*
New York Hospital
Program Director:
Crystal G Ronald, MD
New York Hospital/Cornell Medical Center
520 E 70th St
New York, NY 10021
212 746-2250
Length: 2 Year(s) Total Positions: 9
Program ID: 149-35-21-167

Presbyterian Hospital in the City of New York Program
Presbyterian Hospital in the City of New York
Program Director:
Peter J. Baldwin, MD
Presbyterian Hospital in the City of New York
632 W 168th St
New York, NY 10032-8110
212 305-1704
Length: 2 Year(s) Total Positions: 6
Program ID: 149-35-11-142

Rochester
University of Rochester Program
Strong Memorial Hospital of the University of Rochester
Program Director:
Mark J Uehleke, MD
University of Rochester Medical Center
Pulmonary and Critical Care Unit
601 Elmwood Ave Box 265
Rochester, NY 14642-8602
716 275-4661
Length: 2 Year(s) Total Positions: 7
Program ID: 149-35-11-102

Stony Brook
SUNY at Stony Brook Program
University Hospital-SUNY at Stony Brook
Veterans Affairs Medical Center (Northport)
Program Director:
Adam Harowitz, MD
Health Science Center Dept of Medicine
T1-17 Srm 040
Stony Brook, NY 11794-8172
516 444-1774
Length: 2 Year(s) Total Positions: 2
Program ID: 149-35-21-011

Valhalla
New York Medical College (Cabrini) Program
New York Medical College
Cabrini Medical Center
Program Director:
Wilfredo Talamantes, MD
Cabrini Medical Center
227 E 19th St
New York, NY 10003
212 505-0958
Length: 2 Year(s) Total Positions: 4
Program ID: 149-35-31-106

* Updated information not provided.
North Carolina

Durham

Duke University Program
Duke University Medical Center
Program Director: James D Crapo, MD
Duke University Medical Center
Box 3177
Durham, NC 27710
919 664-6366
Length: 2 Year(s) Total Positions: 13
Program ID: 149-06-21-187

Winston-Salem

Bowman Gray School of Medicine Program
North Carolina Baptist Hospital
Program Director: David A Bass, MD
North Carolina Baptist Hospital
Medical Center Blvd
Winston-Salem, NC 27157-1054
919 716-4223
Length: 2 Year(s) Total Positions: 6
Program ID: 149-06-21-014

Ohio

Cleveland

Case Western Reserve University Program
University Hospitals of Cleveland
Veterans Affairs Medical Center (Cleveland)
Program Director: E Ragle McFadden Jr, MD
Div of Pulmonary & Critical Care Medicine
University Hospitals of Cleveland
1100 Euclid Ave
Cleveland, OH 44106-4388
216 964-3001
Length: 2 Year(s) Total Positions: 12
Program ID: 149-06-21-160

Pennsylvania

Danville

Geisinger Medical Center Program
Geisinger Medical Center
Program Director: David E Pisk, MD
Geisinger Medical Center
N Academy Ave
Danville, PA 17222
717 271-6355
Length: 2 Year(s) Total Positions: 2
Program ID: 149-04-11-188

Hershey

Milton S Hershey Medical Center of Pennsylvania State University Program
Penn State University Hospital-Milton S Hershey Med Ctr
Program Director: Clifford W Zuwilich, MD
Milton S Hershey Medical Center
PO Box 852
Hershey, PA 17033
717 531-6565
Length: 2 Year(s) Total Positions: 3
Program ID: 149-41-11-016

Philadelphia

Graduate Hospital Program
Graduate Hospital
Program Director: Paul E Epstein, MD
Graduate Hospital
Peppler Pavilion Ste 507
Philadelphia, PA 19146
215 880-5242
Length: 2 Year(s) Total Positions: 2
Program ID: 149-41-11-189

Presbyterian Medical Center of Philadelphia Program
Presbyterian Medical Center of Philadelphia
Episcopal Hospital
Program Director: James F Shinick, DO
Presbyterian Medical Center of Philadelphia
39th & Market Sts
Philadelphia, PA 19104
215 862-9600
Length: 2 Year(s) Total Positions: 3
Program ID: 149-41-11-119

University of Pennsylvania Program
Hospital of the University of Pennsylvania
Program Director: Robert M Kodliff, MD
Hospital of the University of Pennsylvania
Pulmonary/Critical Care Fellowship
3600 Spruce St Ste 888 West Gates
Philadelphia, PA 19104-4283
215 349-5484
Length: 2 Year(s) Total Positions: 15
Program ID: 149-41-21-023

Pittsburgh

MCPH/UI Allegheny General Hospital Program
Allegheny General Hospital
Program Director: Peter Kaplan, MD
Dept of Pulmonary Disease
Allegheny General Hospital
320 E North Ave
Pittsburgh, PA 15213-9996
412 359-0030
Length: 2 Year(s) Total Positions: 7
Program ID: 149-41-11-040

Western Pennsylvania Hospital Program
Western Pennsylvania Hospital
Program Director: Paul C Fiehler, MD
Western Pennsylvania Hospital
Dept of Medicine
4500 Friendship Ave
Pittsburgh, PA 15224
412 576-5759
Length: 2 Year(s) Total Positions: 3
Program ID: 149-41-11-042

Sayre

Guthrie Healthcare System Program
Robert Packer Hospital
Program Director: Robert J Lenox, MD
Guthrie Healthcare System
Guthrie St
Sayre, PA 18840-1008
717 888-6666
Length: 2 Year(s) Total Positions: 2
Program ID: 149-41-21-198

Wilkes-Barre

Northeastern Pennsylvania Hospitals Program
Veterans Affairs Medical Center (Wilkes-Barre)
Community Medical Center
Program Director: Samuel M Shub, MD
Veterans Administration Medical Center (Wilkes-Barre)
1111 East End
Wilkes-Barre, PA 18711
717 824-3021
Length: 2 Year(s) Total Positions: 4
Program ID: 149-41-31-191

Puerto Rico

Ponce

Hospital de Damas Program
Hospital de Damas
Ponce Regional Hospital
Program Director: Horacio Terrazas, MD
Edif Parva Ste 407
Ponce, PR
Program ID: 149-42-11-190

Rio Piedras

San Juan City Hospital Program
San Juan City Hospital
University Hospital Ramon Ruiz Aparo
Program Director: Samuel A Amill, MD
Pulmonology/Critical Care Div
San Juan City Hospital
Box 204
Rio Piedras, PR 00928
809 765-5147
Length: 2 Year(s) Total Positions: 1
Program ID: 149-42-11-097

San Juan

University of Puerto Rico Program
University of Puerto Rico School of Medicine
University Hospital
Veterans Affairs Medical Center (San Juan)
Program Director: Rafael Rodriguez-Seevers, MD
University Hospital Puerto Rico Medical Center
Box 5067
San Juan, PR 00935
809 754-3760
Length: 2 Year(s) Program ID: 149-42-21-121

* Updated information not provided.
Memphis
University of Tennessee Program*
University of Tennessee College of Medicine
Regional Medical Center at Memphis
Program Director:
John H. Griffin, MD
University of Tennessee
956 Court Rd II-314
Memphis, TN 38163
901 528-6767
Length: 2 Year(s) Total Positions: 13
Program ID: 149-47-21-140

Texas
Galveston
University of Texas Medical Branch Hospitals Program
University of Texas Medical Branch Hospitals
Program Director:
Akhil Bidani, PhD, MD
University of Texas Medical Branch
801 Mechanic Ste
Pulmonary Div E-61
Galveston, TX 77555-2778
409-764-2438
Length: 2 Year(s) Total Positions: 6
Program ID: 149-48-21-056

Lackland AFB
Wilford Hall USAF Medical Center Program
Wilford Hall USAF Medical Center (SG)
Program Director:
Serafin Derde, DO
60th Medical Wing (PSMP)
Dept of Medicine
2200 Bannigan Dr Ste 1
San Antonio, TX 78256-5000
210 670-5206
Length: 2 Year(s) Total Positions: 4
Program ID: 149-48-17-087

Temple
Texas A&M College of Medicine-Scott and White Program
Scott and White Memorial Hospital
Program Director:
Francisco Perez-Guerra, MD
Texas A&M-Scott and White
Graduate Med Educ
2401 S 31st St.
Temple, TX 76508-0001
903 288-4483
Length: 2 Year(s) Total Positions: 4
Program ID: 149-48-21-019

Utah
Salt Lake City
University of Utah Program
University of Utah Medical Center
LDS Hospital
Veterans Affairs Medical Center (Salt Lake City)
Program Director:
John R. Stoval, MD
University of Utah Health Sciences Center
Pulmonary Div
50 N Medical Dr
Salt Lake City, UT 84132-1001
801 581-7895
Length: 2 Year(s) Total Positions: 12
Program ID: 149-49-21-164

Vermont
Burlington
Medical Center Hospital of Vermont Program*
Medical Center Hospital of Vermont
Program Director:
Gerald S. Davis, MD
University of Vermont College of Medicine
Dept of Medicine
CCHS Given Bldg
Burlington, VT 05401
802 666-2382
Length: 2 Year(s) Total Positions: 3
Program ID: 149-50-21-165

Virginia
Charlottesville
University of Virginia Program
University of Virginia Medical Center
Program Director:
Sharon A. Back, MD
University of Virginia Hospitals Dept of Medicine
Box 546
Charlottesville, VA 22908-0001
804 982-5219
Length: 2 Year(s) Total Positions: 3
Program ID: 149-51-21-020

Tennessee
Johnson City
East Tennessee State University Program
James H. Quillen College of Medicine
Bristol Regional Medical Center
Johnson City Medical Center Hospital
Veterans Affairs Medical Center (Mountain Home)
Program Director:
Thomas Rain, MD
Dept of Internal Medicine
East Tennessee State University
PO Box 7062
Johnson City, TN 37614-0622
423 428-4174
Length: 2 Year(s) Total Positions: 4
Program ID: 149-47-21-167

* Updated information not provided.
Pulmonary Disease and Critical Care Medicine (Internal Medicine)

Arizona

Tucson

University of Arizona Program
University of Arizona College of Medicine
University Medical Center
Veterans Affairs Medical Center (Tucson)
Program Director:
Stuart P. Quan, MD
Univ of Arizona Coll of Med
Respiratory Sciences Ctr
1501 N Campbell Ave
Tucson, AZ 85724
602-286-4114
Length: 3 Year(s)  Total Positions: 5
Program ID: 106-03-21-001

Arkansas

Little Rock

University of Arkansas for Medical Sciences Program
University of Arkansas College of Medicine
John L McClellan Memorial Veterans Hospital
University Hospital of Arkansas
Program Director:
Pauola J. Anderson, MD
4301 W Markham Slot #606
Univ of Arkansas for Med Sciences
Little Rock, AR 72205
501 686-5585
Length: 3 Year(s)  Total Positions: 6
Program ID: 106-04-21-002

California

Los Angeles

Cedars-Sinai Medical Center Program*
Cedars-Sinai Medical Center
Program Director:
Laurence S. Maldonado, MD
Michael I Lewis, MD
6355 N. Harbor Blvd
Los Angeles, CA 90048
213 855-1265
Length: 3 Year(s)  Total Positions: 13
Program ID: 106-05-22-008

Los Angeles County-University of Southern California Medical Center Program
Los Angeles County USC Medical Center
Barlow Respiratory Hospital
Program Director:
Edward D Crandall, MD
Univ of Southern California
2025 Zonal Ave GHN 11900
Los Angeles, CA 90033
213 232-7924
Length: 3 Year(s)  Total Positions: 15
Program ID: 106-05-01-004

Orange

University of California (Irvine) Program
University of California (Irvine) Medical Center
Veterans Affairs Medical Center (Long Beach)
Program Director:
Mathew Brenner, MD
Pulmonary/Critical Care Div
Univ of California Irvine Med Ctr
101 City Dr Sr
Orange, CA 92868
714 656-5160
Length: 3 Year(s)  Total Positions: 10
Program ID: 106-05-11-005

Sacramento

University of California (Davis) Program*
University of California (Davis) Medical Center
Program Director:
Gibbe Parsons, MD
4001 X St.
P.O. Box 3520
Sacramento, CA 95817
916 734-3564
Length: 3 Year(s)  Total Positions: 4
Program ID: 106-04-12-008

San Diego

Naval Medical Center (San Diego) Program
Naval Medical Center (San Diego)
Program Director:
Dennis R. Amundson, MC DO
Box #215
Naval Hospital
San Diego, CA 92134-5000
619 532-9667
Length: 3 Year(s)  Total Positions: 4
Program ID: 106-04-11-007

University of California (San Diego) Program
University of California (San Diego) Medical Center
Veterans Affairs Medical Center (San Diego)
Program Director:
Roger G Spragg, MD
225 Dickinson St
San Diego, CA 92103-1990
619 532-9585
Length: 3 Year(s)  Total Positions: 5
Program ID: 106-05-02-008

* Updated information not provided.
San Francisco
University of California (San Francisco) Program
University of California (San Francisco) School of Medicine
San Francisco General Hospital Medical Center
University of California (San Francisco) Medical Center
Program Director: Michael A Matthey, MD
John M Luce, MD
Dept of Medicine
Box 9120
San Francisco, CA 94143-0600
415 476-2897
Length: 3 Year(s) Total Positions: 24
Program ID: 156-06-29-009

Florida
Gainesville
University of Florida Program
University of Florida College of Medicine
Shands Hospital at the University of Florida
Veterans Affairs Medical Center (Gainesville)
Program Director: Eloise M Harman, MD
Box J-235
Univ of Florida
Gainesville, FL 32610
904 392-6787
Length: 3 Year(s) Total Positions: 2
Program ID: 156-11-21-014

Miami
University of Miami-Jackson Memorial Medical Center Program
University of Miami-Jackson Memorial Medical Center
Mount Sinai Medical Center of Greater Miami
Veterans Affairs Medical Center (Miami)
Program Director: Roland M H Schein, MD
PO Box 016700
Univ of Miami Sch of Med
Miami, FL 33101
305 324-3153
Length: 3 Year(s) Total Positions: 14
Program ID: 156-11-01-015

Connecticut
Farmington
University of Connecticut Program
University of Connecticut School of Medicine
Hartford Hospital
Mount Sinai Hospital
New Britain General Hospital
St Francis Hospital and Medical Center
Univ of Connecticut Health Center/John Dempsey Hospital
Program Director: Daniel McNally, MD
Univ of Connecticut Health Ctr
Farmington, CT 06010
203 678-2000
Length: 3 Year(s) Total Positions: 2
Program ID: 156-06-21-011

District of Columbia
Washington
Georgetown University Program
Georgetown University Hospital
Fairfax Hospital
Program Director: Richard Waldhorn, MD
Georgetown Univ Med Ctr
Pulmonary/Critical Care Med
3900 Reservoir Rd NW PHC-5
Washington, DC 20057
202 687-8890
Length: 3 Year(s) Total Positions: 6
Program ID: 156-10-21-018

Georgia
Atlanta
Emory University Program
Emory University School of Medicine
Emory University Hospital
Grady Memorial Hospital
Veterans Affairs Medical Center (Atlanta)
Program Director: Gerald W Stallone Jr, MD
Crawford Long Hospital
550 Peachtree St NE
Atlanta, GA 30308-2225
404 501-2005
Length: 3 Year(s) Total Positions: 9
Program ID: 156-12-21-016

Augusta
Medical College of Georgia Program
Medical College of Georgia Hospital and Clinics
Veterans Affairs Medical Center (Augusta)
Program Director: James E Smith, MD
VA Medical Center
Section of Pulmonary Disease
111 E Augusta, GA 30901
706 726-0188
Length: 3 Year(s) Total Positions: 2
Program ID: 156-12-21-017

Illinois
Chicago
Cook County Hospital Program
Cook County Hospital
Program Director: Pedram P Muthuswamy, MD
Dir of Pulmonary/Critical Care
Cook County Hosp
1830 W Harrison St
Chicago, IL 60612
312 633-8966
Length: 3 Year(s) Total Positions: 6
Program ID: 156-16-21-019

McCaw Medical Center of Northwestern University Program
Northwestern University Medical School
Northwestern Memorial Hospital
Veterans Affairs Lakeside Medical Center (Chicago)
Program Director: Richard Davison, MD
2611 E Chicago
Weasly-Suite 628
Chicago, IL 60611
312 608-5746
Length: 3 Year(s) Total Positions: 7
Program ID: 156-16-21-081

Rush-Presbyterian-St Luke’s Medical Center Program
Rush-Presbyterian-St Luke's Medical Center
Program Director: Joseph E Parrillo, MD
1750 W Congress Pkwy
Chicago, IL 60612
312 943-5309
Length: 3 Year(s) Total Positions: 6
Program ID: 156-16-21-079

University of Illinois College of Medicine at Chicago Program
University of Illinois College of Medicine at Chicago
Michael Reese Hospital and Medical Center
University of Illinois Hospital and Clinics
Veterans Affairs Hines Medical Center (Chicago)
Program Director: Euan O’Mal, MD
Univ of Illinois
Dept of Med
787 E 51st
Chicago, IL 60615
312 695-9093
Length: 3 Year(s) Total Positions: 9
Program ID: 156-16-21-020

Maywood
Loyola University Program
Foster G McGaw Hospital-Loyola University of Chicago
Edward D Hines Jr Veterans Affairs Hospital
Program Director: Martin J Tobin, MD
Dir of Pulmonary/Critical Care Med
2100 S First Ave Rm 1312-104
Maywood, IL 60153
708 216-5402
Length: 3 Year(s) Total Positions: 3
Program ID: 156-16-21-021

* Updated information not provided.
Accredited Programs in Pulmonary Disease and Critical Care Medicine (Internal Medicine)

Indiana

Indianapolis
Indiana University Medical Center Program
Indiana University Medical Center
William N. Wishing Memorial Hospital
Program Director:
C. Michael Hart, MD
1001 W. Tenth St
Olde Boon 425
Indianapolis, IN 46202-2379
317 631-9445
Length: 3 Year(s)  Total Positions: 12
Program ID: 154-17-31-023

Shreveport
Louisiana State University (Shreveport) Program
Louisiana State University Medical Center-Shreveport
Overton Brooks Veterans Affairs Medical Center
Program Director:
Steven A Conrad, MD
1001 Kings Hwy
Shreveport, LA 71130-8932
318 674-5920
Length: 3 Year(s)  Total Positions: 5
Program ID: 154-21-31-026

Maine

Portland
Maine Medical Center Program
Maine Medical Center
Program Director:
Peter Bates, MD
Maine Med Ctr
22 Bramhall St
Portland, ME 04102
207 871-2770
Length: 3 Year(s)  Total Positions: 2
Program ID: 154-22-31-027

Maryland

Baltimore
Johns Hopkins University Program
Johns Hopkins University School of Medicine
Johns Hopkins Bayview Medical Center
Johns Hopkins Hospital
Program Director:
J. T. Sylvertone, MD
Roy G. Brower, MD
600 N Wolfe St
Baltimore, MD 21205
301 755-3472
Length: 3 Year(s)  Total Positions: 21
Program ID: 156-23-21-029

Massachusetts

Boston
New England Deaconess Hospital Program
New England Deaconess Hospital
Lahey Clinic
Program Director:
Andrew G Villanueva, MD
Lahey Clinic Med Ctr
41 Mall Rd
Burlington, MA 01805
781 273-5450
Length: 3 Year(s)  Total Positions: 1
Program ID: 156-24-21-029

New England Medical Center Hospitals Program
New England Medical Center Hospitals
Program Director:
Leonard Siciliano, MD
750 Washington St
New England Med Ctr
Boston, MA 02111
617 620-3662
Length: 3 Year(s)  Total Positions: 3
Program ID: 156-24-21-030

St Elizabeth's Medical Center of Boston Program
St Elizabeth's Medical Center of Boston
Program Director:
Bartholomeo Celli, MD
Critical Care Medicine
St Elizabeth's Hospital
736 Cambridge St, Box 13
Brighton, MA 02136
617 739-2545
Length: 3 Year(s)  Total Positions: 2
Program ID: 156-24-31-031

Michigan

Ann Arbor
University of Michigan Program*
University of Michigan Hospitals
Veterans Affairs Medical Center (Ann Arbor)
Program Director:
Galen B Towns, MD
3816 Taubman Health Center
Ann Arbor, MI 48109-0360
313 936-5010
Length: 3 Year(s)  Total Positions: 8
Program ID: 156-25-21-082

Detroit

Henry Ford Hospital Program
Henry Ford Hospital
Program Director:
John Popovich Jr, MD
Henry Ford Hosp
2710 W Grand Blvd
Detroit, MI 48202
313 937-4329
Length: 3 Year(s)  Total Positions: 12
Program ID: 156-25-31-033

Minnesota

Rochester
Mayo Graduate School of Medicine Program
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Rochester)
Rochester Methodist Hospital
St Mary's Hospital of Rochester
Program Director:
William Dunn, MD
200 First St SW
Rochester, MN 55905
507 285-3275
Length: 3 Year(s)  Total Positions: 5
Program ID: 156-26-21-094

* Updated information not provided.
Missouri

Columbia

University of Missouri-Columbia Program
University of Missouri-Columbia School of Medicine
University and Children’s Hospital

Program Director:
B Phillip Dellinger, MD
M 467 Medical Science Bldg
Univ Missouri Hlth Sci Ctr
Columbia, MO 65212
314 882-2661
Length: 3 Year(s)  Total Positions: 4
Program ID: 156-32-14038

Kansas City

University of Missouri at Kansas City Program
University of Missouri-Kansas City School of Medicine
St Luke’s Hospital
Truman Medical Center-West

Program Director:
Gary A. Saltzman, MD
Div of Respiratory & Critical Care Medicine
3411 Holmes
Kansas City, MO 64108
913 271-1874
Length: 3 Year(s)  Total Positions: 5
Program ID: 156-32-81-038

St Louis

Barnes Hospital Group Program
Barnes Hospital
Jewish Hospital of St Louis

Program Director:
Michael J Holtzman, MD
Washington University School of Medicine
Box 6052
650 S Euclid Ave
St Louis, MO 63110
314 362-8852
Length: 3 Year(s)  
Program ID: 156-35-11-037

St Louis University Group of Hospitals Program
St Louis University School of Medicine
St John’s Mercy Medical Center
St Louis University Hospital

Program Director:
Christopher Vermaak, MD
621 S New Ballas Rd
Ste 300
St Louis, MO 63141
314 664-9483
Length: 3 Year(s)  Total Positions: 10
Program ID: 106-26-12-039

New Hampshire

Lebanon

Dartmouth-Hitchcock Medical Center Program
Mary Hitchcock Memorial Hospital
Veterans Affairs Medical Center (White River Junction)

Program Director:
Howard L Corwin, MD
2 Maynard St
Hanover, NH 03756
603 646-6000
Length: 3 Year(s)  Total Positions: 3
Program ID: 156-32-21-039

New Jersey

Camden

UMDNJ-Robert Wood Johnson Medical School (Camden) Program
Cooper Hospital-University Medical Center

Program Director:
Bruce Friedman, MD
Suite 220
Three Cooper Plaza
Camden, NJ 08103
609 362-7247
Length: 3 Year(s)  Total Positions: 2
Program ID: 156-35-21-040

Newark

UMDNJ-New Jersey Medical School Program
UMDNJ-Robert Wood Johnson Medical School
Newark Beth Israel Medical Center

Program Director:
Busayd Halder, MD
185 S Orange Ave MSB-1582
Newark, NJ 07103
973-363-5391
Length: 3 Year(s)  
Program ID: 106-33-31-041

Piscataway

UMDNJ-Robert Wood Johnson Medical School Program
UMDNJ-Robert Wood Johnson Medical School Medical Center at Princeton
Robert Wood Johnson University Hospital
St Peter’s Medical Center

Program Director:
Philip L Schiffman, MD
One Robert Wood Johnson Pk
CN19
New Brunswick, NJ 08903-0019
908 937-7343
Length: 3 Year(s)  Total Positions: 4
Program ID: 106-38-11-042

New York

Albany

Albany Medical Center Program
Albany Medical Center Hospital
Veterans Affairs Medical Center (Albany)

Program Director:
Anthony L Malanta, MD
Director, Division of Pulmonary and Critical Care Medicine

New York Medical Center A-10
Albany, NY 12208
Length: 3 Year(s)  
Program ID: 156-35-31-048

Buffalo

SUNY at Buffalo Graduate Medical-Dental Education Consortium Program
SUNY at Buffalo Grad Medical-Dental Education Consortium
Buffalo General Hospital
Erie County Medical Center
Veterans Affairs Medical Center (Buffalo)

Program Director:
Alan R Saltzman, MD
462 Grider St
Buffalo, NY 14215
716 855-6204
Length: 3 Year(s)  Total Positions: 6
Program ID: 156-35-31-044

Manhattan

North Shore University Hospital Program
North Shore University Hospital

Program Director:
Peter M Reiser, MD
North Shore Univ Hosp
300 Community Dr
Manhasset, NY 11030
516 653-4765
Length: 3 Year(s)  Total Positions: 2
Program ID: 106-35-11-048

Mineola

Winthrop-University Hospital Program
Winthrop-University Hospital

Program Director:
Michael S Niederman, MD
Winthrop-University Hosp
222 Station Plaza NSTE 600
Mineola, NY 11501
516 653-2004
Length: 3 Year(s)  Total Positions: 2
Program ID: 106-35-13-048

New Hyde Park

Albert Einstein College of Medicine at Long Island Jewish Medical Center Program
Long Island Jewish Medical Center

Program Director:
Alan Maltz, MD
Long Island Jewish Med Ctr
270-45 76th Ave
New Hyde Park, NY 11042
718 470-7581
Length: 3 Year(s)  Total Positions: 3
Program ID: 106-35-14-047

* Updated information not provided.

Graduate Medical Education Directory 733
New York
Albert Einstein College of Medicine at Beth Israel Medical Center Program
Beth Israel Medical Center
Program Director: Mark J Rosen, MD
Beth Israel Med Ctr Pulmonary/Critical Care
First Ave at 16th St
New York, NY 10003
212-482-5957
Length: 3 Year(s) Total Positions: 9
Program ID: 158-35-22-048

Mount Sinai School of Medicine Program
Mount Sinai School of Medicine
Elmhurst Hospital Center-Mount Sinai Services Englewood Hospital Mount Sinai Medical Center Queen Hospital Center Veterans Affairs Medical Center (Bronx)
Program Director: David M Norman, MD
One Gustave L Levy Pl
Annenberg 24-30 Box 1282
New York, NY 10029
212-241-5856
Length: 3 Year(s) Total Positions: 11
Program ID: 158-35-53-449

New York University Medical Center Program
New York University Medical Center Bellevue Hospital Center Veterans Affairs Medical Center (Manhattan)
Program Director: Martin E Doerfler, MD
550 First Ave
New York, NY 10016
212-590-3752
Length: 1 Year(s) Total Positions: 2
Program ID: 158-35-21-048

St Luke's-Roosevelt Hospital Center (St Luke's) Program
St Luke's-Roosevelt Hospital Center St Luke's-Roosevelt Hospital Center-St Luke's Division
Program Director: C Redington Barrett Jr, MD Amsterdam Ave at 114th St
St Luke's-Roosevelt Hosp Ctr
New York, NY 10025
212-533-3010
Length: 2 Year(s) Total Positions: 8
Program ID: 158-35-31-001

North Carolina
Chapel Hill
University of North Carolina Hospitals Program
University of North Carolina Hospitals
Program Director: James R Yankaskas, MD
724 Burnett-Womack Bldg, CB#7020
Univ of North Carolina Sch of Med Chapel Hill, NC 27598-7020
919-966-1077
Length: 3 Year(s) Total Positions: 10
Program ID: 158-35-21-046

Ohio
Cincinnati
University of Cincinnati Hospital Group Program
University of Cincinnati Hospital Veterans Affairs Medical Center (Cincinnati)
Program Director: Stephen R Leggett, MD
231 Bethesda Avenue - ML 564
Cincinnati, OH 45267-0564
513-558-8831
Length: 3 Year(s) Total Positions: 7
Program ID: 158-35-21-046

Cleveland
Case Western Reserve University (MetroHealth) Program*
MetroHealth Medical Center
Program Director: E Regina McCadden Jr, MD
11600 Euclid Ave
Cleveland, OH 44106
216-444-8668
Length: 3 Year(s) Total Positions: 5
Program ID: 158-35-31-007

* Updated information not provided.
Pennsylvania

Philadelphia

Hahnemann University Program
Hahnemann University Hospital
Crozer-Chester Medical Center
Program Director:
Harold L. Pant, MD
Hahnemann Univ Hosp
Broad and Vine Sts
Philadelphia, PA 19102
215 446-8013
Length: 3 Year(s) Total Positions: 7
Program ID: 156-41-21-182

Medical College of Pennsylvania Program
Medical College of Pennsylvania Hospitals
Mercy Catholic Medical Center-Fitzgerald Mercy Division
Mercy Catholic Medical Center-Misseria Division
Veterans Affairs Medical Center (Philadelphia)
Program Director:
Stacey Friel, MD
3300 Henry Ave
Philadelphia, PA 19129
215 842-6074
Length: 3 Year(s) Total Positions: 6
Program ID: 156-41-13-163

Temple University Program
Temple University Hospital
Albert Einstein Medical Center
Program Director:
Gerard C. Conner, MD
3401 N Broad St
9th Floor PFP
Philadelphia, PA 19140
215 221-8113
Length: 3 Year(s) Total Positions: 8
Program ID: 156-41-12-194

Thomas Jefferson University Program
Thomas Jefferson University Hospital
Jefferson Park Hospital
Program Director:
James E. Fisher, MD
Jonathan E. Glass, MD
1056 Walnut Street
Room 606
Philadelphia, PA 19107
215 956-6500
Length: 3 Year(s)
Program ID: 156-41-15-306

Pittsburgh

University Health Center of Pittsburgh Program 2
University Health Center of Pittsburgh Montefiore University Hospital (UPMC)
Presbyterian University Hospital (UPMC)
Veterans Affairs Medical Center (Pittsburgh)
Program Director:
Robert M. Rogers, MD
480 Scaife Hall
1055 Terrace St
Pittsburgh, PA 15261-1000
412 685-6044
Length: 3 Year(s) Total Positions: 12
Program ID: 156-41-13-386

South Carolina

Charleston

Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
Charleston Memorial Hospital
MUSC Medical Center
Veterans Affairs Medical Center (Charleston)
Program Director:
Steven A. Sahn, MD
171 Ashley Ave
Charleston, SC 29425
803 792-0492
Length: 3 Year(s) Total Positions: 6
Program ID: 156-42-21-067

Tennessee

Nashville

Vanderbilt University Program
Vanderbilt University Medical Center
Vanderbilt Veterans Affairs Medical Center (Nashville)
Program Director:
Gordon B. Bernard, MD
E-1317 Medical Center North
Nashville, TN 37232-2650
615 322-2396
Length: 3 Year(s)
Program ID: 156-47-21-068

Texas

Dallas

University of Texas Southwestern Medical School Program
University of Texas Southwestern Medical School
Dallas County Hospital District-Parkland Memorial Hospital
Veterans Affairs Medical Center (Dallas)
Program Director:
Alan X. Pierce, MD
Pulmonary Disease Dept
5323 Harry Hines Blvd
Dallas, TX 75335-9034
214 685-4393
Length: 3 Year(s) Total Positions: 6
Program ID: 156-48-21-069

Fort Sam Houston

Brooke Army Medical Center Program
Brooke Army Medical Center
Program Director:
Gerald R. Harrington, MD
Brooke Army Med Ctr
Pulmonary/Critical Care Service
Fort Sam Houston, TX 78234
512 221-3200
Length: 3 Year(s) Total Positions: 4
Program ID: 156-48-21-070

Houston

Baylor College of Medicine Program
Baylor College of Medicine
Harris County Hospital District-Ben Taub General Hospital
Methodist Hospital
Veterans Affairs Medical Center (Houston)
Program Director:
Joseph R Rodarte, MD
6650 Fannin St SM 1225
Houston, TX 77030
713 794-8219
Length: 3 Year(s) Total Positions: 17
Program ID: 156-48-21-084

University of Texas at Houston Program
University of Texas Medical School at Houston
Hermann Hospital
University of Texas M D Anderson Cancer Center
Program Director:
Guillermo Gutierrez, MD
6431 Fannin St Ste 1.274
Houston, TX 77030
713 798-5110
Length: 3 Year(s) Total Positions: 11
Program ID: 156-48-31-071

San Antonio

University of Texas Health Science Center at San Antonio Program
University of Texas Medical School at San Antonio
Audie L. Murphy Memorial Veterans Hospital (San Antonio)
University Hospital-South Texas Medical Center
Program Director:
Stephen G Jenkins, MD
7703 Floyd Curl Dr
San Antonio, TX 78228-7850
512 697-3556
Length: 3 Year(s) Total Positions: 4
Program ID: 156-48-41-972

Virginia

Richmond

Medical College of Virginia/Virginia Commonwealth University Program*
Medical College of Virginia/Virginia Commonwealth University
Hunter Holmes McGuire VA Medical Center (Richmond)
Medical College of Virginia Hospitals
Program Director:
Frederick L. Glasser, MD
1200 E Broad St
Box 60
Richmond, VA 23298-0060
804 786-9071
Length: 3 Year(s)
Program ID: 156-51-21-073

* Updated information not provided.
Accredited Programs in Pulmonary Disease and Critical Care Medicine (Internal Medicine)

Washington

Seattle

University of Washington Program
University of Washington School of Medicine
University of Washington Medical Center
Program Director:
Leonard D Hudson, MD
325 Ninth Ave
Seattle, WA 98104
206 222-3056
Length: 3 Year(s) Total Positions: 18
Program ID: 154-54-21-074

West Virginia

Morgantown

West Virginia University Program
West Virginia University Hospitals
Program Director:
David E Banks, MD
Room Q 240-BSS
West Virginia Univ Sch of Med
Morgantown, WV 26506
304 293-4646
Length: 1 Year(s) Total Positions: 3
Program ID: 156-55-21-075

Wisconsin

Madison

University of Wisconsin Program
University of Wisconsin Hospital and Clinics
William S Middleton Veterans Hospital
Program Director:
Jeffrey E Grossman, MD
Univ of Wisconsin Hospital and Clinics
600 Highland Ave
Madison, WI 53792
608 263-9041
Length: 3 Year(s) Total Positions: 6
Program ID: 156-56-21-076

Radiation Oncology

Alabama

Birmingham

University of Alabama Medical Center Program
University of Alabama Hospital
Veterans Affairs Medical Center (Birmingham)
Program Director:
Merie M Saltar, MD
Dept of Radiation Oncology
Lurleen B Wallace Tumor Institute
619 S 10th St
Birmingham, AL 35233
205 934-2760
Length: 3 Year(s) Total Positions: 4
Program ID: 430-01-21-002

Arizona

Tucson

University of Arizona Program
University of Arizona College of Medicine
University Medical Center
Program Director:
David S Shihmin, MD
University of Arizona College of Medicine
Radiation Oncology Dept.
Tucson, AZ 85724
928 626-7285
Length: 3 Year(s) Total Positions: 6
Program ID: 430-08-11-003

California

Loma Linda

Loma Linda University Program
Loma Linda University Medical Center
Program Director:
Jerry D Slater, MD
Loma Linda University Medical Center
11254 Anderson St
Rm B121
Loma Linda, CA 92354
909 824-4256
Length: 3 Year(s) Total Positions: 5
Program ID: 430-04-21-006

Los Angeles

UCLA Medical Center Program
UCLA School of Medicine
UCLA Medical Center
Veterans Affairs Medical Center (West Los Angeles)
Program Director:
Michael T Selch, MD
Radiation Oncology
230 UCLA Med Plaza
Ste 2592
Los Angeles, CA 90024-6651
310 822-4606
Length: 3 Year(s) Total Positions: 8
Program ID: 430-02-21-008

University of Southern California Program*
Los Angeles County-USC Medical Center
California Medical Center (Los Angeles)
Kenneth Norris Jr Cancer Hospital and Research Institute
Program Director:
Oscar P Streeter Jr, MD
Univ of Southern California Dept of Radiation Oncology
1441 Eastlake Ave
Rm 002
Los Angeles, CA 90033-0894
313 226-5017
Length: 3 Year(s) Total Positions: 9
Program ID: 430-06-11-007

Orange

University of California (Irvine) Program
University of California (Irvine) Medical Center
City of Hope National Medical Center
Long Beach Memorial Medical Center
St Joseph Hospital
Veterans Affairs Medical Center (Long Beach)
Program Director:
Martin Cohen, MD
University of California (Irvine) Medical Center
Dept of Radiation Oncology
Irvine, CA 92717
714 456-5008
Length: 3 Year(s) Total Positions: 6
Program ID: 430-05-21-005

Pasadena

Southern California Kaiser Permanente Medical Care (Los Angeles) Program
Southern California Kaiser Permanente Medical Group
Kaiser Foundation Hospital (Los Angeles)
Program Director:
Aron C Rau, MD
Kaiser Foundation Hospital
Dept of Radiation Oncology
4950 Sunset Blvd
Los Angeles, CA 90027
213 667-5841
Length: 3 Year(s) Total Positions: 1
Program ID: 430-05-21-115

San Francisco

St Mary's Hospital and Medical Center Program*
St Mary's Hospital and Medical Center
Seton Medical Center
Program Director:
Jerome M Vaeth, MD
St Mary's Hospital and Medical Center
Dept of Radiation Oncology
450 Stanyan St
San Francisco, CA 94117
415 558-5715
Length: 3 Year(s) Program ID: 430-05-22-012

*Updated information not provided.
University of California (San Francisco) Program
University of California (San Francisco) School of Medicine
Mount Zion Medical Center of the University of California
University of California (San Francisco) Medical Center
Program Director: Patrick Suth, MD
Long Hospital
Dept of Radiation Oncology
Rm L75
San Francisco, CA 94143-0235
415 476-4815
Length: 3 Year(s) Total Positions: 14
Program ID: 430-05-21-013

Stanford
Stanford University Program
Stanford University Hospital
Program Director:
Richard T Hoppe, MD
Stanford University Medical Center Dept Radiation Oncology
300 Pasteur Dr
Stanford, CA 94305
415 724-5588
Length: 3 Year(s) Total Positions: 10
Program ID: 430-06-11-014

Connecticut
New Haven
Yale-New Haven Medical Center Program
Yale-New Haven Hospital
Hospital of St Raphael
Uncas e Wethers Hospital
Veterans Affairs Medical Center (West Haven)
Program Director:
Peace G Hatfield, MD
Yale-New Haven Hospital
20 York St
New Haven, CT 06504
203 785-3959
Length: 3 Year(s) Total Positions: 6
Program ID: 430-06-11-017

District of Columbia
Washington
George Washington University Program
George Washington University School of Medicine
Children's National Medical Center
George Washington University Hospital
Program Director:
Charles R. Rogers, MD
George Washington Univ Hospital Div of Radiation Oncology
601 32nd St NW
Washington, DC 20037
202 994-4578
Length: 3 Year(s) Total Positions: 4
Program ID: 430-10-11-020

Emory University Program
Emory University School of Medicine
Crawford Long Hospital of Emory University
Grady Memorial Hospital
Veterans Affairs Medical Center (Atlanta)
Program Director:
Lawrence W Davis, MD
Emory University School of Medicine
Dept of Radiation Oncology
1445 Clifton Rd
Atlanta, GA 30322
404 321-0323
Length: 3 Year(s) Total Positions: 8
Program ID: 430-12-21-125

Augusta
Medical College of Georgia Program
Medical College of Georgia Hospital and Clinics
Georgia Radiation Therapy Center at Augusta
Program Director:
Chris Shields, MD
Medical College of Georgia
310 Greene St
Augusta, GA 30912-3965
706 721-1341
Length: 3 Year(s) Total Positions: 4
Program ID: 430-12-21-025

Illinois
Chicago
McGaw Medical Center of Northwestern University Program
Northwestern University Medical School
Evanston Hospital
Northwestern Memorial Hospital
Program Director:
Maryanne H Marmaros, MD
Dept of Radiation Oncology
Rm #4 Wesley Pavilion
250 S Superior St
Chicago, IL 60611
312 890-2529
Length: 3 Year(s) Total Positions: 5
Program ID: 430-16-21-027

Rush-Presbyterian-St Luke’s Medical Center Program*
Rush-Presbyterian-St Luke’s Medical Center
Program Director:
Blaine C Bocine, MD
Rush-Presbyterian-St Luke’s Medical Center
1633 W Congress Plw
Dept of Therapeutic Radiology
Chicago, IL 60612
312 925-5717
Length: 3 Year(s) Total Positions: 8
Program ID: 430-16-11-028

University of Chicago/Michael Reese Program
University of Chicago Hospitals
Michael Reese Hospital and Medical Center
Program Director:
Srinivasan Vijayakumar, MD
University of Chicago Dept of Radiation Oncology
5841 S Maryland MC088
Chicago, IL 60637-1470
312 702-6819
Length: 3 Year(s) Total Positions: 11
Program ID: 430-18-11-116

Maywood
Loyola University Program*
Pfizer MC McGaw Hospital-Loyola University of Chicago
Edward J Hines Jr Veterans Affairs Hospital
Program Director:
Anne R McCull, MD
Loyola Hines Radiation Therapy Dept
114-B
Bldg 1 FO Box
Maywood, IL 60153-0000
708 216-2641
Length: 3 Year(s) Total Positions: 8
Program ID: 430-18-22-031

* Updated information not provided.
Indiana

Indianapolis

Indiana University Medical Center
Program
Indiana University Medical Center
Richard L. Roudebush Veterans Affairs Medical Center
William N. Wishard Memorial Hospital
Program Director:
Marcus B. Randall, MD
Indiana University Medical Center
536 Barnhill Dr Rm 515
Indianapolis, IN 46202-5259
317-274-1916
Length: 3 Year(s)  Total Positions: 6
Program ID: 430-17-11-032

Louisville

University of Louisville Program
University of Louisville School of Medicine
University of Louisville Hospital
Program Director:
Kristie J. Paris, MD
University of Louisville Brown Cancer Center
529 S. Jackson St
Louisville, KY 40202
502-853-1711
Length: 3 Year(s)  Total Positions: 8
Program ID: 430-23-11-038

Maryland

Baltimore

Johns Hopkins University Program
Johns Hopkins University School of Medicine
Johns Hopkins Hospital
Program Director:
Moody DeWitt Wharam Jr, MD
Johns Hopkins Hospital
600 N Wolfe St
Baltimore, MD 21205-8022
410-667-7208
Length: 3 Year(s)  Total Positions: 9
Program ID: 430-23-11-039

University of Maryland Program*
University of Maryland Medical System
Program Director:
Robert G. Sato, MD
University of Maryland Medical System
Dept of Radiation Oncology
22 S Greene St
Baltimore, MD 21201
410-955-1111
Length: 3 Year(s)  Total Positions: 8 (GYI: 0)
Program ID: 430-23-21-040

Bethesda

Uniformed Services University of the Health Sciences Program*
National Cancer Institute
National Naval Medical Center (Bethesda)
Walter Reed Army Medical Center
Program Director:
Paul Okunieff, MD
National Cancer Institute
9000 Rockville Pike
Bldg 10 R3040
Bethesda, MD 20892
301-496-6457
Length: 3 Year(s)  Total Positions: 12 (GYI: 0)
Program ID: 430-23-21-118

Massachusetts

Boston

Joint Center for Radiation Therapy Program
New England Deaconess Hospital
Beth Israel Hospital
Brigham and Women's Hospital
Children's Hospital
Dana-Farber Cancer Institute
Joint Center for Radiation Therapy
Program Director:
Jay R. Harris, MD
Joint Center for Radiation Therapy
50 Binney St
Boston, MA 02115
617-432-1089
Length: 3 Year(s)  Total Positions: 12
Program ID: 430-24-21-042

Massachusetts General Hospital Program*
Massachusetts General Hospital
Program Director:
John E. Munzenrider, MD
Massachusetts General Hospital
Front St Cnx 34-1
Boston, MA 02114
617-726-8153
Length: 3 Year(s)  Total Positions: 2
Program ID: 430-24-21-043

Tufts University Program
New England Medical Center Hospitals
Veterans Affairs Medical Center (Boston)
Program Director:
Hezel Madoc-Jones, MD PhD
New England Medical Center
750 Washington St
Boston, MA 02111
617-956-6291
Length: 3 Year(s)  Total Positions: 8
Program ID: 430-24-21-044

Michigan

Ann Arbor

University of Michigan Program
University of Michigan Hospitals
Providence Hospital
Program Director:
Howard M. Sandler, MD
Univ of Michigan Medical School Dept of Radiation Oncology
UH B53480 Bx 0010
1500 E Medical Center Dr
Ann Arbor, MI 48109-0010
313-936-8388
Length: 3 Year(s)  Total Positions: 12
Program ID: 430-25-11-045

Kentucky

Lexington

University of Kentucky Medical Center Program
University Hospital-Albert B Chandler Medical Center
Program Director:
Mohamed Mabshood, MD
University of Kentucky
Dept of Radiation Medicine
800 Rose St
Lexington, KY 40536-0084
606-233-6449
Length: 3 Year(s)  Total Positions: 3
Program ID: 430-20-11-035

* Updated information not provided.
Wayne State University/Detroit Medical Center Program
Wayne State University School of Medicine
Grace Hospital
Harper Hospital
Program Director: Ann Axel, MD
Wayne State University
Dep of Radiation Oncology
4201 St Antoine
Detroit, MI 48201
313-745-1986
Length: 3 Year(s) Total Positions: 6
Program ID: 430-06-21-048

Royal Oak
William Beaumont Hospital Program
William Beaumont Hospital
William Beaumont Hospital-Troy
Program Director: Alvaro Martinez, MD
William Beaumont Hospital Dept of Radiation Oncology
3961 W 13 Mile Rd
Royal Oak, MI 48073
810-551-1219
Length: 3 Year(s) Total Positions: 8
Program ID: 430-06-12-049

Missouri
St Louis
Washington University Program
Barnes Hospital
Jewish Hospital of St Louis
Maienbekradt Institute of Radiology
St Louis Children’s Hospital
Program Director:
Carlos A Peres, MD
Radiation Oncology Center
Washington Univ/Barnes Hospital
4553 Children’s Pl Ste 5000
St Louis, MO 63119
314-362-8503
Length: 3 Year(s) Total Positions: 13
Program ID: 430-06-21-064

New Jersey
Camden
UMDNJ-Robert Wood Johnson Medical School (Camden) Program
Cooper Hospital-University Medical Center
Program Director:
Jeffrey S Winger, DO
Cooper Hospital/University Medical Center
Dept of Radiation Oncology
One Cooper Plaza
Camden, NJ 08103-1489
609-344-2200
Length: 3 Year(s) Total Positions: 5
Program ID: 430-06-21-114

Livingston
St Barnabas Medical Center Program
St Barnabas Medical Center
Program Director:
Louis J Sanfilippo, MD
St Barnabas Medical Center
94 Old Short Hills Rd
Livingston, NJ 07039
201-533-6637
Length: 3 Year(s) Total Positions: 4
Program ID: 430-06-31-057

New York
Bronx
Albert Einstein College of Medicine Program
Albert Einstein College of Medicine of Yeshiva University
Montefiore Medical Center-Beekman and Lucy Moses Division
Montefiore Medical Center-Weiller Hospital
Program Director:
Jonathan J Reitler, MD MBA
Montefiore Medical Center
Dept of Radiation Oncology
111 P B 110th St
Bronx, NY 10467-2400
718-595-4842
Length: 3 Year(s) Total Positions: 8
Program ID: 430-06-32-061

Brooklyn
New York Methodist Hospital Program*
New York Methodist Hospital
Lutheran Medical Center
Program Director:
Sameer Rafat, MD PhD
Methodist Hosp Dept of Radiation Oncology
506 Sixth St
PO Box 159-006
Brooklyn, NY 11215-9008
718 780-3777
Length: 3 Year(s) Total Positions: 6
Program ID: 430-06-22-064

SUNY Health Science Center at Brooklyn Program
SUNY HSC at Brooklyn College of Medicine
Long Island College Hospital
University Hospital-SUNY Health Science Center at Brooklyn
Program Director:
Manal Bozmi, MD
SUNY Health Science Center at Brooklyn
450 Clarkson Ave
Brooklyn, NY 11203-2085
718-270-2151
Length: 3 Year(s) Total Positions: 8
Program ID: 430-06-31-070

Buffalo
SUNY at Buffalo Graduate Medical-Dental Education Consortium Program
SUNY at Buffalo Grad Medical-Dental Education Consortium
Buffalo General Hospital
Roswell Park Cancer Institute
Veterans Affairs Medical Center (Buffalo)
Program Director:
Ray H Shin, MD
Dep of Radiation Oncology
Roswell Park Cancer Institute
Elm & Carlton Sts
Buffalo, NY 14203
716-845-8776
Length: 3 Year(s) Total Positions: 3
Program ID: 430-06-31-122

New York
Albert Einstein College of Medicine at Beth Israel Medical Center Program*
Beth Israel Medical Center
Program Director:
Manoj Chaddha, MD
Beth Israel Medical Center
First Ave at 16th St
New York, NY 10065
212-420-3590
Length: 3 Year(s) Total Positions: 17
Program ID: 430-06-11-062

Memorial Sloan-Kettering Cancer Center Program*
Memorial Sloan-Kettering Cancer Center
Program Director:
Steven Leibel, MD
Memorial Sloan-Kettering Cancer Center
Dept of Radiation Oncology Box 22
1375 York Ave
New York, NY 10021
212-696-6817
Length: 3 Year(s) Total Positions: 17
Program ID: 430-06-31-063

*Updated information not provided.

Graduate Medical Education Directory
Accredited Programs in Radiation Oncology

Mount Sinai School of Medicine Program
Mount Sinai School of Medicine
Mount Sinai Medical Center

Program Director:
Lynda R. Madell, MD PhD
Mount Sinai Medical Center
One Gustave L. Levy Pl
Box 1236
New York, NY 10029-6574
212-344-7803
Length: 3 Year(s)  Total Positions: 6
Program ID: 430-35-21-119

New York University Medical Center Program
New York University Medical Center
Bellevue Hospital Center

Program Director:
Jay S. Cooper, MD
New York University Medical Center
Div of Radiation Oncology
566 First Ave
New York, NY 10016
212-263-0555
Length: 3 Year(s)  Total Positions: 5
Program ID: 430-35-21-067

Presbyterian Hospital in the City of New York Program
Presbyterian Hospital in the City of New York

Program Director:
Mary Katherine Hayes, MD
Dept of Radiation Oncology
622 W 168th St
New York, NY 10032-5784
212-956-2042
Length: 3 Year(s)  Total Positions: 6
Program ID: 430-35-11-068

Rochester University of Rochester Program
Strong Memorial Hospital of the University of Rochester

Program Director:
Philip Rubin, MD
Louis S. Coraziale, MD
Strong Memorial Hospital Dept of Radiation Oncology
601 Elmwood Ave Box 647
Rochester, NY 14642-6547
716-675-5675
Length: 3 Year(s)  Total Positions: 8
Program ID: 430-35-11-071

Valhalla
New York Medical College at Westchester County Medical Center Program
New York Medical College
Westchester County Medical Center

Program Director:
Basil S. Flaherty, MD
New York Medical College
Dept of Radiation Medicine
Valhalla, NY 10595
914-286-8500
Length: 3 Year(s)  Total Positions: 6
Program ID: 430-35-21-117

North Carolina
Chapel Hill
University of North Carolina Hospitals Program
University of North Carolina Hospitals

Program Director:
Mahesh A. Varia, MD
University of North Carolina Hospitals
Dept of Radiation Oncology CB#7012
Unv of North Carolina Hospital
Chapel Hill, NC 27514
919-966-7100
Length: 3 Year(s)  Total Positions: 5
Program ID: 430-36-11-073

Durham
Duke University Program
Duke University Medical Center
Veterans Affairs Medical Center (Durham)

Program Director:
Edward C. Balfour, MD
Duke University Medical Center Dept Radiation Oncology
Box 3085
Durham, NC 27710
919-660-0000
Length: 3 Year(s)  Total Positions: 7
Program ID: 430-36-21-074

Winston-Salem
Bowman Gray School of Medicine Program
North Carolina Baptist Hospital

Program Director:
Carolyn Ferree, MD
Dept of Radiation Oncology
Bowman Gray School of Medicine
Medical Center Blvd
Winston-Salem, NC 27157
336-716-4627
Length: 3 Year(s)  Program ID: 430-36-11-075

Ohio
Cincinnati
University of Cincinnati Hospital Group Program
University of Cincinnati Hospital
Veterans Affairs Medical Center (Cincinnati)

Program Director:
Kevin P. Redmond, MD
University of Cincinnati Medical Center
Radiation Oncology ML 0757
234 Goodman St
Cincinnati, OH 45267-0757
513-588-9031
Length: 3 Year(s)  Total Positions: 5
Program ID: 430-35-21-076

Cleveland
Case Western Reserve University Program
University Hospitals of Cleveland

Program Director:
Louis J. Novak, MD
University Hospital of Cleveland
11100 Euclid Ave
Cleveland, OH 44106-5000
216-444-8103
Length: 3 Year(s)  Total Positions: 5
Program ID: 430-38-11-077

Cleveland Clinic Foundation Program
Cleveland Clinic Foundation

Program Director:
Anuradha R. Koka, MD
Cleveland Clinic Foundation
6000 Euclid Ave TP32
Dept of Radiation Oncology
Cleveland, OH 44195-5322
216-444-5000
Length: 3 Year(s)  Total Positions: 0
Program ID: 430-38-12-078

Columbus
Ohio State University Program
Ohio State University Medical Center

Program Director:
Reinhard G. Gabhauer, MD
Arthur G James Cancer Hospital & Research Institute
Ohio State University
300 W Tenth Ave
Columbus, OH 43210
614-298-8415
Length: 3 Year(s)  Total Positions: 5
Program ID: 430-38-11-079

Oklahoma
Oklahoma City
University of Oklahoma Health Sciences Center Program
University of Oklahoma College of Medicine-Oklahoma City

Program Director:
William J. Graham, MD
University of Oklahoma Health Sciences Center
800 NE 13th PO Box 29001
Oklahoma City, OK 73119
405-271-5641
Length: 3 Year(s)  Total Positions: 4
Program ID: 430-39-21-080

* Updated Information not provided.
Oregon

Portland

Oregon Health Sciences University Program
Oregon Health Sciences University Hospital
Program Director:
Kenneth R Stevens Jr, MD
Oregon Health Sciences University Dept of Radiation Oncology L357
3191 SW Sam Jackson Park Rd
Portland, OR 97201-3008
503 270-8758
Length: 3 Year(s)  Total Positions: 3
Program ID: 430-40-21-091

Pennsylvania

Philadelphia

Albert Einstein Medical Center Program
Albert Einstein Medical Center
Program Director:
Sacha G Auster, MD
Patrick B Thomas, MD
Albert Einstein Medical Center
Dept of Radiation Oncology
5501 Old York Rd
Philadelphia, PA 19141
215 456-6380
Length: 3 Year(s)  Total Positions: 4
Program ID: 430-41-12-067

Fox Chase Cancer Center Program
Fox Chase Cancer Center
Program Director:
Lawrence R Cola, MD
Fox Chase Cancer Center
Dept of Radiation Oncology
7701 Burholme Ave
Philadelphia, PA 19111
215 728-3002
Length: 3 Year(s)  Total Positions: 6
Program ID: 430-41-12-135

MCPhU/Hahnemann University Hospital Program
Hahnemann University Hospital
Program Director:
Bishan Micaly, MD
Hahnemann University Hospital
Dept of Radiation Oncology
2418 Broad St MS 206
Philadelphia, PA 19102-1132
215 762-4981
Length: 3 Year(s)  Total Positions: 6
Program ID: 430-41-11-084

Thomas Jefferson University Program
Thomas Jefferson University Hospital
Program Director:
Walter Curran, MD
Thomas Jefferson University Hospital
Dept of Radiation Oncology
11th & Sansom Sts
Philadelphia, PA 19107
215 956-6546
Length: 3 Year(s)  Total Positions: 9
Program ID: 430-41-11-096

University of Pennsylvania Program
Hospital of the University of Pennsylvania
Veterans Affairs Medical Center (Philadelphia)
Program Director:
Joel W Goldwein, MD
Hospital of the University of Pennsylvania
3400 Spruce St 2 Donner
Philadelphia, PA 19104
215 662-7147
Length: 3 Year(s)  Total Positions: 15
Program ID: 430-41-21-097

Pittsburgh

Allegheny General Hospital/Medical College of Pennsylvania Program
Allegheny General Hospital
Program Director:
Shalom Kalb, MD
Div of Radiation Oncology
Allegheny General Hospital
320 E North Ave
Pittsburgh, PA 15212-9966
412 358-3400
Length: 3 Year(s)  Total Positions: 4
Program ID: 430-41-21-098

Allegheny General Hospital/Medical College of Pennsylvania Program
Allegheny General Hospital
Program Director:
Shalom Kalb, MD
Radiation Oncology Dept
Allegheny General Hospital
320 E North Ave
Pittsburgh, PA 15212-9966
412 358-3400
Length: 3 Year(s)  Total Positions: 6
Program ID: 430-41-31-127

Puerto Rico

San Juan

University of Puerto Rico Program
University of Puerto Rico School of Medicine University Hospital
Program Director:
Jose Santana, MD
Radiation Oncology Div Puerto Rico Center
UFR Medical Science Campus
PO 5057
San Juan, PR 00936
809 726-4000
Length: 3 Year(s)  Total Positions: 18
Program ID: 430-42-11-091

South Carolina

Charleston

Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
MUSC Medical Center
Program Director:
Joseph M Jenrette III, MD
Medical University of South Carolina
Dept of Radiation Oncology
171 Ashley Ave
Charleston, SC 29425-0721
803 797-5271
Length: 3 Year(s)  Total Positions: 4
Program ID: 430-45-21-092

Texas

Galveston

University of Texas Medical Branch Hospitals Program
University of Texas Medical Branch Hospitals
Program Director:
James A Boll, MD
Dept of Radiation Therapy
University of Texas Medical Branch
B F F
Galveston, TX 77555-0006
409 772-3860
Length: 3 Year(s)  Total Positions: 6
Program ID: 430-48-11-089

Houston

Baylor College of Medicine Program
Baylor College of Medicine
Harrer County Hospital District-Ben Taub General Hospital
Methodist Hospital
Veterans Affairs Medical Center (Houston)
Program Director:
Shiao Y Win, MD
Baylor College of Medicine
One Baylor Plaza
Texas Medical Center
Houston, TX 77030-3488
713 790-3001
Length: 3 Year(s)  Total Positions: 6
Program ID: 430-48-14-008

University of Texas M D Anderson Cancer Center Program
University of Texas M D Anderson Cancer Center
Program Director:
Patrick J Sinai, MD
Uni of Texas M D Anderson Cancer Center
1515 Holcombe Blvd
Box 97
Houston, TX 77030
713 792-3400
Length: 3 Year(s)  Total Positions: 18
Program ID: 430-48-23-099

San Antonio

University of Texas Health Science Center at San Antonio Program
University of Texas Medical School at San Antonio
University Hospital-South Texas Medical Center
Program Director:
Teresa S Herman, MD
University of Texas Health Science Center
Radiation/Oncology
7730 Floyd Curl Dr
San Antonio, TX 78224-7800
210 616-6064
Length: 3 Year(s)  Total Positions: 6
Program ID: 430-48-21-100

*

Updated information not provided.

Graduate Medical Education Directory 761
Utah
Salt Lake City
LDS Hospital Program*
LDS Hospital
Program Director:
A Jennifer Pascbach, MD
LDS Hosp Radiation Ctr
801 SLC, UT 84143
801 321-1416
Length: 3 Year(s)  Total Positions: 3
Program ID: 430-49-31-101

University of Utah Program
University of Utah Medical Center
Program Director:
Lynn M Smith, MD
University of Utah Medical Center
Div of Radiation Oncology
50 Medical Dr
Salt Lake City, UT 84132
801 581-8783
Length: 3 Year(s)  Total Positions: 3
Program ID: 430-49-18-102

Virginia
Charlottesville
University of Virginia Program
University of Virginia Medical Center
Program Director:
William C Constable, MD
Dept of Radiation Oncology Box 383
Charlottesville, VA 22908
804 924-9412
Length: 3 Year(s)  Total Positions: 5
Program ID: 430-01-11-104

Norfolk
Eastern Virginia Graduate School of Medicine Program
Eastern Virginia Graduate School of Medicine
Norfolk, VA 23507-1999
804 688-3483
Length: 3 Year(s)  Total Positions: 5
Program ID: 430-01-11-106

Richmond
Medical College of Virginia/Virginia Commonwealth University Program
Medical College of Virginia/Virginia Commonwealth University
Hunter Holmes McGuire VA Medical Center (Richmond)
Medical College of Virginia Hospitals
Program Director:
Brian D. Kavanagh, MD
MCV/Virginia Commonwealth Univ
PO Box 880058
Richmond, VA 23298-0058
804 828-7292
Length: 3 Year(s)  Total Positions: 8
Program ID: 430-51-11-106

Washington
Seattle
University of Washington Program
University of Washington School of Medicine
University of Washington Medical Center
Program Director:
Keith J Stehly, MD PhD
University of Washington Dept of Rad Oncology RC-08
1959 NR Pacific St
Seattle, WA 98195
206 548-4115
Length: 3 Year(s)  Total Positions: 6
Program ID: 430-64-21-107

Wisconsin
Madison
University of Wisconsin Program
University of Wisconsin Hospital and Clinics
Program Director:
Minesh P Mehta, MD
University of Wisconsin Hospital and Clinics Human Oncology
460 Highland Ave K4-8100
Madison, WI 53792-8310
608 255-8536
Length: 3 Year(s)  Total Positions: 8
Program ID: 430-56-21-108

Milwaukee
Medical College of Wisconsin Program
Medical College of Wisconsin Affiliated Hospitals Inc
Clement J Zablocki Veterans Affairs Medical Center
John L. Dodge Hospital
Program Director:
Colleen A Lawton, MD
Medical College of Wisconsin
Dept of Radiation Oncology
6700 W Wisconsin Ave
Milwaukee, WI 53226
414 257-5726
Length: 3 Year(s)  Total Positions: 10
Program ID: 430-56-21-109

Radiology-Diagnostic
Alabama
Birmingham
Birmingham Baptist Medical Centers Program
Birmingham Baptist Medical Centers Inc.
Birmingham Baptist Medical Center-Montclair
Birmingham Baptist Medical Center-Princeton
Program Director:
Emmett O'Neal Templeton Jr, MD
Baptist Medical Center-Montclair
Dept of Radiology
800 Montclair Rd
Birmingham, AL 35213
Length: 4 Year(s)  Total Positions: 16 (GYI: 3)
Program ID: 420-01-21-006

University of Alabama Medical Center Program
University of Alabama Hospital
Veterans Affairs Medical Center (Birmingham)
Program Director:
Robert R Koeher, MD
University of Alabama Hospital
Dept of Radiology
619 S 16th St
Birmingham, AL 35212-6800
205 934-2340
Length: 4 Year(s)  Total Positions: 33 (GYI: 6)
Subspecialties: PET, MRI, NMR, MR
Program ID: 420-01-11-007

Mobile
University of South Alabama Program
University of South Alabama Medical Center
Program Director:
Richard L. Weisenberg, MD
University of Alabama Medical Center
245 Hillcrest St
Mobile, AL 36617
205 471-7874
Length: 4 Year(s)  Total Positions: 17 (GYI: 9)
Program ID: 420-01-11-008

Arizona
Phoenix
St Joseph's Hospital and Medical Center Program
St Joseph's Hospital and Medical Center
Program Director:
David J Guffey, MD
350 W Thomas Rd
PO Box 2071
Phoenix, AZ 85010-2071
602 466-6954
Length: 4 Year(s)  Total Positions: 8 (GYI: 0)
Subspecialties: NIH
Program ID: 420-03-12-010

* Updated information not provided.
Tucson
University of Arizona Program
University of Arizona College of Medicine
University Medical Center
Veterans Affairs Medical Center (Tucson)
Program Director:
K Rebecca Hunt, MD
University of Arizona College of Medicine
Dept of Radiology
1501 N Campbell Ave
Tucson, AZ 85724
602 239-7398
Length: 4 Year(s) Total Positions: 20 (GYI: 5)
Subspecialties: NB, RNR
Program ID: 420-04-21-011

Los Angeles
Cedars-Sinai Medical Center Program
Cedars-Sinai Medical Center
Program Director:
Mitchell S Komaiko, MD
Cedars-Sinai Medical Center
Box 487560
Dept of Radiology/Ran 5416
Los Angeles, CA 90048-0750
310 655-3670
Length: 4 Year(s) Total Positions: 12 (GYI: 6)
Program ID: 420-05-21-018

Charles R Drew University Program
Charles R Drew University of Medicine and Science
LAC+Kings/Drew Medical Center
Program Director:
Theodore C Miller, MD
Martin Luther King Jr/Drew Medical Center
Dept of Radiology
1202 W Ontario Ave
Los Angeles, CA 90058
1(323)470-1580
Length: 4 Year(s) Total Positions: 17 (GYI: 6)
Program ID: 420-04-12-022

UCLA Medical Center Program
UCLA School of Medicine
LAC+Olive View Medical Center
UCLA Medical Center
Veterans Affairs Medical Center (West Los Angeles)
Program Director:
Richard H Gold, MD
UCLA Health & Clinics
5th Floor for the Radiology
Dept of Radiological Science
Los Angeles, CA 90024-1721
310 255-2700
Length: 4 Year(s) Total Positions: 10 (GYI: 4)
Subspecialties: PDR, RNR
Program ID: 420-04-11-023

University of Southern California Program
Los Angeles County-USC Medical Center
Program Director:
Deborah M Frey, MD
Los Angeles County-USC Medical Center
1290 N State St
Box 481: Ram 3560
Los Angeles, CA 90033
213 326-7242
Length: 4 Year(s) Total Positions: 40 (GYI: 18)
Subspecialties: PDR, RNR
Program ID: 420-04-11-021

Orange
University of California (Irvine) Program
University of California (Irvine) Medical Center
Long Beach Memorial Medical Center
Veterans Affairs Medical Center (Long Beach)
Program Director:
Linda K Casey, MD
Univ of California (Irvine) Med Ctr
Dept of Radiological Science
101 City Of Beach Blvd 140
Orange, CA 92868
714 456-8769
Length: 4 Year(s) Total Positions: 25 (GYI: 9)
Subspecialties: PDR, RNR, VIR
Program ID: 420-05-21-014

Pasadena
Southern California Kaiser Permanente Medical Care (Los Angeles) Program
Southern California Kaiser Permanente Medical Group
Kaiser Foundation Hospital (Los Angeles)
Program Director:
Richard Kalinowski, MD
Kaiser Permanente
Diagnostic Radiology
1530 N Esperanza St
Los Angeles, CA 90027-5009
213 660-5374
Length: 4 Year(s) Total Positions: 12 (GYI: 2)
Program ID: 420-05-15-020

Sacramento
University of California (Davis) Program
University of California (Davis) Medical Center
Program Director:
John F McShane, MD
Univ of California (Davis)
Dept of Radiology
2516 Stockton Blvd Davis
Sacramento, CA 95817
916 734-5106
Length: 4 Year(s) Total Positions: 21 (GYI: 9)
Program ID: 420-04-11-013

San Diego
University of California (San Diego) Program
University of California (San Diego) Medical Center
Veterans Affairs Medical Center (San Diego)
Program Director:
Giovanna Casola, MD
USD Med Ctr
200 W Arbor Dr
San Diego, CA 92103-8756
619 543-3654
Length: 4 Year(s) Total Positions: 27 (GYI: 9)
Subspecialties: RNR
Program ID: 420-04-21-027

US Navy Coordinated Program-Naval Medical Center (San Diego) Program
Naval Medical Center (San Diego)
Program Director:
Edgar T Jones, MD
NMC Medical Center
Dept of Radiology
Bob Wilson Dr
San Diego, CA 92134-5000
619 523-8879
Length: 4 Year(s) Total Positions: 32 (GYI: 9)
Program ID: 420-04-21-014

San Francisco
University of California (San Francisco) Program
University of California (San Francisco) School of Medicine
San Francisco General Hospital Medical Center
University of California (San Francisco) Medical Center
Veterans Affairs Medical Center (San Francisco)
Program Director:
Ruth B Goldstein, MD
University of California San Francisco
505 Parnassus Ave Ste M-381
San Francisco, CA 94143-0638
415 476-9206
Length: 4 Year(s) Total Positions: 42 (GYI: 9)
Subspecialties: PDR, RNR, VIR
Program ID: 420-04-21-031

*Updated information not provided.

Graduate Medical Education Directory
San Jose
Santa Clara Valley Medical Center
Program
Santa Clara Valley Medical Center
Program Director:
Andrew H Koo, MD
Santa Clara Valley Medical Center
751 S Bascom Ave
San Jose, CA 95128
408 850-6570
Length: 4 Year(s) Total Positions: 13 (GY: 0)
Program ID: 420-05-01-025

Santa Barbara
Santa Barbara Cottage Hospital Program
Santa Barbara Cottage Hospital
Program Director:
Arthur A Lee, MD
Santa Barbara Cottage Hospital
Dept of Radiology
PO Box 619
Santa Barbara, CA 93102
805 686-7279
Length: 4 Year(s) Total Positions: 9 (GY: 0)
Program ID: 420-05-22-039

Stanford
Stanford University Program*
Stanford University Hospital
Veterans Affairs Medical Center (Palo Alto)
Program Director:
Barton Lane, MD
Stanford University Medical Center
Dept of Diagnostic Radiology
Room H-1397
Stanford, CA 94305-5105
415 723-8077
Length: 4 Year(s) Total Positions: 7 (GY: 0)
Subspecialties: PDR,JNR
Program ID: 420-05-21-084

Torrance
Los Angeles County-Harbor-UCLA Medical Center Program
Los Angeles County-Harbor-UCLA Medical Center
Program Director:
Ralph S Lachman, MD
Los Angeles County-Harbor-UCLA Medical Center
1000 W Carson St Box 27
PO Box 269
Torrance, CA 90606-2610
310 222-2847
Length: 4 Year(s) Total Positions: 21 (GY: 0)
Subspecialties: IR,R
Program ID: 420-05-11-035

Travis AFB
David Grant USAF Medical Center Program
David Grant Medical Center
Program Director:
Frederick A Conte, MD
606 Medical Group
Dept of Radiology (SGHR)
101 Botlin Circle
Travis AFB, CA 94555-1800
707 428-7122
Length: 4 Year(s) Total Positions: 21 (GY: 0)
Program ID: 420-05-21-001

Colorado
Aurora
US Army Coordinated Program-Fitzsimons Army Medical Center Program
Fitzsimons Army Medical Center
Program Director:
Col Frank I. Quattromani, MD
Dept of Radiology
Fitzsimons Army Medical Center
Aurora, CO 80045-5001
303 361-8219
Length: 4 Year(s) Total Positions: 16 (GY: 0)
Program ID: 420-07-12-013

Denver
Presbyterian-St Luke's Medical Center Program
Presbyterian-St Luke's Medical Center
Program Director:
Lawrence I. Remanso, MD
Presbyterian-St Luke's Medical Center
Dept of Radiology
1710 E 19th Ave
Denver, CO 80218
303 209-6209
Length: 4 Year(s) Total Positions: 8 (GY: 0)
Program ID: 420-07-22-038

University of Colorado Program*
University of Colorado Health Sciences Center
Denver Health and Hospitals
Veterans Affairs Medical Center (Denver)
Program Director:
Ronald Townsmen, MD
Univ of Colorado Health Sciences Center
4300 E Ninth Ave (A530)
Denver, CO 80262-0000
303 270-5666
Length: 4 Year(s) Total Positions: 35 (GY: 0)
Subspecialties: PDR,RNR,VIR
Program ID: 420-07-21-038

Connecticut
Bridgeport
Bridgeport Hospital Program
Bridgeport Hospital
Program Director:
Octavio G Choy, MD
Bridgeport Hospital
267 Grant St
Bridgeport, CT 06608-2876
203 384-9384
Length: 4 Year(s) Total Positions: 10 (GY: 0)
Program ID: 420-08-13-039

St Vincent's Medical Center Program
St Vincent's Medical Center
Program Director:
Robert O Russo, MD
St Vincent's Medical Center
Medical Serv
2800 Main St
Bridgeport, CT 06606
203 576-6962
Length: 4 Year(s) Total Positions: 10 (GY: 1)
Program ID: 420-08-11-040

Farmington
University of Connecticut Program
University of Connecticut School of Medicine
St Francis Hospital and Medical Center
Univ of Connecticut Health Center/John Dempsey Hospital
Program Director:
E Marvin Henken, MD
University of Connecticut Health Center
Dept of Radiology
Farmington, CT 06032-2905
203 679-2460
Length: 4 Year(s) Total Positions: 8 (GY: 0)
Program ID: 420-08-21-225

Hartford
Hartford Hospital Program
Hartford Hospital
Program Director:
Fred M Zian Jr, MD
Hartford Hospital
90 Seymour St
PO Box 5007
Hartford, CT 06110-5037
203 545-2870
Length: 4 Year(s) Total Positions: 14 (GY: 0)
Program ID: 420-08-22-041

New Haven
Hospital of St Raphael Program
Hospital of St Raphael
Program Director:
Lee H Greenwood, MD
Hospital of St Raphael
Dept of Diagnostic Radiology
1400 Chapel St
New Haven, CT 06511
203 789-3118
Length: 4 Year(s) Total Positions: 14 (GY: 0)
Program ID: 420-08-23-042

Yale-New Haven Medical Center Program
Yale-New Haven Hospital
Veterans Affairs Medical Center (West Haven)
Program Director:
Coraline Shaw, MD
Yale Univ School of Medicine
Dept of Diagnostic Radiology
PO Box 208042
New Haven, CT 06520-2042
203 785-4746
Length: 4 Year(s) Total Positions: 25 (GY: 0)
Subspecialties: PDR,RNR,VIR
Program ID: 420-08-21-043

Norwalk
Norwalk Hospital Program
Norwalk Hospital
Program Director:
Edward S Strauss, MD
Dept of Radiology
Norwalk Hospital
Maple St
Norwalk, CT 06856
203 852-2715
Length: 4 Year(s) Total Positions: 8 (GY: 2)
Program ID: 420-08-31-316

* Updated information not provided.
Delaware

Wilmington

The Medical Center of Delaware Program
The Medical Center of Delaware
Program Director:
Randall W Ryan, MD
The Medical Center of Delaware
Christiana Hospital Radiology
PO Box 6001
Newark, DE 19718
302 733-1805
Length: 4 Year(s) Total Positions: 18 (GYT: 4)
Program ID: 420-09-11-044

District of Columbia

Washington

George Washington University Program
George Washington University School of Medicine
George Washington University Hospital
Program Director:
Barry M Potter, MD
George Washington University Hospital
901 23rd St NW
Washington, DC 20057
202 954-3584
Length: 4 Year(s) Total Positions: 20 (GYT: 5)
Subspecialties: PDR,RNR,VIR
Program ID: 420-10-21-046

Georgetown University Program
Georgetown University Hospital
Program Director:
Rebecca A Zuehler, MD
Georgetown University Medical Center
Dept of Radiology
3800 Reservoir Rd
Washington, DC 20007-2187
202 784-3514
Length: 4 Year(s) Total Positions: 16 (GYT: 4)
Subspecialties: RNR
Program ID: 420-10-11-045

Howard University Program
Howard University Hospital
Program Director:
James S Tread, MD
Howard University Hospital
Dept of Radiology
2041 Georgia Ave NW
Washington, DC 20060
202 865-1571
Length: 4 Year(s) Total Positions: 12 (GYT: 0)
Program ID: 420-10-11-047

Walter Reed Army Medical Center Program
Walter Reed Army Medical Center
Program Director:
Michael P Brumatis, MD
Chief Dept of Radiology
Walter Reed Army Medical Center
6355 16th St NW
Washington, DC 20070-5001
202 782-2631
Length: 4 Year(s) Total Positions: 20 (GYT: 0)
Program ID: 420-10-21-000

Florida

Gainesville

University of Florida Program
University of Florida College of Medicine
Shands Hospital at the University of Florida
Veterans Affairs Medical Center (Gainesville)
Program Director:
Edward V Shaub, MD
University of Florida
Dept of Radiology
PO Box 106374
Gainesville, FL 32610-0774
904 358-0291
Length: 4 Year(s) Total Positions: 28 (GYT: 6)
Subspecialties: NNM,RNR,PDR,RNR,VIR
Program ID: 420-11-21-048

Jacksonville

University of Florida Health Science Center/ Jacksonville Program
University Medical Center (UFHSC/J)
Program Director:
Frederick S Vines, MD
Dept of Radiology UFHSC/J
University Medical Center
655 W Eighth St
Jacksonville, FL 32209
904 540-4224
Length: 4 Year(s) Total Positions: 18 (GYT: 4)
Subspecialties: RNR
Program ID: 420-11-21-223

Miami

University of Miami-Jackson Memorial Medical Center Program
University of Miami-Jackson Memorial Medical Center
Program Director:
Ronald C Joseph, MD
Jackson Memorial Hospital
Dept of Radiology
1611 NW 12th Ave WW 279
Miami, Fl 33136
305 558-6884
Length: 4 Year(s) Total Positions: 44 (GYT: 10)
Subspecialties: PDR,RNR,VIR
Program ID: 420-11-21-049

Miami Beach

Mount Sinai Medical Center of Greater Miami Program
Mount Sinai Medical Center of Greater Miami
Program Director:
Manuel Viamonte Jr, MD
Mount Sinai Medical Center of Greater Miami
Dept of Radiology
4900 Alton Rd
Miami Beach, Fl 33140
305 674-2683
Length: 4 Year(s) Total Positions: 21 (GYT: 5)
Program ID: 420-11-21-050

Tampa

University of South Florida Program
University of South Florida College of Medicine
H Lee Moffitt Cancer Center
James A Haley Veterans Hospital
Tampa General Healthcare
Program Director:
Martin L Silbiger, MD
University of South Florida College of Medicine
Dept of Radiology
1201 Bruce B Downs Blvd Box 17
Tampa, FL 33612-4799
813 974-2538
Length: 4 Year(s) Total Positions: 17 (GYT: 5)
Subspecialties: RNR
Program ID: 420-11-21-061

Georgia

Atlanta

Emory University Program
Emory University School of Medicine
Emory University Hospital
Govy Memorial Hospital
Program Director:
Bruce R Baumgartner, MD
Emory University Hospital
Dept of Radiology
1564 Clifton Rd NE
Atlanta, GA 30322-2300
404 717-4686
Length: 4 Year(s) Total Positions: 66 (GYT: 9)
Subspecialties: PDR,RNR,VIR
Program ID: 420-12-21-052

Augusta

Medical College of Georgia Program
Medical College of Georgia Hospital and Clinics
Veterans Affairs Medical Center (Augusta)
Program Director:
Edward M Burton, MD
Medical College of Georgia
Dept of Radiology BAN-153
1120 15th St
Augusta, GA 30912-3930
706 721-3514
Length: 4 Year(s) Total Positions: 14 (GYT: 3)
Subspecialties: RNR
Program ID: 420-12-21-068

Savannah

Memorial Medical Center Program
Memorial Medical Center
Program Director:
Terry Reynolds, MD
Memorial Medical Center Inc
PO Box 20589
Savannah, GA 31403-3089
912 350-7094
Length: 4 Year(s) Total Positions: 8 (GYT: 0)
Program ID: 420-12-12-054

* Updated information not provided.

Graduate Medical Education Directory 745
<table>
<thead>
<tr>
<th>Program Name</th>
<th>University/Program Details</th>
<th>Length</th>
<th>Position(s)</th>
<th>Program ID</th>
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<tbody>
<tr>
<td>University of Chicago Program</td>
<td>University of Chicago Hospitals Program Director: Tamar Ben-Ammi, MD University of Chicago Medical Center 5841 S Maryland Ave MC1206 Chicago, IL 60637-1470 312 795-0210 Length: 4 Year(s) Total Positions: 24 (GYI: 6) Subspecialties: RNR Program ID: 420-16-11-061</td>
<td>4 Year(s)</td>
<td>24</td>
<td>420-16-11-061</td>
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<tr>
<td>University of Illinois College of Medicine at Chicago Program</td>
<td>University of Illinois College of Medicine at Chicago University of Illinois Hospital and Clinics Veterans Affairs Westside Medical Center (Chicago) Program Director: Andrew C Wilbur, MD University of Illinois Hospital 1749 W Taylor St Urbana, IL 61801-7733 312 994-5334 Length: 4 Year(s) Total Positions: 15 (GYI: 0) Program ID: 420-16-11-062</td>
<td>4 Year(s)</td>
<td>15</td>
<td>420-16-11-062</td>
</tr>
<tr>
<td>University of Illinois College of Medicine at Chicago/Michael Reese Hospital Program</td>
<td>University of Illinois College of Medicine at Chicago Mercy Hospital and Medical Center Michael Reese Hospital and Medical Center Program Director: N L Brown, MD Michael Reese Hospital &amp; Medical Center Diagnostic Radiology Dept 2828 S Ellis Ave Chicago, IL 60616 312 701-4677 Length: 4 Year(s) Total Positions: 6 (GYI: 0) Subspecialties: RNR Program ID: 420-16-12-067</td>
<td>4 Year(s)</td>
<td>6</td>
<td>420-16-12-067</td>
</tr>
<tr>
<td>Evaston Program</td>
<td>St Francis Hospital of Evanston Program Director: Daniel J Murphy, MD St Francis Hospital of Evanston Dept of Radiology 356 Ridge Ave Evanston, IL 60202 708 492-9100 Length: 4 Year(s) Total Positions: 8 (GYI: 0) Program ID: 420-16-12-068</td>
<td>4 Year(s)</td>
<td>8</td>
<td>420-16-12-068</td>
</tr>
<tr>
<td>Maywood Program</td>
<td>Loyola University Program Program Director*: Michael F Fluck, MD Foster G McLaghlin Hospital-Loyola University of Chicago Dept of Radiology 2160 S First Ave Maywood, IL 60153 708 216-1064 Length: 4 Year(s) Total Positions: 19 (GYI: 0) Subspecialties: RNR Program ID: 420-16-11-064</td>
<td>4 Year(s)</td>
<td>19</td>
<td>420-16-11-064</td>
</tr>
</tbody>
</table>

* Updated information not provided.
Iowa
Iowa City
University of Iowa Hospitals and Clinics Program
University of Iowa Hospitals and Clinics
Veterans Affairs Medical Center (Iowa City)
Program Director:
Brad H Thompson, MD
University of Iowa Hospital & Clinic
Dept of Radiology
200 Hawkins Dr
Iowa City, IA 52242-0099
319 356-5385
Length: 4 Year(s) Total Positions: 30 (GYI: 7)
Subspecialties: NR, FDR, RNR
Program ID: 420-16-21-068

Kentucky
Lexington
University of Kentucky Medical Center Program
University of Kentucky School of Medicine
University of Kentucky Medical Center
Program Director:
Andrew M Fried, MD
University of Kentucky Medical Center
Dept of Diagnostic Radiology
800 Rose St H9101
Lexington, KY 40536-0084
606 323-0670
Length: 4 Year(s) Total Positions: 30 (GYI: 5)
Program ID: 420-20-21-071

Louisiana
New Orleans
Alton Ochsner Medical Foundation Program
Alton Ochsner Medical Foundation
Program Director:
Christopher B B Merritt, MD
Alton Ochsner Medical Foundation
Dept of Graduate Med Educ
1616 Jefferson Hwy
New Orleans, LA 70121
504 584-3455
Length: 4 Year(s) Total Positions: 25 (GYI: 5)
Program ID: 420-21-12-074
Louisiana State University Program
Louisiana State University School of Medicine
Children's Hospital
Medical Center of Louisiana at New Orleans-LSU Division
Veterans Affairs Medical Center-LSU Service (New Orleans)
Program Director:
John R Jeslyn, MD
Janis Gissel Letourneau, MD
Louisiana State University Medical Center
Dept of Radiology
1432 Tulane Ave
New Orleans, LA 70112-2822
504 568-4048
Length: 4 Year(s) Total Positions: 24 (GYI: 0)
Program ID: 420-21-21-234
Tulane University Program
Tulane University School of Medicine
Tulane University Hospital and Clinics
Program Director:
Marvin S Kogut, MD
Tulane University Medical School
Dept of Radiology
1430 Tulane Ave Box 8154
New Orleans, LA 70112-3969
504 587-7067
Length: 4 Year(s) Total Positions: 16 (GYI: 4)
Program ID: 420-21-21-235

Maryland
Baltimore
Johns Hopkins University Program
Johns Hopkins University School of Medicine
Johns Hopkins Hospital
Program Director:
Stanley S Steepman, MD
Johns Hopkins Hospital
Dept of Radiology
600 N Wolfe St
Baltimore, MD 21287
410 555-5055
Length: 4 Year(s) Total Positions: 35 (GYI: 8)
Subspecialties: FDR, RNR, VIR
Program ID: 420-18-11-077
University of Maryland Program
University of Maryland Medical System
Program Director:
Charles S Bonwik, MD
Univ of Maryland Medical System Dept of Diagnostic Radiology
22 S Greene St
Baltimore, MD 21201-1865
410 329-3477
Length: 4 Year(s) Total Positions: 37 (GYI: 6)
Subspecialties: RNR, VIR
Program ID: 420-23-11-079

Massachusetts
Worcester
Rollins College Program
Rollins College
Program Director:
Thomas R Dreyer, MD
Rollins College
Dept of Radiology
700 Blackstone St
Worcester, MA 01610-1090
508 793-2211
Length: 4 Year(s) Total Positions: 30 (GYI: 0)
Program ID: 420-19-11-069

Michigan
Alma
University of Michigan Program
University of Michigan Medical Center
Program Director:
James C. Moore, MD
University of Michigan Medical Center
Dept of Radiology
200 Hawkins Dr
Ann Arbor, MI 48109-0099
734 936-5830
Length: 4 Year(s) Total Positions: 25 (GYI: 1)
Program ID: 420-20-21-071

Michigan State University Program
Michigan State University
Program Director:
John S. Seidman, MD
Michigan State University
Dept of Radiology
530 E Pere Marquette Dr
East Lansing, MI 48823-1326
517 432-4088
Length: 4 Year(s) Total Positions: 19 (GYI: 5)
Program ID: 420-20-21-071

Minnesota
Saint Paul
University of Minnesota Program
University of Minnesota Medical School
Program Director:
Christopher M Higgenbotham, MD
University of Minnesota Medical School
Dept of Radiology
420 Delaware St SE
Minneapolis, MN 55455-0384
612 624-3900
Length: 4 Year(s) Total Positions: 25 (GYI: 6)
Program ID: 420-20-21-071

Nebraska
Omaha
Creighton University Program
Creighton University
Program Director:
John D. Rutledge, MD
Creighton University
Dept of Radiology
2500 California Pl
Omaha, NE 68105-2699
402 461-4010
Length: 4 Year(s) Total Positions: 20 (GYI: 6)
Program ID: 420-21-12-074

New Mexico
Albuquerque
University of New Mexico Program
University of New Mexico Medical Center
Program Director:
Timothy W. Ganci, MD
University of New Mexico Medical Center
Dept of Radiology
1509 Medical Plaza
Albuquerque, NM 87108-0999
505 841-2030
Length: 4 Year(s) Total Positions: 20 (GYI: 7)
Program ID: 420-20-21-071

Ohio
Cincinnati
University of Cincinnati Medical Center Program
University of Cincinnati College of Medicine
Program Director:
Andrew W. Riviere, MD
University of Cincinnati Medical Center
Dept of Radiology
2311egg Street
Cincinnati, OH 45267-0542
513 558-4641
Length: 4 Year(s) Total Positions: 25 (GYI: 6)
Program ID: 420-16-21-068

Ohio State University Program
Ohio State University
Program Director:
David L. McInnes, MD
Dept of Radiology
71 West Tenth Street
Columbus, OH 43210-1278
614 292-4169
Length: 4 Year(s) Total Positions: 25 (GYI: 6)
Program ID: 420-21-21-234

Pennsylvania
Harrisburg
University of Pennsylvania Program
University of Pennsylvania School of Medicine
Program Director:
John R. Jeslyn, MD
University of Pennsylvania School of Medicine
Dept of Radiology
3400 Hamilton St
Philadelphia, PA 19104-6081
215 662-8201
Length: 4 Year(s) Total Positions: 25 (GYI: 6)
Program ID: 420-20-21-071

Philadelphia
University of Pennsylvania Program
University of Pennsylvania School of Medicine
Program Director:
John R. Jeslyn, MD
University of Pennsylvania School of Medicine
Dept of Radiology
3400 Hamilton St
Philadelphia, PA 19104-6081
215 662-8201
Length: 4 Year(s) Total Positions: 25 (GYI: 6)
Program ID: 420-21-21-234

Portland
Maine Medical Center Program
Maine Medical Center
Program Director:
Anthony P Salvo, MD
Maine Medical Center
Dept of Diagnostic Radiology
22 Bramhall St
Portland, ME 04102
207 871-4279
Length: 4 Year(s) Total Positions: 15 (GYI: 3)
Program ID: 420-23-11-078

Shreveport
Louisiana State University (Shreveport) Program
Louisiana State University Medical Center-Shreveport
Program Director:
Mariahdah Harijanatharla, MD
Louisiana State University Medical Center Hospital
Med Educ Radiology
PO Box 3002
Shreveport, LA 71130-3002
318 675-6054
Length: 4 Year(s) Total Positions: 11 (GYI: 3)
Program ID: 420-21-11-075

* Updated information not provided.

Graduate Medical Education Directory
Massachusetts

Boston

Beth Israel Hospital/Harvard Medical School Program

Beth Israel Hospital

Program Director:
Ferris M Hall, MD
Beth Israel Hospital
Dept of Radiology
330 Brookline Ave
Boston, MA 02215-5481
617 735-3332

Length: 4 Year(s)  Total Positions: 20 (GYI: 5)
Subspecialties: RNR
Program ID: 420-24-21-080

Boston University Program*

Boston City Hospital
Boston University Medical Center-University Hospital

Program Director:
William B Cranley, MD
Boston City Hospital Dept of Radiology
818 Harrison Ave
Boston, MA 02118
617 534-5135

Length: 4 Year(s)  Total Positions: 20 (GYI: 0)
Subspecialties: VIR
Program ID: 420-24-21-081

Brigham and Women's Hospital/Harvard Medical School Program

Brigham and Women's Hospital
Children's Hospital

Program Director:
Harry Z Mellis, MD
Faye C Laing, MD
Brigham and Women's Hospital
16 Francis St
Boston, MA 02115-6186
617 278-9702

Length: 4 Year(s)  Total Positions: 20 (GYI: 0)
Subspecialties: RNR,VIR
Program ID: 420-24-21-086

Massachusetts General Hospital/Harvard Medical School Program

Massachusetts General Hospital

Program Director:
Jack Wittenberg, MD
Massachusetts General Hospital
Dept of Radiology
14 Fruit St
Boston, MA 02114
617 726-8380

Length: 4 Year(s)  Total Positions: 38 (GYI: 9)
Subspecialties: RNR
Program ID: 420-24-31-083

New England Deaconess Hospital/Harvard Medical School Program

New England Deaconess Hospital

Program Director:
H Estherbrook Longmaid, MD
Deaconess Hospital
One Deaconess Rd
Boston, MA 02215-9905
617 632-9460

Length: 4 Year(s)  Total Positions: 16 (GYI: 0)
Subspecialties: VR
Program ID: 420-24-21-084

Tufts University Program*

New England Medical Center Hospitals
Veterans Affairs Medical Center (Boston)

Program Director:
Robert C Sarno, MD
New England Medical Center
Dept of Radiology
750 Washington St
Boston, MA 02111
617 956-6600
Length: 4 Year(s)  Total Positions: 34 (GYI: 0)
Subspecialties: RNR
Program ID: 420-24-21-086

Burlington

Lahey Clinic Program

Lahey Clinic

Program Director:
Carl E Larsen, MD
Lahey Clinic Medical Center
41 Mall Rd
Burlington, MA 01805
617 278-8175
Length: 4 Year(s)  Total Positions: 12 (GYI: 0)
Subspecialties: RNR
Program ID: 420-24-22-082

Cambridge

Mount Auburn Hospital Program

Mount Auburn Hospital

Program Director:
Michael J Shortliffe, MD
Mount Auburn Hospital
Dept of Radiology
300 Mount Auburn St
Cambridge, MA 02138
617 496-5070
Length: 4 Year(s)  Total Positions: 9 (GYI: 0)
Program ID: 420-24-11-087

Pittsfield

Berkshire Medical Center Program*

Berkshire Medical Center

Program Director:
David M Markowitz, MD
Dept of Diagnostic Radiology
Berkshire Medical Center
725 North St
Pittsfield, MA 01201
413 447-3443
Length: 4 Year(s)
Program ID: 420-24-21-245

Springfield

Baystate Medical Center Program

Baystate Medical Center

Program Director:
Thomas H Parker, MD
Baystate Medical Center
Dept of Radiology
755 Chestnut St
Springfield, MA 01199
413 784-3333
Length: 4 Year(s)  Total Positions: 13 (GYI: 0)
Program ID: 420-24-12-088

Worcester

St Vincent Hospital Program

St Vincent Hospital

Program Director:
Murray L Janower, MD
St Vincent Hospital
25 Windthrop St
Worcester, MA 01604
508 798-6900
Length: 4 Year(s)  Total Positions: 8 (GYI: 0)
Program ID: 420-24-12-089

University of Massachusetts Medical Center Program*

University of Massachusetts Medical Center

Program Director:
Cynthia B Umali-Torres, MD
Univ of Massachusetts Medical Center
55 Lake Ave N
Worcester, MA 01655
508 856-3553
Length: 4 Year(s)  Total Positions: 16 (GYI: 0)
Subspecialties: RNR,VIR
Program ID: 420-24-21-090

Michigan

Ann Arbor

University of Michigan Program

University of Michigan Hospitals
Veterans Affairs Medical Center (Ann Arbor)

Program Director:
Richard E Cohen, MD
University of Michigan Hospitals
Dept of Radiology
1500 E Medical Center Dr
Ann Arbor, MI 48109-0030
313 853-4489
Length: 4 Year(s)  Total Positions: 34 (GYI: 10)
Subspecialties: RNR,VIR
Program ID: 420-25-21-091

Dearborn

Oakwood Hospital Program

Oakwood Hospital

Program Director:
Sharon Helmer, MD
Oakwood Hospital
19101 Oakwood Blvd
PO Box 2500
Dearborn, MI 48125-2500
313 825-7202
Length: 4 Year(s)  Total Positions: 18 (GYI: 5)
Program ID: 420-25-12-092

Detroit

Henry Ford Hospital Program

Henry Ford Hospital

Program Director:
Robert D Halpert, MD
Henry Ford Hospital
Dept of Radiology
2700 W Grand Blvd
Detroit, MI 48202
313 876-1384
Length: 4 Year(s)  Total Positions: 28 (GYI: 7)
Subspecialties: RNR
Program ID: 420-25-11-093

* Updated information not provided.
Sinai Hospital Program

Program Director:
Russell N Nusynowitz, MD
Sinai Hospital
6767 W Outer Dr
Detroit, MI 48235
313 493-6695

Length: 4 Year(s) Total Positions: 12 (GYT: 3)
Program ID: 420-25-21-106

Wayne State University/Detroit Medical Center Program

Wayne State University School of Medicine
Detroit Receiving Hospital and University Health Center
Grace Hospital
Harper Hospital
Program Director:
Lawrence P Davis, MD
Wayne State Univ Sch of Med Dept of Radiology
Detroit Receiving Hosp 8 L-8
4301 St Antoine
Detroit, MI 48201
313 746-8430

Length: 4 Year(s) Total Positions: 24 (GYT: 6)
Subspecialties: NR,PDR,RR
Program ID: 420-25-21-008

Flint

Michigan State University (Flint) Program

Michigan State Univ College of Human Medicine-Flint Campus
Genesys Regional Medical Center-St Joseph Campus
Hurley Medical Center
McLaren Regional Medical Center
Program Director:
Alexander Gotschalk, MD
Michigan State Univ Coll of Human Med Flint Campus
One Hurley Plaza
Flint, MI 48503-5602
313 223-7000

Length: 4 Year(s) Total Positions: 12 (GYT: 3)
Program ID: 420-25-51-100

Grand Rapids

Grand Rapids Area Medical Education Center/Michigan State University Program

Grand Rapids Area Medical Education Center
Bledgett Memorial Medical Center
Baxter Hospital
Michigan State University College of Human Medicine
St Mary's Health Services
Program Director:
Alexander Gotschalk, MD
Grand Rapids Area Medical Education Center
240 Cherry St SE
Grand Rapids, MI 49503
616 732-6323

Length: 4 Year(s) Total Positions: 15 (GYT: 3)
Program ID: 420-25-21-099

Pontiac

St Joseph Mercy Hospital Program

St Joseph Mercy Community HealthCare System
Program Director:
Hugh H Kerr, MD
St Joseph Mercy Hospital
Dept of Radiology
300 Woodward Ave
Pontiac, MI 48341-5666
313 886-3040

Length: 4 Year(s) Total Positions: 16 (GYT: 4)
Program ID: 420-25-21-101

Royal Oak

William Beaumont Hospital Program

William Beaumont Hospital
Program Director:
Kenneth W Mataran, MD
William Beaumont Hospital
Dept of Diagnostic Radiology
3601 W 13 Mile Rd
Royal Oak, MI 48073
810 561-4063

Length: 4 Year(s) Total Positions: 27 (GYT: 7)
Subspecialties: NR,RNR
Program ID: 420-25-15-102

Southfield

Providence Hospital Program

Providence Hospital
Program Director:
David L. Oster, MD
Providence Hospital
16001 W Nine Mile Rd
Southfield, MI 48075
313 424-3081

Length: 4 Year(s) Total Positions: 12 (GYT: 3)
Program ID: 420-25-21-103

Michigan

Minneapolis

University of Minnesota Program

University of Minnesota Medical School
Hennepin County Medical Center
21 Paul Ramsey Medical Center
University of Minnesota Hospital and Clinic
Veterans Affairs Medical Center (Minneapolis)
Program Director:
William M Thompson, MD
Harry Griffin, MD
University of Minnesota
420 Delaware St SE
Rm 2-349
Minneapolis, MN 55455
612 626-2566

Length: 4 Year(s) Total Positions: 52 (GYT: 5)
Subspecialties: PDR,RR
Program ID: 420-25-21-194

Rochester

Mayo Graduate School of Medicine Program

Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Rochester)
Program Director:
Stephen J Swensen, MD
MSSM Application Processing Center
Mayo Graduate School of Medicine
200 1st St SW
Rochester, MN 55905
507 284-5114

Length: 4 Year(s) Total Positions: 30 (GYT: 10)
Subspecialties: RNR
Program ID: 420-25-21-105

Mississippi

Jackson

University of Mississippi Medical Center Program

University of Mississippi School of Medicine
University Hospital
Program Director:
James U Morano, MD
Univ of Mississippi Med Ctr
2500 N State St
Jackson, MS 39216-4505
601 984-3515

Length: 4 Year(s) Total Positions: 19 (GYT: 3)
Program ID: 420-27-11-107

Missouri

Columbia

University of Missouri-Columbia Program

University of Missouri-Columbia School of Medicine
Harry S Truman Memorial Veterans Hospital
University and Children's Hospital
Program Director:
Robert J Churchhill, MD
Univ of Missouri Med Ctr-Radiology Dept
One Hospital Dr
Columbia, MO 65212
573 548-4206

Length: 4 Year(s) Total Positions: 17 (GYT: 4)
Program ID: 420-25-11-108

Kansas City

University of Missouri at Kansas City Program

University of Missouri-Kansas City School of Medicine
St Luke's Hospital
Truman Medical Center-West
Program Director:
Fong Y Thai, MD
Truman Med Ctr-W
Dept of Radiology
2501 Holmes St
Kansas City, MO 64108-8100
816 566-3273

Length: 4 Year(s) Total Positions: 20 (GYT: 5)
Program ID: 420-25-21-231

St Louis

St Louis University Group of Hospitals Program

St Louis University School of Medicine
Cardinal Glennon Children's Hospital
St Louis University Hospital
Veterans Affairs Medical Center (St Louis)
Program Director:
Murali Sundaram, MD
Dept of Radiology St Louis Univ Hlth Sc Ctr
St Louis University Hospital
3650 Vista at Grand
St Louis, MO 63110-6250
314 577-5025

Length: 4 Year(s) Total Positions: 24 (GYT: 6)
Subspecialties: PDR,RNR
Program ID: 420-25-21-110

* Updated information not provided.
Washington University Program
Barnes Hospital
Jewish Hospital of St Louis
Mallinckrodt Institute of Radiology
St Louis Children's Hospital
Washington University School of Medicine
Program Director:
Denise M Balle, MD
Mallinckrodt Institute of Radiology
510 S Kingshighway
St Louis, MO 63110
314 362-2526
Length: 4 Year(s) Total Positions: 64 (GYI: 11) Subspecialties: PIRRS,VIR
Program ID: 420-33-11-111

New Jersey
Camden
UMDNJ-Robert Wood Johnson Medical School (Camden) Program
Cooper Hospital-University Medical Center
Armed Forces Institute of Pathology
Children's Hospital of Philadelphia
Thomas Jefferson University Hospital
Program Director:
James H Jacoby, MD
Cooper Hospital/University Medical Center
Diagnostic Radiology Dept
One Cooper Plaza
Camden, NJ 08118
609 342-2939
Length: 4 Year(s) Total Positions: 6 (GYI: 0)
Program ID: 420-33-21-244

Hackensack
Hackensack Medical Center Program
Hackensack Medical Center
Program Director:
Joel A Badol, MD
Hackensack Medical Center
20 Prospect Ave
Hackensack, NJ 07601
201 966-2101
Length: 4 Year(s) Total Positions: 8 (GYI: 0)
Program ID: 420-33-12-114

Livingston
St Barnabas Medical Center Program
St Barnabas Medical Center
Program Director:
Lester Kalshefer, MD
St Barnabas Medical Center
Old Short Hills Rd
Livingston, NJ 07039
201 538-5822
Length: 4 Year(s) Total Positions: 14 (GYI: 0)
Program ID: 420-33-21-217

Long Branch
Monmouth Medical Center Program
Monmouth Medical Center
Program Director:
Richard B Buchman, MD
Monmouth Medical Center
Dept of Radiology
300 Second Ave
Long Branch, NJ 07740-8998
908 879-5960
Length: 4 Year(s) Total Positions: 8 (GYI: 0)
Program ID: 420-33-31-115

Morrstown
Morrstown Memorial Hospital Program
Morrstown Memorial Hospital
Program Director:
Harry L Stein, MD
Morrstown Memorial Hospital Dept of Radiology
100 Madison Ave
PO Box 1966
Morrstown, NJ 07962-1966
201 971-5372
Length: 4 Year(s) Total Positions: 8 (GYI: 0)
Program ID: 420-33-11-116

Newark
Newark Beth Israel Medical Center Program
Newark Beth Israel Medical Center
Program Director:
Lloyd S Splendell, MD
Newark Beth Israel Medical Center
261 Lyons Ave at Osborne Terrace
Newark, NJ 07112
201 995-7005
Length: 4 Year(s) Total Positions: 8 (GYI: 0)
Program ID: 420-33-31-118

UMDNJ-New Jersey Medical School Program
UMDNJ-New Jersey Medical School
Children's Hospital of New Jersey
UMDNJ University Hospital
Program Director:
Stephen R Baker, MD
UMDNJ/RJMS
Dept of Radiology C-320
10 Bergen St
Newark, NJ 07103-2425
201 995-5188
Length: 4 Year(s) Total Positions: 17 (GYI: 0)
Program ID: 420-33-31-216

Piscataway
UMDNJ-Robert Wood Johnson Medical School Program
UMDNJ-Robert Wood Johnson Medical School
Robert Wood Johnson University Hospital
St Peter's Medical Center
Program Director:
John L Nesher, MD
UMDNJ-Robert Wood Johnson Medical School
Dept of Radiology
One Robert Wood Johnson Pl
New Brunswick, NJ 08903-0019
908 235-7721
Length: 4 Year(s) Total Positions: 11 (GYI: 0)
Program ID: 420-33-21-238

Summit
Overlook Hospital Program
Overlook Hospital
Program Director:
William J Esposti, MD
Overlook Hospital
46 Beavoir Ave
PO Box 225
Summit, NJ 07902-0220
908 592-5607
Length: 4 Year(s) Total Positions: 8 (GYI: 0)
Program ID: 420-33-11-119

Nebraska
Omaha
Creighton University Program
CreightonNebraska University Health Foundation
AMF St Joseph Hospital at Creighton Univ Medical Center
Program Director:
David M Leekowitz, MD
Creighton Univ Schl of Med
Dept of Radiology
601 N 30th St
Omaha, NE 68131
402 449-4549
Length: 4 Year(s) Total Positions: 11 (GYI: 0)
Program ID: 420-30-21-220

University of Nebraska Program
University of Nebraska Medical Center
Veterans Affairs Medical Center (Omaha)
Program Director:
Craig W Walker, MD
University of Nebraska Medical Center
Dept of Radiology
600 S 42nd St
Omaha, NE 68118-1045
402 559-6655
Length: 4 Year(s) Total Positions: 16 (GYI: 4) Subspecialties: VIR
Program ID: 420-30-21-112

New Hampshire
Lebanon
Dartmouth-Hitchcock Medical Center Program
Mary Hitchcock Memorial Hospital
Program Director:
Jason M Chertoff, MD
Dartmouth-Hitchcock Medical Center
Dept of Radiology
One Medical Center Dr
Lebanon, NH 03766
603 650-4477
Length: 4 Year(s) Total Positions: 12 (GYI: 0)
Program ID: 420-33-11-113

* Updated information not provided. 

750 Graduate Medical Education Directory
### New Mexico

**Albuquerque**

**University of New Mexico Program**

[Address and contact information]

**Program Director:**

[Name and contact information]

**Subspecialties:** RNR

**Program ID:** 420-32-15-120

### New York

**Albany**

**Albany Medical Center Program**

[Address and contact information]

**Program Director:**

[Name and contact information]

**Subspecialties:** RNR

**Program ID:** 420-35-11-121

### Brooklyn

**Long Island College Hospital Program**

[Address and contact information]

**Program Director:**

[Name and contact information]

**Subspecialties:** RNR

**Program ID:** 420-35-15-129

### East Meadow

**Nassau County Medical Center Program**

[Address and contact information]

**Program Director:**

[Name and contact information]

**Subspecialties:** RNR

**Program ID:** 420-35-11-129

### Manhasset

**North Shore University Hospital Program**

[Address and contact information]

**Program Director:**

[Name and contact information]

**Subspecialties:** RNR

**Program ID:** 420-35-11-124

### Mineola

**Winthrop-University Hospital Program**

[Address and contact information]

**Program Director:**

[Name and contact information]

**Subspecialties:** RNR

**Program ID:** 420-35-11-129

### New Hyde Park

**Albert Einstein College of Medicine at Long Island Jewish Medical Center Program**

[Address and contact information]

**Program Director:**

[Name and contact information]

**Subspecialties:** RNR

**Program ID:** 420-35-11-122

### New York

**Albert Einstein College of Medicine at Beth Israel Medical Center Program**

[Address and contact information]

**Program Director:**

[Name and contact information]

**Subspecialties:** RNR

**Program ID:** 420-35-11-127

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*Updated information not provided.*
Accredited Programs in Radiology-Diagnostic

Harlem Hospital Center Program*
Harlem Hospital Center
Presbyterian Hospital in the City of New York
Program Director:
Robert L. Locko, MD
Harlem Hospital Center
506 Lenox Ave
New York, NY 10032
212 965-0000
Length: 4 Year(s) Total Positions: 16 (GYF: 0)
Program ID: 420-35-21-314

Lenox Hill Hospital Program
Lenox Hill Hospital
Program Director:
Lewis M Rothman, MD
Lenox Hill Hospital
Dept of Radiology
100 E 77th St
New York, NY 10021-1803
212 369-2929
Length: 4 Year(s) Total Positions: 12 (GYF: 0)
Program ID: 420-35-21-218

Mount Sinai School of Medicine Program
Mount Sinai School of Medicine
Elmhurst Hospital Center Mount Sinai Services
Mount Sinai Medical Center
Veterans Affairs Medical Center (Bronx)
Program Director:
Kathleen Salton, MD
Mount Sinai Hospital
Dept of Radiology Box 1334
One Gustave L Levy Pl
New York, NY 10029
212 645-7277
Length: 4 Year(s) Total Positions: 34 (GYF: 0)
Subspecialties: PDR,RRN,VIR
Program ID: 420-35-21-195

New York Hospital/Cornell Medical Center Program
New York Hospital
Hospital for Special Surgery
Memorial Sloan-Kettering Cancer Center
Program Director:
Robert D Zimmerman, MD
Director Residency Training
New York Hospital Cornell Med Ctr
New York, NY 10021
212 746-7574
Length: 4 Year(s) Total Positions: 31 (GYF: 0)
Subspecialties: RNR,VIR
Program ID: 420-35-21-129

New York University Medical Center Program
New York University Medical Center
Bellevue Hospital Center
Veterans Affairs Medical Center (Manhattan)
Program Director:
Albert F Keegan, MD
New York University Medical Center
550 First Ave
New York, NY 10016
212 644-0973
Length: 4 Year(s) Total Positions: 47 (GYF: 0)
Subspecialties: NR,PDR,RRN
Program ID: 420-35-21-197

Presbyterian Hospital in the City of New York Program
Presbyterian Hospital in the City of New York
Program Director:
Philip O Alberson, MD
Presbyterian Hospital in the City of New York
622 W 168th St
New York, NY 10032
212 366-5994
Length: 4 Year(s) Total Positions: 24 (GYF: 0)
Subspecialties: PDR,RRN,VIR
Program ID: 420-35-11-188

St Luke's-Roosevelt Hospital Center Program
St Luke's-Roosevelt Hospital Center
St Luke's-Roosevelt Hospital Center-Roosevelt Division
St Luke's-Roosevelt Hospital Center-St Luke's Division
Program Director:
Jeanne W Baer, MD
St Luke's Roosevelt Hospital Center
Dept of Radiology
1111 Amsterdam Ave
New York, NY 10025
212 925-6226
Length: 4 Year(s) Total Positions: 23 (GYF: 0)
Subspecialties: RRN
Program ID: 420-35-21-224

Rochester
Rochester General Hospital Program
Rochester General Hospital
Program Director:
Allan D Bernstein, MD
Rochester General Hospital
425 Portland Ave
Rochester, NY 14621
716 997-1200
Length: 4 Year(s) Total Positions: 10 (GYF: 0)
Program ID: 420-35-12-145

University of Rochester Program
Strong Memorial Hospital of the University of Rochester
Program Director:
Joritza Sicas, MD
Univ of Rochester Medical Center Dept of Diagnostic Radiology
601 Elmwood Ave
Rochester, NY 14642-8648
716 263-5811
Length: 4 Year(s) Total Positions: 20 (GYF: 2)
Subspecialties: PDR,RRN,VIR
Program ID: 420-35-11-146

Stony Brook
SUNY at Stony Brook Program
University Hospital-SUNY at Stony Brook
Veterans Affairs Medical Center (Northport)
Program Director:
Morton A Meyers, MD
University Hospital Dept of Radiology
Level 4 5th Floor
Health Science Center
Stony Brook, NY 11794-8460
516 444-2480
Length: 4 Year(s) Total Positions: 20 (GYF: 0)
Subspecialties: RNR
Program ID: 420-35-21-222

Syracuse
SUNY Health Science Center at Syracuse Program
University Hospital-SUNY Health Science Center at Syracuse
Veterans Affairs Medical Center (Syracuse)
Program Director:
Stuart A Grookin, MD
John J Wassenbo, MD
Dept of Radiology
SUNY Health Science Center
250 E Adams St
Syracuse, NY 13210
315 464-7434
Length: 4 Year(s) Total Positions: 20 (GYF: 5)
Subspecialties: RNR
Program ID: 420-35-21-147

Valhalla
New York Medical College (Richmond) Program
New York Medical College
St Vincent's Medical Center of Richmond
Westchester County Medical Center
Program Director:
Ronwin D de Silva, MD
St Vincent's Medical Center of Richmond
355 Bard Ave
Satan Island, NY 10510
718 576-1813
Length: 4 Year(s) Total Positions: 1 (GYF: 1)
Program ID: 420-35-21-229

New York Medical College at St Vincent's Hospital and Medical Center of New York Program
New York Medical College
St Vincent's Hospital and Medical Center of New York
Program Director:
James Chang, MD
St Vincent's Hospital and Medical Center
Dept of Radiology
153 W 11th St
New York, NY 10001
212 604-8742
Length: 2 Year(s) Total Positions: 14 (GYF: 0)
Program ID: 420-35-12-141

New York Medical College at Westchester County Medical Center Program
New York Medical College
Lincoln Medical and Mental Health Center
Metropolitan Hospital Center
Westchester County Medical Center
Program Director:
Susan A Klein, MD
New York Medical College
Macy Pavilion
Dept of Radiology
Valhalla, NY 10595
914 235-6550
Length: 2 Year(s) Total Positions: 20 (GYF: 0)
Subspecialties: RNR
Program ID: 420-35-21-136

* Updated information not provided.
North Carolina

Chapel Hill
University of North Carolina Hospitals Program
University of North Carolina Hospitals
Program Director:
Ettia D Pisano, MD
Univ of North Carolina School of Medicine
Dept of Radiology
508 Old Infirmary CB#7510
Chapel Hill, NC 27599-7510
919 965-1771
Length: 4 Year(s) Total Positions: 30 (GYT: 5)
Subspecialties: PDR, RNR, VRT
Program ID: 420-36-11-148

Durham
Duke University Program
Duke University Medical Center
Veterans Affairs Medical Center (Durham)
Program Director:
James D Bowie, MD
Duke University Medical Center
Box 3806
Durham, NC 27710
219-964-0711
Total Positions: 47 (GYT: 2)
Subspecialties: PDR, RNR
Program ID: 420-36-31-149

Winston-Salem
Bowman Gray School of Medicine Program
North Carolina Baptist Hospital
Program Director:
Ronald J Zagoria, MD
Bowman Gray School of Medicine
Medical Center Blvd
Winston-Salem, NC 27157-1088
334-715-3614
Length: 4 Year(s) Total Positions: 38 (GYT: 7)
Subspecialties: NB, PDR, RNR, VRT
Program ID: 420-36-11-149

Ohio

Canton
Aultman Hospital/Timken Mercy Medical Center Program
Aultman Hospital
Timken Mercy Medical Center
Program Director:
Barry S Rose, MD
Aultman Dept of Radiology
500 Sixth St SW
Canton, OH 44710
216 438-6287
Length: 4 Year(s) Total Positions: 16 (GYT: 4)
Program ID: 420-38-21-232

Cincinnati
University of Cincinnati Hospital Group Program
University of Cincinnati Hospital
Christ Hospital
Veterans Affairs Medical Center (Cincinnati)
Program Director:
Harold B Spitz, MD
University of Cincinnati Medical Center
Dept of Radiology
PO Box 670742
Cincinnati, OH 45267-0742
216 553-7226
Total Positions: 30 (GYT: 3)
Subspecialties: PDR, RNR
Program ID: 420-36-21-152

Cleveland
Case Western Reserve University (MetroHealth) Program
MetroHealth Medical Center
Program Director:
Errol M Bollen, MD
MetroHealth Medical Center
Dept of Radiology
2500 MetroHealth Dr
Cleveland, OH 44109-1996
216 448-4016
Length: 4 Year(s) Total Positions: 24 (GYT: 6)
Program ID: 420-36-21-242

Case Western Reserve University Program
University Hospitals of Cleveland
Program Director:
Joseph P Lapuma, MD
Peter B Sachs, MD
Dept of Radiology
University Hospitals of Cleveland
11100 Euclid Ave
Cleveland, OH 44106-5100
216 844-3113
Length: 4 Year(s) Total Positions: 6 (GYT: 6)
Subspecialties: RNR
Program ID: 420-36-21-153

Cleveland Clinic Foundation Program
Cleveland Clinic Foundation
Program Director:
David M Einstein, MD
Cleveland Clinic Foundation
9500 Euclid Ave TT32
Dept of Diagnostic Radiology
Cleveland, OH 44195-5242
216 444-5099
Length: 4 Year(s) Total Positions: 31 (GYT: 6)
Subspecialties: PDR, RNR, VRT
Program ID: 420-36-12-154

Mount Sinai Medical Center of Cleveland Program
Mount Sinai Medical Center of Cleveland
Program Director:
Avram E Pearlstein, MD
Mt Sinai Medical Center of Cleveland
One Mt Sinai Dr
Cleveland, OH 44106-4188
216 421-5918
Length: 4 Year(s) Total Positions: 12 (GYT: 9)
Program ID: 420-36-11-165

Columbus
Ohio State University Program
Ohio State University Medical Center
Program Director:
Charles F Mueller, MD
Ohio State University
Dept of Radiology/RAD S-209
410 W Tenth Ave
Columbus, OH 43210
614 293-8369
Length: 4 Year(s) Total Positions: 21 (GYT: 0)
Subspecialties: RNR
Program ID: 420-36-21-156

Toledo
Medical College of Ohio at Toledo Program
Medical College of Ohio Hospital
St Vincent Medical Center
Program Director:
Lee S Weldenberg, MD
Medical College of Ohio
Dept of Radiology
PO Box 10008
Toledo, OH 43698-9008
419 281-3028
Length: 4 Year(s) Total Positions: 12 (GYT: 2)
Program ID: 420-36-21-167

Youngstown
St Elizabeth Hospital Medical Center/NEOHCOM Program
St Elizabeth Hospital Medical Center
Northside Medical Center
Program Director:
William L Crawford, MD
St Elizabeth Hospital Medical Center
1044 Belmont Ave
PO Box 1790
Youngstown, OH 44501-1790
216 480-2773
Length: 4 Year(s) Total Positions: 12 (GYT: 3)
Program ID: 420-34-21-233

Oklahoma

Oklahoma City
Baptist Medical Center of Oklahoma Program
Baptist Medical Center of Oklahoma
Program Director:
Jay A Harold, MD
Baptist Medical Center of Oklahoma
Dept of Radiology
3000 NW Expy
Oklahoma City, OK 73112
405 949-3200
Length: 4 Year(s) Total Positions: 14 (GYT: 4)
Program ID: 420-36-12-158

*Updated information not provided.

Graduate Medical Education Directory 753
University of Oklahoma Health Sciences Center Program
University of Oklahoma College of Medicine-Oklahoma City
Children's Hospital of Oklahoma University
Veterans Affairs Medical Center (Oklahoma City)
Program Director: Sidney P. Traub, MD
Dept of Radiological Science
Univ of Oklahoma Health Sci Ctr
P O Box 28901
Oklahoma City, OK 73190-3020
405 717-6125
Length: 4 Year(s) Total Positions: 12 (GYT: 3)
Subspecialties: VIR
Program ID: 420-99-21-159

Oregon
Portland
Oregon Health Sciences University Program
Oregon Health Sciences University Hospital
Veterans Affairs Medical Center (Portland)
Program Director: Paul C. Lakin, MD
Dep of Radiologic & Nuclear Medicine
Univ of Oregon Health Sci
3181 SW Sam Jackson Pk Blvd
Portland, OR 97239-3088
503 494-3366
Length: 4 Year(s) Total Positions: 16 (GYT: 0)
Program ID: 420-40-31-100

Pennsylvania
Bryn Mawr
Bryn Mawr Hospital Program
Bryn Mawr Hospital
Program Director: Raymond L. Barad, MD
Bryn Mawr Hospital
Dept of Radiology
320 S Bryn Mawr Ave
Bryn Mawr, PA 19010-3140
215 525-4125
Length: 4 Year(s) Total Positions: 8 (GYT: 2)
Program ID: 420-41-21-162

Danville
Geisinger Medical Center Program
Geisinger Medical Center
Program Director: Terence L. O'Rourke, MD
Geisinger Medical Center
100 N Academy Ave
Danville, PA 17821
717 777-6391
Length: 4 Year(s) Total Positions: 12 (GYT: 3)
Program ID: 420-41-21-163

Hershey
Milton S Hershey Medical Center of Pennsylvania State University Program
Penn State University Hospital-Milton S Hershey Med Ctr
Polycrnic Medical Center
Program Director: David S. Hartman, MD
College of Medicine - University Hospital
PO Box 560
Hershey, PA 17033
717 531-6686
Length: 4 Year(s) Total Positions: 28 (GYT: 7)
Subspecialties: VIR
Program ID: 420-41-21-164

Philadelphia
Albert Einstein Medical Center Program
Albert Einstein Medical Center
Program Director: William Herzig, MD
Albert Einstein Medical Center
1801 Poole Rd
Philadelphia, PA 19141-3008
215 456-6200
Length: 4 Year(s) Total Positions: 15 (GYT: 4)
Program ID: 420-41-21-165

McKee Medical Center Program
McKee Medical Center
Program Director: L. W. Herzig, MD
McKee Medical Center
3800 Henry Ave
Philadelphia, PA 19129
215 893-6578
Length: 4 Year(s) Total Positions: 11 (GYT: 6)
Program ID: 420-41-21-169

Mercy Catholic Medical Center Program
Mercy Catholic Medical Center
Program Director: Gustavo A. Quiroga, MD
Mercy Catholic Medical Center
Box 19709
Philadelphia, PA 19143
215 237-8365
Length: 4 Year(s) Total Positions: 10 (GYT: 1)
Program ID: 420-41-21-170

Pennsylvania Hospital Program
Pennsylvania Hospital
Program Director: Carolyn E. Frawley, MD
Soo Song Han, MD
Pennsylvania Hospital
800 Spruce St
Philadelphia, PA 19107-6192
215 858-3001
Length: 4 Year(s) Total Positions: 15 (GYT: 0)
Program ID: 420-41-31-171

Presbyterian Medical Center of Philadelphia Program
Presbyterian Medical Center of Philadelphia
Program Director: Michael A. Rankin, MD
Presbyterian Medical Center
201 South 18th St
Philadelphia, PA 19103
215 662-1968
Length: 4 Year(s) Total Positions: 10 (GYT: 0)
Program ID: 420-41-21-172

Temple University Hospital
Temple University Hospital
Program Director: Michael A. Rankin, MD
Temple University Hospital
2525 North Broad St
Philadelphia, PA 19140
215 756-2985
Length: 4 Year(s) Total Positions: 15 (GYT: 5)
Subspecialties: NNR
Program ID: 420-41-21-173

Thomas Jefferson University Hospital
Thomas Jefferson University Hospital
Program Director: Vijay M. Rao, MD
Thomas Jefferson University
333 S Tenth St
300 Rittenhouse Sq
Philadelphia, PA 19107-6140
215 808-4044
Length: 4 Year(s) Total Positions: 24 (GYT: 0)
Subspecialties: NNR, VIR
Program ID: 420-41-11-174

University of Pennsylvania Program
Hospital of the University of Pennsylvania
Program Director: Igor Lachert, MD
Hospital of the University of Pennsylvania
Dept of Radiology
3400 Spruce St
Philadelphia, PA 19104
215 566-3283
Length: 4 Year(s) Total Positions: 28 (GYT: 2)
Subspecialties: NNR, VIR
Program ID: 420-41-21-175

Pittsburgh
MCP/HU/Alegheny General Hospital Program
Allegheny General Hospital
Program Director: Rebe L. Schapiro, MD
Dep of Diagnostic Radiology
Allegheny General Hospital
330 E North Ave
Pittsburgh, PA 15212-8986
412 268-4113
Length: 4 Year(s) Total Positions: 17 (GYT: 4)
Subspecialties: NNR
Program ID: 420-41-21-176

*Updated information not provided.
Puerto Rico
San Juan
University of Puerto Rico Program
University of Puerto Rico School of Medicine
Industrial Hospital
San Juan City Hospital
University Hospital
Veterans Affairs Medical Center (San Juan)
Program Director:
Herberto Pagán-Suárez, MD
Univ of Puerto Rico Sch of Med Dept Radiological Sciences
Medical Sciences Campus
San Juan, PR 00906
809 755-3576
Length: 4 Year(s) Total Positions: 20 (GYE: 0)
Program ID: 420-43-21-182

Rhode Island
Providence
Rhode Island Hospital Program
Rhode Island Hospital
Program Director:
John J Cronan, MD
Dept of Diagnostic Imaging
Rhode Island Hospital
553 Eddy St
Providence, RI 02903
401 444-5184
Length: 4 Year(s) Total Positions: 10 (GYE: 0)
Program ID: 420-43-21-189

South Carolina
Charleston
Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
Charleston Memorial Hospital
MUSC Medical Center
Veterans Affairs Medical Center (Charleston)
Program Director:
Roderick I Macpheeason, MD
Medical University of South Carolina
Dept of Radiology
171 Ashley Ave
Charleston, SC 29425-0729
843 792-7170
Length: 4 Year(s) Total Positions: 24 (GYE: 5)
Subspecialties: PDR, RNR, VLR
Program ID: 420-45-21-184

* Updated information not provided.
Accredited Programs in Radiology-Diagnostic

Texas

Dallas

Baylor University Medical Center Program

Baylor University Medical Center

Program Director: Mark Zbibich, MD
Dept of Radiology
3500 Gaston Ave
Dallas, TX 75246
214 630-3219

Length: 4 Year(s) Total Positions: 21 (GYI: 5)
Subspecialties: VR
Program ID: 420-46-12-190

University of Texas Southwestern Medical School Program

University of Texas Southwestern Medical School
Dallas County Hospital District-Parkland Memorial Hospital
Veterans Affairs Medical Center (Dallas)

Program Director: George C Carrey, MD
University of Texas Southwestern Medical Center
Dept of Radiology
5322 Harry Hines Blvd
Dallas, TX 75390-8896
214 468-8020

Length: 4 Year(s) Total Positions: 48 (GYI: 11)
Subspecialties: PDR,RNR,VR
Program ID: 420-48-21-192

Fort Sam Houston

US Army Coordinated Program-Brooke Army Medical Center Program

Brooke Army Medical Center

Program Director: Liz Michael A Cawthon, DO
Dept of Radiology
Brooke Army Medical Center
Fort Sam Houston, TX 78234-5200
210 916-8318

Length: 4 Year(s) Total Positions: 5 (GYI: 0)
Program ID: 420-48-11-943

Galveston

University of Texas Medical Branch Hospitals Program

University of Texas Medical Branch Hospitals

Program Director: Brian W Godave, MD
University of Texas Medical Branch Hospitals
Dept of Radiology G-09
Galveston, TX 77555-0709
409 777-2928

Length: 4 Year(s) Total Positions: 12 (GYI: 6)
Subspecialties: PDR,RNR
Program ID: 420-48-11-194

Houston

Baylor College of Medicine Program

Baylor College of Medicine
Barbara Jordan Hospital District-Walsh General Hospital
Lyndon B Johnson General Hospital
Methodist Hospital
St Luke's Episcopal Hospital
Texas Children's Hospital
Veterans Affairs Medical Center (Houston)

Program Director: Neela R. Lakshmi, MD
Baylor College of Medicine
Dept of Radiology
One Baylor Plaza
Houston, TX 77030-4688
713 798-6692

Length: 4 Year(s) Total Positions: 25 (GYI: 4)
Subspecialties: VTR
Program ID: 420-48-21-197

Temple

Texas A&M College of Medicine-Scott and White Program

Scott and White Memorial Hospital

Program Director: Michael L Nipper, MD
Scott and White Memorial Hospital
2401 S 31st St
Temple, TX 76508-0001
800 289-4463

Length: 4 Year(s) Total Positions: 16 (GYI: 4)
Program ID: 420-46-11-198

Utah

Salt Lake City

University of Utah Program

University of Utah Medical Center
Veterans Affairs Medical Center (Salt Lake City)

Program Director: Paula J Woodward, MD
University of Utah School of Medicine
Dept of Radiology
50 N Medical Dr
Salt Lake City, UT 84132
801 585-7693

Length: 4 Year(s) Total Positions: 20 (GYI: 4)
Subspecialties: NR,RNR,VR
Program ID: 420-49-21-199

Vermont

Burlington

Medical Center Hospital of Vermont Program

Medical Center Hospital of Vermont

Program Director: Christopher S Morris, MD
Medical Center Hospital of Vermont
Dept of Radiology
111 Colchester Ave
Burlington, VT 05401
802 656-3583

Length: 4 Year(s) Total Positions: 12 (GYI: 6)
Program ID: 420-46-31-200

Virginia

Charlottesville

University of Virginia Program

University of Virginia Medical Center

Program Director: Spencer B Gay, MD
University of Virginia Hospitals
Box 170
Charlottesville, VA 22908
804 924-8572

Length: 4 Year(s) Total Positions: 12 (GYI: 6)
Subspecialties: RNR
Program ID: 420-51-11-201

*Updated information not provided.*
Norfolk
Eastern Virginia Graduate School of Medicine Program
Eastern Virginia Graduate School of Medicine
DePaul Medical Center
Sentara Norfolk General Hospital
Veterans Affairs Medical Center (Hampton)
Program Director:
Anne C Brusow, MD
Eastern Virginia Medical School
Hofheimer Hall Ste 541
405 Fairfax Ave
Norfolk, VA 23507-1912
804 446-9892
Length: 4 Year(s) Total Positions: 14 (GYT: 0)
Program ID: 420-61-21-202

Richmond
Medical College of Virginia/Virginia Commonwealth University Program
Medical College of Virginia/Virginia Commonwealth University
Hunter Holmes McGuire VA Medical Center (Richmond)
Medical College of Virginia Hospitals
Program Director:
Russell A Blinder, MD
MC/Virginia Commonwealth Univ
Box 892989
Richmond, VA 23298-0299
804 882-3525
Length: 4 Year(s) Total Positions: 36 (GYT: 7)
Subspecialties: RNR
Program ID: 420-61-21-203

Washington
Seattle
University of Washington Program
University of Washington School of Medicine
Children's Hospital and Medical Center
Hatfield Medical Center
University of Washington Medical Center
Veterans Affairs Medical Center (Seattle)
Program Director:
Charles A Schrumpf Jr, MD
Lee B Thaler, MD
University Hospital
Dept of Radiology SB-06
1590 NE Pacific
Seattle, WA 98101
206 543-3220
Length: 4 Year(s) Total Positions: 40 (GYT: 3)
Subspecialties: PDR,RNR,VIR
Program ID: 420-54-21-205

Virginia Mason Medical Center Program
Virginia Mason Medical Center
Program Director:
Ingrid M Petersen, MD
Virginia Mason Medical Center
Office of Housestaff Aff (H7-ME)
820 Seneca St
Seattle, WA 98101
206 688-0779
Length: 4 Year(s) Total Positions: 10 (GYT: 1)
Program ID: 420-54-21-206

Spokane
Sacred Heart Medical Center Program
Sacred Heart Medical Center
Program Director:
Royce L Zell, MD
Sacred Heart Medical Center
101 W Eighth Ave
PO Box 2955
Spokane, WA 99220-2555
509 465-3300
Length: 4 Year(s) Total Positions: 10 (GYT: 1)
Program ID: 420-64-31-207

Tacoma
Madigan Army Medical Center Program
Madigan Army Medical Center
Program Director:
Lt Gregory N Bender, MD
Madigan Army Medical Center
Dept of Radiology
Attn: HHSC-R
Tacoma, WA 98431-5000
256 666-8238
Length: 4 Year(s) Total Positions: 20 (GYT: 0)
Program ID: 420-54-21-209

West Virginia
Morgantown
West Virginia University Program
West Virginia University Hospitals
Program Director:
Judith S Schreiman, MD
Robert C Byrd Health Science Center
Dept of Radiology
PO Box 9205
Morgantown, WV 26506-9205
304 293-3002
Length: 4 Year(s) Total Positions: 2 (GYT: 2)
Program ID: 420-55-21-208

Wisconsin
Madison
University of Wisconsin Program
University of Wisconsin Hospital and Clinics
William S Middleton Veterans Hospital
Program Director:
Pamela A Propec, MD
David Fisher, MD
University of Wisconsin
EH011 Clin Sci Ctr
600 Highland Ave
Madison, WI 53792-3352
608 263-8310
Length: 4 Year(s) Total Positions: 35 (GYT: 3)
Subspecialties: RNR,VIR
Program ID: 420-56-21-210

* Updated information not provided.
Accredited Programs in Rheumatology (Internal Medicine)

Rheumatology (Internal Medicine)

California

La Jolla
Scripps Clinic and Research Foundation Program
Scripps Clinic and Research Foundation Program
Program Director:
Ken P. Pischel, MD PhD
Dept of Graduate Med Educ/SSC
Scripps Clinic & Research Fnd
10668 N Torrey Pines Rd
La Jolla, CA 92037-1068
619 554-8819
Length: 2 Year(s) Total Positions: 3
Program ID: 160-05-21-042

Loma Linda
Loma Linda University Program
Loma Linda University Medical Center
Jerry L. Pettis Memorial Veterans Hospital
Program Director:
Keith K. Colburn, MD
Loma Linda University Medical Center
Dept of Internal Medicine
PO Box 2000
Loma Linda, CA 92354
714 524-4009
Length: 2 Year(s) Total Positions: 2
Program ID: 160-05-21-090

Los Angeles
Cedars-Sinai Medical Center Program
Cedars-Sinai Medical Center
Program Director:
James R. Riehl, MD
Cedars-Sinai Medical Center
Dept of Internal Med
8700 Beverly Blvd
Los Angeles, CA 90048
310 855-5165
Length: 2 Year(s) Total Positions: 3
Program ID: 160-05-11-078

UCLA Medical Center Program
UCLA School of Medicine
UCLA Medical Center
Veterans Affairs Medical Center (West Los Angeles)
Program Director:
Beverly R. Hahn, MD
UCLA Sch of Med
Ctr for the Hllth Scien
Los Angeles, CA 90024-1736
310 825-7961
Length: 2 Year(s) Total Positions: 5
Program ID: 160-05-11-091

University of Southern California Program
Los Angeles County- USC Medical Center
LAC-Brunch Los Amigos Medical Center
Program Director:
David A. Horwitz, MD
University of Southern California Medical Center
2111 N Zonal Ave Bldg #711
Los Angeles, CA 90033
213 342-1046
Length: 2 Year(s)
Program ID: 160-05-21-031

Los Angeles (Sepulveda)
UCLA San Fernando Valley Program
Veterans Affairs Medical Center (Sepulveda)
LAC-Olive View Medical Center
Program Director:
Richard Weisbart, MD
Veterans Administration Medical Center
16111 Plummer St
Sepulveda, CA 91343
818 895-1004
Length: 2 Year(s) Total Positions: 2
Program ID: 160-05-11-092

Orange
University of California (Irvine) Program
University of California (Irvine) Medical Center
Veterans Affairs Medical Center (Long Beach)
Program Director:
George J. Prieu, MD
Univ of Califrvine Med Ctr Dept of Internal Medicine
101 City Bldg
Orange, CA 92865
714 828-5907
Length: 2 Year(s)
Program ID: 160-05-21-108

Sacramento
University of California (Davis) Program
University of California (Davis) Medical Center
Program Director:
James C. Leek, MD
University of California Davis Medical Center
POLB III-3
Sacramento, CA 95817
916 734-5480
Length: 2 Year(s) Total Positions: 2
Program ID: 160-05-21-106

San Diego
University of California (San Diego) Program
University of California (San Diego) Medical Center
Veterans Affairs Medical Center (San Diego)
Program Director:
Harry G. Bluestein, MD
UCSD Medical Center Medicine 8417
200 W Arbor Jr
San Diego, CA 92103-8417
619 543-5982
Length: 2 Year(s) Total Positions: 5
Program ID: 160-05-21-123

San Francisco
University of California (San Francisco) Program
University of California (San Francisco) School of Medicine
San Francisco General Hospital Medical Center
University of California (San Francisco) Medical Center
Veterans Affairs Medical Center (San Francisco)
Program Director:
Kenneth E. Sack, MD
University of California
400 Parnassus Ave Bldg A640
San Francisco, CA 94143-0285
415 476-5193
Length: 2 Year(s) Total Positions: 8
Program ID: 160-05-21-109

* Updated information not provided.

Arkansas

Little Rock
University of Arkansas for Medical Sciences Program
University of Arkansas College of Medicine
Joaquin McClellan Memorial Veterans Hospital
University Hospital of Arkansas
Program Director:
Hugh E. Jabson, MD
University of Arkansas for Medical Sciences
Div of Rheumatology 506
4301 W Markham
Little Rock, AR 72205-7199
501 686-0778
Length: 2 Year(s) Total Positions: 1
Program ID: 160-04-21-145

Arizona

Tucson
University of Arizona Program
University of Arizona College of Medicine
University Medical Center
Veterans Affairs Medical Center (Tucson)
Program Director:
Michael J. Masicak, MD
University of Arizona Dept of Internal Medicine
Rheumatology Allergy Immunology Sec
1501 N Campbell Ave
Tucson, AZ 85724
520 726-2678
Length: 2 Year(s) Total Positions: 3
Program ID: 160-03-21-076

* Updated information not provided.

758 Graduate Medical Education Directory
San Jose
Santa Clara Valley Medical Center Program
Santa Clara Valley Medical Center
Program Director: Thomas Bush, MD
Santa Clara Valley Medical Center Antichritis Clinic
750 S Bascom ave
San Jose, CA 95128
408 885-4673
Length: 2 Year(s) Total Positions: 1
Program ID: 160-05-31-128

Stanford
Stanford University Program* Stanford University Hospital Veterans Affairs Medical Center (Palo Alto)
Program Director: James L McGuire, MD
Stanford University Hospital Dept of Medicine
33336 Doelger Dr
Stanford, CA 94305
415 725-5310
Length: 2 Year(s) Total Positions: 16
Program ID: 190-04-21-010

Torrance
Los Angeles County-Harbor-UCLA Medical Center Program* Los Angeles County Harbor-UCLA Medical Center
Program Director: James S Louie, MD
Harbor-UCLA Medical Center
1201 W Carson St
Torrance, CA 90509
310 242-3867
Length: 2 Year(s) Total Positions: 2
Program ID: 160-05-11-124

Colorado
Denver
University of Colorado Program University of Colorado Health Sciences Center Denver Health and Hospitals Veterans Affairs Medical Center (Denver)
Program Director: William P Arend, MD
Univ of Colorado Health Sciences Center Div of Rheumatology
Box B 115 4200 E Ninth Ave
Denver, CO 80220
303 270-6686
Length: 2 Year(s) Total Positions: 4
Program ID: 160-07-31-436

Connecticut
Farmington
University of Connecticut Program University of Connecticut School of Medicine
Univ of Connecticut Health Center John Dempsey Hospital Veterans Affairs Medical Center (Newington)
Program Director: Naomi F Rothfield, MD
University of Connecticut Health Center
Dept of Medicine
263 Farmington Ave
Farmington, CT 06030
203 679-5895
Length: 2 Year(s) Total Positions: 3
Program ID: 150-08-31-001

New Haven
Yale-New Haven Medical Center Program Yale-New Haven Hospital St Mary's Hospital Veterans Affairs Medical Center (West Haven) Waterbury Hospital Health Center
Program Director: Joseph B Craft, MD
Yale University School of Medicine
333 Cedar St
PO Box 208031
New Haven, CT 06540
203 752-5554
Length: 2 Year(s) Total Positions: 7
Program ID: 150-08-21-017

District of Columbia
Washington
George Washington University Program George Washington University School of Medicine Children's National Medical Center George Washington University Hospital
Program Director: Patience White, MD
George Washington Univ Hosp Dept of Medicine
210 Pennsylvania Ave NW
Rm 4-405
Washington, DC 20037
202 994-4044
Length: 2 Year(s) Total Positions: 2
Program ID: 150-19-31-079

Georgetown University Program Georgetown University Hospital Veterans Affairs Medical Center (Washington, DC)
Program Director: Paul Katz, MD
Georgetown University Hospital
Dept of Medicine
3800 Reservoir Rd NW G020
Washington, DC 20057-5197
202 387-3233
Length: 2 Year(s) Total Positions: 4
Program ID: 150-19-41-000

Howard University Program* Howard University Hospital District of Columbia General Hospital
Program Director: Calvin Griffin, MD
Howard University Hospital
Dept of Medicine
2041 Georgia Ave NW
Washington, DC 20009
202 865-6001
Length: 2 Year(s) Program ID: 150-19-21-061

Walter Reed Army Medical Center Program Walter Reed Army Medical Center
Program Director: Gregory J Dennis, MD
Chief Rheumatology Service
Walter Reed Army Medical Center
6255 16th St NW
Washington, DC 20037-5601
202 782-6596
Length: 2 Year(s) Total Positions: 6
Program ID: 150-10-11-063

Washington Hospital Center Program Washington Hospital Center
Program Director: Werner P Barth, MD
Washington Hospital Center
110 Irving St NW
Washington, DC 20010
202 877-6274
Length: 2 Year(s) Total Positions: 2
Program ID: 150-10-11-094

Florida
Gainesville
University of Florida Program University of Florida College of Medicine Shands Hospital at the University of Florida Veterans Affairs Medical Center (Gainesville)
Program Director: Ralph C Williams Jr, MD
University of Florida Dept of Medicine
Box 100277
J Hillis Miller Health Ctr
Gainesville, FL 32610
904 392-9060
Length: 2 Year(s) Total Positions: 3
Program ID: 150-11-21-025

Miami
University of Miami-Jackson Memorial Medical Center Program University of Miami-Jackson Memorial Medical Center Veterans Affairs Medical Center (Miami)
Program Director: Norman Gottlieb, MD
University of Miami Shands Hospital
890 NW 17th Ave PDA 10
Miami, FL 33136
305 445-9542
Length: 2 Year(s) Program ID: 150-11-21-125

* Updated information not provided.
Tampa
University of South Florida Program
University of South Florida College of Medicine
James A Haley Veterans Hospital
Tampa General Healthcare
Program Director:
Frank B Vassey, MD
12901 Bruce B Downs Blvd Box 19
Tampa, FL 33612-4799
813 974-5693
Length: 2 Year(s)  Total Positions: 1
Program ID: 140-11-21-026

Georgia
Atlanta
Emory University Program
Emory University School of Medicine
Emory University Hospital
Grady Memorial Hospital
Veterans Affairs Medical Center (Atlanta)
Program Director:
Charles A. Nobilo, MD
Rheumatology Div
VA Medical Center
1200 Clifton Road
Atlanta, GA 30322
404 321-6111
Length: 2 Year(s)  Total Positions: 4
Program ID: 150-13-21-065

Augusta
Medical College of Georgia Program
Medical College of Georgia Hospital and Clinics
Program Director:
Joseph P. Bailey Jr, MD
Medical College of Georgia
Dept of Medicine
BiW 544
Augusta, GA 30912-3146
706 721-2361
Length: 2 Year(s)  Total Positions: 3
Program ID: 150-12-21-002

Illinois
Chicago
McGaw Medical Center of Northwestern University Program
Northwestern University Medical School
Northwestern Memorial Hospital
Veterans Affairs Lake Shore Medical Center (Chicago)
Program Director:
Richard M Pope, MD
Northwestern University Medical School
303 E Chicago Ave
Ward 3-315
Chicago, IL 60611
312 996-6197
Length: 2 Year(s)  Total Positions: 2
Program ID: 150-16-21-051

Rush-Presbyterian-St Luke's Medical Center Program*
Rush-Presbyterian-St Luke's Medical Center
Program Director:
Thomas J. Schulte, MD PhD
Rush-Presbyterian-St Luke's Medical Center
1653 W Congress Plwy Rm 304 JRB
Chicago, IL 60612-3864
312 942-8269
Length: 2 Year(s)  Total Positions: 3
Program ID: 160-16-11-096

University of Chicago Program
University of Chicago Hospitals
Program Director:
Daniel A Alpert, MD
University of Chicago Rheumatology Sect
5841 S Maryland Ave MC0030
Chicago, IL 60637-1470
312 702-6885
Length: 2 Year(s)  Total Positions: 2
Program ID: 150-16-21-108

University of Illinois College of Medicine at Chicago Program
University of Illinois College of Medicine at Chicago
Mercy Hospital and Medical Center
Michael Reese Hospital and Medical Center
Veterans Affairs Hospitals (Chicago)
Program Director:
William S. Stover, MD
University of Illinois at Chicago
Medicine/Rheumatology
840 S Wood St MC 7FS
Chicago, IL 60612-7233
312 996-6035
Length: 2 Year(s)  Total Positions: 4
Program ID: 150-16-21-097

Maywood
Loyola University Program
Foster G. McGaw Hospital-Loyola University of Chicago
Edward Hines Jr Veterans Affairs Hospital
Program Director:
Walter G. Barr, MD
Herbert M Rubinstein, MD
Loyola University Medical Center
Div of Rheumatology
2160 S First Ave
Maywood, IL 60153
708 281-3313
Length: 2 Year(s)  Total Positions: 4
Program ID: 150-16-21-003

Indiana
Indianapolis
Indiana University Medical Center Program
Indiana University Medical Center
Program Director:
Kenneth Brandt, MD
Indiana University Medical Center Dept of Medicine
541 Clinical Dr Sm 492 Clinic Bld
Indianapolis, IN 46202-5103
317 274-4225
Length: 2 Year(s)  Total Positions: 5
Program ID: 150-17-21-110

Iowa
Iowa City
University of Iowa Hospitals and Clinics Program
University of Iowa Hospitals and Clinics
Program Director:
Robert F. Asman, MD
University of Iowa Hospitals and Clinics
Dept of Internal Medicine
200 Hawkins Dr
Iowa City, IA 52242-1009
319 335-2287
Length: 2 Year(s)  Total Positions: 6
Program ID: 150-18-21-067

Kansas
Kansas City
University of Kansas Medical Center Program
University of Kansas School of Medicine
University of Kansas Medical Center
Program Director:
Daniel J. Stoebchul, MD
University of Kansas Medical Center
3901 Rainbow Blvd
Kansas City, KS 66168-7317
913 556-6049
Length: 2 Year(s)  Total Positions: 2
Program ID: 150-19-21-060

Kentucky
Lexington
University of Kentucky Medical Center Program
University of Kentucky Medical Center
Veterans Affairs Medical Center (Lexington)
Program Director:
Rita M. Ryan, MD PhD
University of Kentucky Medical Center
5515 Lexington, KY 40536-0524
606 253-6700
Length: 2 Year(s)  Total Positions: 2
Program ID: 150-20-21-140

Louisville
University of Louisville Program
University of Louisville School of Medicine
University of Louisville Hospital
Veterans Affairs Medical Center (Louisville)
Program Director:
Eun S. Harris, MD
University of Louisville Dept of Medicine
Ambulatory Care Bldg 3rd Fl
Louisville, KY 40222
502 852-5233
Length: 2 Year(s)  Total Positions: 2
Program ID: 150-20-21-062

* Updated information not provided.
Accredited Programs in Rheumatology (Internal Medicine)

Louisiana

New Orleans

Alton Ochsner Medical Foundation Program
Alton Ochsner Medical Foundation
Program Director: Robert J. Quinlan, MD
Alton Ochsner Medical Foundation
Dept of Grad Med Educ
1516 Jefferson Hwy
New Orleans, LA 70121
504 842-3520
Length: 2 Year(s) Total Positions: 2
Program ID: 150-21-23-106

Louisiana State University Program
Louisiana State University School of Medicine
Medical Center of Louisiana at New Orleans LSU Division Medical Center of Louisiana University Hospital Campus
Program Director: Luis R. Espinoza, MD
LSU Med Ctr
642 Tulane Ave
Section of Rheumatology
New Orleans, LA 70112-2822
504 568-4683
Length: 2 Year(s) Total Positions: 2
Program ID: 150-21-21-031

Shreveport

Louisiana State University (Shreveport) Program
Louisiana State University Medical Center-Shreveport Overton Brooks Veterans Affairs Medical Center Program
Program Director: Robert E. Wolf, MD
Louisiana State University Medical Center Hospital
Med Educ (Rheumatology)
P O Box 32002
Shreveport, LA 71130-3832
318 675-5830
Length: 2 Year(s) Total Positions: 2
Program ID: 150-21-21-080

Maryland

Baltimore

Johns Hopkins University Program
Johns Hopkins University School of Medicine
Johns Hopkins Hospital
Program Director: Fredrick M Wigley, MD
Johns Hopkins University
Div of Rheumatology
720 Rutland Ave 1069 Ross Bldg
Baltimore, MD 21205
410 955-3275
Length: 2 Year(s) Total Positions: 6
Program ID: 150-23-11-062

University of Maryland Program
University of Maryland Medical System
Veterans Affairs Medical Center (Baltimore)
Program Director: Marc C Hochberg, MD
University of Maryland
419 W Redmond St Ste 620
Baltimore, MD 21201-1734
410 538-2673
Length: 2 Year(s) Total Positions: 1
Program ID: 150-23-21-131

Bethesda

National Institutes of Health Clinical Center Program
NIH Warren Grant Magnuson Clinical Center
Program Director: John H Kliippel, MD
NIH Warren Grant Magnuson Clinical Center
Bldg 10 Rm 9N-228
Bethesda, MD 20892
301 496-3874
Length: 2 Year(s) Total Positions: 6
Program ID: 150-23-21-141

Massachusetts

Boston

Boston University Program
Boston University School of Medicine
Boston City Hospital
Boston University Medical Center University Hospital Veterans Affairs Medical Center (Boston)
Program Director: Alan A Cohen, MD
Boston University School of Medicine
80 E Concord St K5
Boston, MA 02118-2284
617 638-4100
Length: 2 Year(s) Total Positions: 4
Program ID: 150-24-21-111

Brigham and Women’s Hospital Program
Brigham and Women’s Hospital
Program Director: Ronald J Anderson, MD
Brigham and Women’s Hospital Dept of Rheumatology
Admin B2
75 Francis St
Boston, MA 02115
617 732-5045
Length: 2 Year(s) Total Positions: 10
Program ID: 150-24-21-004

Massachusetts General Hospital Program
Massachusetts General Hospital
Program Director: Stephen M Krane, MD
Massachusetts General Hospital
Fruit St
Boston, MA 02114
617 739-2970
Length: 2 Year(s)
Program ID: 150-24-21-038

New England Medical Center Hospitals Program
New England Medical Center Hospitals
Program Director: Allen C Stoers, MD
New England Medical Center #406
579 Washington St
Boston, MA 02111
617 963-5789
Length: 2 Year(s) Total Positions: 2
Program ID: 150-24-21-005

Wayne State University/Detroit Medical Center Program
Wayne State University School of Medicine
Detroit Receiving Hospital and University Health Center
Harper Hospital
Hutzel Hospital
Veterans Affairs Medical Center (Allen Park)
Program Director: P R Fernandez-Madrid, MD PhD
Hutzel Hospital
4707 St Antoine
Detroit, MI 48201
313 577-1134
Length: 2 Year(s) Total Positions: 6
Program ID: 150-23-11-080

Worcester

University of Massachusetts Medical Center Program
University of Massachusetts Medical Center
Program Director: Robert B Zuerier, MD
University of Massachusetts Medical Center
55 Lake Ave N
Worcester, MA 01655-0335
508 856-2146
Length: 2 Year(s) Total Positions: 2
Program ID: 150-24-21-006

Michigan

Ann Arbor

University of Michigan Program
University of Michigan Hospitals
Program Director: David A Fox, MD
University of Michigan Hospitals
800 W Medical Center Dr
Ann Arbor, MI 48109-0388
313 853-5966
Length: 2 Year(s) Total Positions: 7
Program ID: 150-23-21-053

Detroit

Henry Ford Hospital Program
Henry Ford Hospital
Program Director: Howard Duncan, MD
Henry Ford Hospital
2790 W Grand Blvd
Detroit, MI 48202
313 877-3543
Length: 2 Year(s) Total Positions: 3
Program ID: 150-23-11-090

Sinai Hospital Program
Sinai Hospital
Program Director: Samuel Indenbaum, MD
Sinai Hospital
Medical Staff Office
6707 W Outer Dr
Detroit, MI 48232-2699
313 493-5793
Length: 2 Year(s) Total Positions: 2
Program ID: 150-23-11-185

* Updated information not provided.
Minnesota

Minneapolis

Hennepin County Medical Center Program
Hennepin County Medical Center
Program Director: Peter A Schlesinger, MD
Hennepin County Medical Center
701 Park Ave S
Minneapolis, MN 55415-8119
612 347-3704
Length: 2 Year(s) Total Positions: 1
Program ID: 150-28-21-073

University of Minnesota Program
University of Minnesota Medical School
St Paul-Ramsey Medical Center
University of Minnesota Hospital and Clinic
Veterans Affairs Medical Center (Minneapolis)
Program Director: Ronald P Meenar, MD
Univ of Minnesota Hosp & Clin Dept of Med
515 Delaware St SE
14-54 Moos Tower
Minneapolis, MN 55455
612 625-1165
Length: 2 Year(s) Total Positions: 3
Program ID: 150-28-21-082

Rochester

Mayo Graduate School of Medicine Program
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic Methodist Hospital
St Mary's Hospital of Rochester
Program Director: Robert M Valente, MD
8559 MSIM Application Processing Center
Siebens 5th Fl
Mayo Graduate School of Medicine
Rochester, MN 55905
507 284-3125
Length: 2 Year(s) Total Positions: 5
Program ID: 150-28-21-082

Missouri

Columbia

University of Missouri-Columbia Program
University of Missouri-Columbia School of Medicine
Harry S Truman Memorial Veterans Hospital
University of Children's Hospital
Program Director: Sara E Walker, MD
University of Missouri-Columbia
Dept of Med One Hospital Dr
NA257 Health Sciences Center
Columbia, MO 65212
314 448-3511
Length: 2 Year(s) Total Positions: 6
Program ID: 150-28-21-054

New Hampshire

Lebanon

Dartmouth-Hitchcock Medical Center Program
Dartmouth-Hitchcock Memorial Hospital
Veterans Affairs Medical Center (White River Junction)
Program Director: William Rigby, MD
Dartmouth-Hitchcock Medical Center
Connecticut Tissue Disease Section
One Medical Center Dr
Lebanon, NH 03756-0001
603 660-7700
Length: 2 Year(s) Total Positions: 2
Program ID: 150-32-21-107

New Jersey

Camden

UMDNJ-Robert Wood Johnson Medical School (Camen) Program
Cooper Hospital-University Medical Center
Program Director: Antonio J Reginato, MD
Carolyn O'Connor, MD
Cooper Hospital-University Medical Center
Education and Research Bldg
401 Hadden Ave
Camden, NJ 08103
609 767-4818
Length: 2 Year(s) Total Positions: 2
Program ID: 150-32-21-113

New Mexico

Albuquerque

University of New Mexico Program
University of New Mexico School of Medicine
Veterans Affairs Medical Center (Albuquerque)
Program Director: Arthur D Bankhurst, MD
University of New Mexico School of Medicine
Dept of Internal Med
2211 Lomas NE
Albuquerque, NM 87108
505 277-4761
Length: 2 Year(s) Total Positions: 2
Program ID: 150-34-21-109

* Updated Information not provided.
New York

Albany
Albany Medical Center Program*  
Albany Medical Center Hospital  
Veterans Affairs Medical Center (Albany)  
Program Director:  
Richard Bynes, MD  
Dept of Medicine  
Div of Rheumatology A-100  
Albany Medical College  
Albany, NY 12208-3479  
518 445-5342  
Length: 2 Year(s)  
Total Positions: 2  
Program ID: 150-35-81-020

Bronx

Albert Einstein College of Medicine Program  
Albert Einstein College of Medicine of Yeshiva University  
Bronx Municipal Hospital Center  
Montefiore Medical Center-Henry and Lucy Moses Division  
Program Director:  
Anne Davidson, MD  
1300 Morris Park Ave  
Div of Rheumatology  
Ros USE  
Bronx, NY 10461  
718 439-4107  
Length: 2 Year(s)  
Total Positions: 5  
Program ID: 150-35-21-075

Brooklyn

SUNY Health Science Center at Brooklyn Program  
SUNY HSC at Brooklyn College of Medicine  
Kings County Hospital Center  
University Hospital-SUNY Health Science Center at Brooklyn  
Veterans Affairs Medical Center (Brooklyn)  
Program Director:  
Ellen M Guzder, MD  
SUNY Health Science Center at Brooklyn  
450 Clarkson Ave Box 42  
Brooklyn, NY 11203  
718 276-1662  
Length: 2 Year(s)  
Total Positions: 5  
Program ID: 150-35-21-069

Buffalo

SUNY at Buffalo Graduate Medical-Dental Education Consortium Program  
SUNY at Buffalo Grad Medical-Dental Education Consortium  
Erie County Medical Center  
Veterans Affairs Medical Center (Buffalo)  
Program Director:  
Floyd A Green, MD  
Dept of Medicine  
VA Medical Center  
3406 Bailey Ave  
Buffalo, NY 14215  
716 892-5541  
Length: 2 Year(s)  
Total Positions: 2  
Program ID: 160-35-81-007

Manhasset

North Shore University Hospital Program  
North Shore University Hospital  
Program Director:  
Richard A Partie, MD  
Nicholas Chiocca, MD  
North Shore University Hospital  
Dept of Medicine  
Manhasset, NY 11030  
516 562-4392  
Length: 2 Year(s)  
Total Positions: 2  
Program ID: 150-35-21-121

Mineola

Winthrop-University Hospital Program  
Winthrop-University Hospital Nassau County Medical Center  
Program Director:  
Steven E Caruso, MD  
Winthrop-University Hospital  
Rm 400  
222 Station Plaza N  
Mineola, NY 11501  
516 663-2097  
Length: 2 Year(s)  
Total Positions: 3  
Program ID: 150-35-21-142

New Hyde Park

Albert Einstein College of Medicine at Long Island Jewish Medical Center Program  
Long Island Jewish Medical Center  
Queens Hospital Center  
Program Director:  
Robert A Greenwald, MD  
Long Island Jewish Medical Center  
270-35 76th Ave  
New Hyde Park, NY 11040  
718 470-7251  
Length: 2 Year(s)  
Total Positions: 2  
Program ID: 150-35-21-101

New York

Mount Sinai School of Medicine Program  
Mount Sinai School of Medicine  
Mount Sinai Medical Center  
Queens Hospital Center  
Program Director:  
Harry Sperla, MD  
Mount Sinai Medical Center  
Annenberg 5 Bm 507-F  
One Gustave Levy Pl Box 2344  
New York, NY 10029-6574  
212 241-6792  
Length: 2 Year(s)  
Total Positions: 2  
Program ID: 150-35-31-114

New York Hospital/Cornell Medical Center Program  
New York Hospital  
Program Director:  
Charles L Christian, MD  
New York Hospital  
525 E 88th St  
New York, NY 10021  
212 606-1328  
Length: 2 Year(s)  
Total Positions: 6  
Program ID: 150-35-21-122

New York University Medical Center Program  
New York University Medical Center  
Bellevue Hospital Center  
Beth Israel Medical Center  
Hospital for Joint Diseases Orthopaedic Institute  
Program Director:  
Gerald Weissmann, MD  
Stephen Abramson, MD  
New York University Medical Center  
500 First Ave  
New York, NY 10016  
212 263-3136  
Length: 2 Year(s)  
Total Positions: 10  
Program ID: 150-35-21-083

Presbyterian Hospital in the City of New York Program*  
Presbyterian Hospital in the City of New York  
Program Director:  
Leonard Chess, MD  
Presbyterian Hospital in the City of New York  
522 W 168th St  
New York, NY 10032  
212 365-3000  
Length: 2 Year(s)  
Total Positions: 5  
Program ID: 150-35-11-030

St Luke's-Roosevelt Hospital Center (St Luke's) Program  
St Luke's-Roosevelt Hospital Center  
St Luke's-Roosevelt Hospital Center-St Luke's Division  
Program Director:  
Robert C Labita, MD PhD  
St Luke's-Roosevelt Hospital Center  
1000 York Ave  
New York, NY 10019  
212 289-6650  
Length: 2 Year(s)  
Total Positions: 1  
Program ID: 150-35-21-197

Rochester

University of Rochester Program  
Strong Memorial Hospital of the University of Rochester  
Monroe Community Hospital  
Program Director:  
John F Loddy, MD  
Clinical Immunology/Rheumatology Unit  
University of Rochester Med Ctr  
601 Elmwood Ave Box 696  
Rochester, NY 14642-8965  
716 675-2991  
Length: 2 Year(s)  
Total Positions: 4  
Program ID: 150-35-11-127

Stony Brook

SUNY at Stony Brook Program  
University Hospital-SUNY at Stony Brook  
Veterans Affairs Medical Center (Northport)  
Program Director:  
Lee D Kaufman, MD  
Div of Allergy Rheumatology & Clinical Immunology  
SUNY Health Sciences Center  
718 840-2450  
Stony Brook, NY 11794-8161  
516 444-2272  
Length: 2 Year(s)  
Total Positions: 2  
Program ID: 150-35-21-010

* Updated information not provided.

Graduate Medical Education Directory 763
Accredited Programs in Rheumatology (Internal Medicine)

Syracuse

SUNY Health Science Center at Syracuse Program
University Hospital-SUNY Health Science Center at Syracuse
Veterans Affairs Medical Center (Syracuse)
Program Director:
Paul E Phillips, MD
Dept of Medicine
SUNY Health Science Center
750 E Adams St
Syracuse, NY 13210
315 446-4184
Length: 2 Year(s)  Total Positions: 3
Program ID: 150-35-21-674

Valhalla

New York Medical College (Cabrini) Program
New York Medical College Cabrini Medical Center
Program Director:
Girolamo Capparelli, MD
Cabrini Medical Center
297 E 10th St
New York, NY 10003
212 965-6565
Length: 2 Year(s)  Total Positions: 2
Program ID: 150-35-31-668

New York Medical College (Metropolitan) Program*
New York Medical College Metropolitan Hospital Center Westchester County Medical Center
Program Director:
Arthur Weinstein, MD
Kurt Altman, MD
Metropolitan Hospital Center
1901 First Ave
New York, NY 10029
212 290-0771
Length: 2 Year(s)
Program ID: 150-35-21-139

New York Medical College at Westchester County Medical Center Program*
New York Medical College Franklin D Roosevelt Veterans Affairs Hospital Westchester County Medical Center
Program Director:
Arthur Weinstein, MD
Div of Rheumatic Diseases and Immunology
Vosburgh Pavilion
New York Medical College
Valhalla, NY 10595
914 963-8444
Length: 2 Year(s)  Total Positions: 3
Program ID: 150-35-11-040

North Carolina

Chapel Hill

University of North Carolina Hospitals Program
University of North Carolina Hospitals
Program Director:
John B Winfield, MD
University of North Carolina School of Medicine
Div of Rheumatology & Immunology
802 FLOB CB 7289
Chapel Hill, NC 27599-7289
919 966-4191
Length: 2 Year(s)  Total Positions: 3
Program ID: 150-35-21-102

Durham

Duke University Program
Duke University Medical Center
Program Director:
Barton P Hayes, MD
Duke University Medical Center
Box 2252
Durham, NC 27710
919 844-3020
Length: 2 Year(s)  Total Positions: 9
Program ID: 150-35-21-193

Winston-Salem

Bowman Gray School of Medicine Program
North Carolina Baptist Hospital
Program Director:
Gary M Kammert, MD
Bowman Gray School of Medicine
Section on Rheumatology
Medical Center Blvd
Winston Salem, NC 27117-1058
910 716-4200
Length: 2 Year(s)  Total Positions: 4
Program ID: 150-35-21-111

Ohio

Cincinnati

University of Cincinnati Hospital Group Program
University of Cincinnati Hospital Children’s Hospital Medical Center
Veterans Affairs Medical Center (Cincinnati)
Program Director:
Evelyn V Haus, MD
University of Cincinnati
Mail Location 0583
231 Bethesda Ave
Cincinnati, OH 45227-0583
513 588-4791
Length: 2 Year(s)  Total Positions: 2
Program ID: 150-35-31-405

Cleveland

Case Western Reserve University (MetroHealth) Program
MetroHealth Medical Center
Program Director:
Irving Koshner, MD
MetroHealth Medical Center
2500 MetroHealth Dr
Cleveland, OH 44109-1986
216 456-4874
Length: 2 Year(s)  Total Positions: 2
Program ID: 150-35-11-116

Case Western Reserve University Program
University Hospitals of Cleveland
Veterans Affairs Medical Center (Cleveland)
Program Director:
Roland W Moskowitz, MD
University Hospitals of Cleveland
Dept of Medicine/Rheumatology
2074 Abington Rd
Cleveland, OH 44106-5000
216 844-3163
Length: 2 Year(s)  Total Positions: 3
Program ID: 150-35-21-115

Cleveland Clinic Foundation/St Vincent Charity Hospital Program
Cleveland Clinic Foundation
Program Director:
Brian F Mandell, MD PhD
Cleveland Clinic Pod
9000 Euclid Ave TT32
Dept of Rheumatology
Cleveland, OH 44195-5242
216 444-5680
Length: 2 Year(s)  Total Positions: 7
Program ID: 150-35-12-117

Columbus

Ohio State University Program
Ohio State University Medical Center
Program Director:
N Paul Hudson, MD
Ohio State University
Davis Med Research Ctr
480 W Ninth Ave
Columbus, OH 43210
614 293-6093
Length: 2 Year(s)  Total Positions: 2
Program ID: 150-35-21-144

Oklahoma

Oklahoma City

University of Oklahoma Health Sciences Center Program
University of Oklahoma College of Medicine-Oklahoma City
University Hospital and Clinics
Veterans Affairs Medical Center (Oklahoma City)
Program Director:
Morris Reichlin, MD
University of Oklahoma Health Sciences Center
PO Box 28901
OMRF Mail Stop 845 C-368
Oklahoma City, OK 73190
405 271-7765
Length: 2 Year(s)  Total Positions: 3
Program ID: 150-35-21-366

* Updated information not provided.
Oregon
Portland
Oregon Health Sciences University Program
Oregon Health Sciences University Hospital
Veterans Affairs Medical Center (Portland)
Program Director:
Robert M Bennett, MD
Oregon Health Sciences University
Dept of Medicine L230A
Portland, OR 97201
503-278-8963
Length: 2 Year(s)
Program ID: 150-41-11-118

Pennsylvania
Danville
Geisinger Medical Center Program
Geisinger Medical Center
Program Director:
Thomas M Harrington, MD
Geisinger Medical Center
100 N Academy Ave
Danville, PA 17821
717-271-6416
Length: 2 Year(s) Total Positions: 2
Program ID: 150-41-11-114

Philadelphia
Albert Einstein Medical Center Program
Albert Einstein Medical Center
Moss Rehabilitation Hospital
Program Director:
Mary E Moore, MD PhD
Albert Einstein Medical Center
Korman Bldg Rm 100
Philadelphia, PA 19141-3088
215-456-7380
Length: 2 Year(s) Total Positions: 2
Program ID: 150-41-11-033

MCPhu/Hahnemann University Hospital Program
Hahnemann University Hospital
Program Director:
Vincent J Zarro, MD PhD
Hahnemann University
Broad & Vine Sts MD431
Mail Stop 117
Philadelphia, PA 19102-1192
215-762-8020
Length: 2 Year(s) Total Positions: 2
Program ID: 150-41-31-034

MCPhu/Medical College of Pennsylvania Hospital Program
Medical College of Pennsylvania Hospital
Veterans Affairs Medical Center (Philadelphia)
Program Director:
Bruce I Hoffman, MD
Medical College of Pennsylvania
3300 Henry Ave
Philadelphia, PA 19129
215-842-6449
Length: 2 Year(s) Total Positions: 2
Program ID: 150-41-21-084

Temple University Program
Temple University Hospital
Program Director:
Charles D Tourtelotte, MD
Temple University Hospital Dept of Medicine
3401 N Broad
Philadelphia, PA 19140-5192
215-340-3096
Length: 2 Year(s) Total Positions: 2
Program ID: 150-41-21-023

Thomas Jefferson University Program
Thomas Jefferson University Hospital
Program Director:
Raphael J De Heretius, MD
Thomas Jefferson University
615 Curtis Blvd
1015 Walnut St
Philadelphia, PA 19107
215-882-1410
Length: 2 Year(s) Total Positions: 2
Program ID: 150-41-21-024

University of Pennsylvania Program*
Hospital of the University of Pennsylvania
Program Director:
H Ralph Schumacher Jr, MD
Hospital of the University of Pennsylvania
3400 Spruce St S 570 Maloney Bldg
Philadelphia, PA 19104
215 662-3691
Length: 2 Year(s) Total Positions: 5
Program ID: 150-41-21-916

Pittsburgh
University Health Center of Pittsburgh Program
University Health Center of Pittsburgh
Montefiore University Hospital (UPMC)
Presbyterian University Hospital/UPMC
Veterans Affairs Medical Center (Pittsburgh)
Program Director:
Thomas A Medsger Jr, MD
Hoag of the Univ Hill Clr of Pittsburgh
3500 Terrace St
885 South Hall
Pittsburgh, PA 15261
412-668-0668
Length: 2 Year(s) Total Positions: 4
Program ID: 150-41-31-027

Sayre
Guthrie Healthcare System Program
Robert Packer Hospital
Program Director:
Robert M Michaelson, MD
Guthrie Healthcare System
Sayre, PA 18650-1688
717-888-5556
Length: 2 Year(s) Total Positions: 2
Program ID: 150-41-21-143

Puerto Rico
Rio Piedras
San Juan City Hospital Program*
San Juan City Hospital
University Hospital
Veterans Affairs Medical Center (San Juan)
Program Director:
Rodolfo Concepcion, MD
Dept of Medicine San Juan Municipal Hospital
Box 21405
Puerto Rico Medical Center
Rio Piedras, PR 00928
809-765-5147
Length: 2 Year(s) Total Positions: 2
Program ID: 150-42-11-069

San Juan
University of Puerto Rico Program
University of Puerto Rico School of Medicine
University Hospital
Program Director:
Esther N Gonzales-Paves, MD
University Hospital Dept of Medicine
GPO Box 5067
San Juan, PR 00936
990-758-2535
Length: 2 Year(s)
Program ID: 150-42-21-065

Rhode Island
Providence
Brown University (Roger Williams) Program
Roger Williams Medical Center
Rhode Island Hospital
Veterans Affairs Medical Center (Providence)
Program Director:
Edward V Lally, MD
Brown University
200 Chalkstone Ave
Box G-WRRI
Providence, RI 02912
401-656-2360
Length: 2 Year(s) Total Positions: 2
Program ID: 150-43-31-028

South Carolina
Charleston
Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
MUSC Medical Center
Veterans Affairs Medical Center (Charleston)
Program Director:
E Caroline LeRoy, MD
Medical University of South Carolina
Div of Rheumatology & Immunology
171 Ashley Ave
Charleston, SC 29425-2229
803-792-2000
Length: 2 Year(s) Total Positions: 4
Program ID: 150-45-21-075

* Updated information not provided.
Tennessee

Memphis

University of Tennessee Program
University of Tennessee College of Medicine
Baptist Memorial Hospital
Regional Medical Center at Memphis
Veterans Affairs Medical Center (Memphis)
Program Director:
Aidare S. Postlethwait, MD
University of Tennessee
Dept. of Medicine
930 Court Ave Bldg C325
Memphis, TN 38163
901-448-5774
Length: 2 Year(s)  Total Positions: 5
Program ID: 150-47-21-105

Nashville

Vanderbilt University Program*
Vanderbilt University Medical Center
St Thomas Hospital
Veterans Affairs Medical Center (Nashville)
Program Director:
Theodore Pincus, MD
Vanderbilt University Dept of Medicine
2114 & Garland
Nashville, TN 37232
615-322-4746
Length: 2 Year(s)  Total Positions: 2
Program ID: 150-47-31-012

Texas

Dallas

University of Texas Southwestern Medical School Program
University of Texas Southwestern Medical School
Dallas County Hospital District Parkland Memorial Hospital
Veterans Affairs Medical Center (Dallas)
Program Director:
Peter E. Lipsky, MD
University of Texas Southwestern Medical Center
5533 Harry Hines Blvd
Dallas, TX 75390-8888
214-648-9110
Length: 2 Year(s)  Total Positions: 23
Program ID: 150-48-21-070

Houston

Baylor College of Medicine Program*
Baylor College of Medicine
Harris County Hospital District-Ben Taub General Hospital
Program Director:
Donald M. Marcus, MD
Baylor College of Medicine-Texas Medical Center
One Baylor Plaza
Houston, TX 77030
713-790-6915
Length: 2 Year(s)  Total Positions: 2
Program ID: 150-48-21-688

University of Texas at Houston Program
University of Texas Medical School at Houston
Hermann Hospital
Lyndon B Johnson General Hospital
University of Texas M D Anderson Cancer Center
Program Director:
Frank C. Arnett, Jr, MD
The University of Texas Houston Health Science Center
Div of Rheumatology
PO Box 20708
Houston, TX 77225
713-792-5600
Length: 2 Year(s)  Total Positions: 3
Program ID: 150-48-31-130

Lackland AFB

Wilford Hall USAF Medical Center Program
Wilford Hall USAF Medical Center (SG)
Program Director:
Lt Col Jay B. Rigg, MD
WBMCP9SM
2300 Bergquist Dr Ste 1
Lackland AFB, TX 78236-6300
210-677-7197
Length: 2 Year(s)  Total Positions: 4
Program ID: 150-48-12-065

San Antonio

University of Texas Health Science Center at San Antonio Program
University of Texas Medical School at San Antonio
Audie L. Murphy Memorial Veterans Hospital (San Antonio)
University Hospital-South Texas Medical Center
Program Director:
Michael Fleischback, MD
University of Texas Health Science Center
Dept of Medicine/Rheumatology
7763 Floyd Curl Dr
San Antonio, TX 78284-7874
210-567-4668
Length: 2 Year(s)  Total Positions: 2
Program ID: 150-48-21-041

Utah

Salt Lake City

University of Utah Program
University of Utah Medical Center
Veterans Affairs Medical Center (Salt Lake City)
Program Director:
R James Williams, MD
University of Utah Medical Center
50 N Medical Dr
Salt Lake City, UT 84132
801-581-4393
Length: 2 Year(s)  Total Positions: 1
Program ID: 150-49-21-119

Vermont

Burlington

Medical Center Hospital of Vermont Program*
Medical Center Hospital of Vermont
Program Director:
Sheldon M. Cooper, MD
University of Vermont College of Medicine
Dept of Medicine
Given Bldg D-301
Burlington, VT 05405-0001
802-865-2144
Length: 2 Year(s)  Total Positions: 1
Program ID: 150-50-21-120

Virginia

Charlottesville

University of Virginia Program
University of Virginia Medical Center
Program Director:
Carolyn M. Brunner, MD
University of Virginia Health Sciences Ctr
Dept of Med
Div of Rheumatology Box 412
Charlottesville, VA 22908
804-982-8214
Length: 2 Year(s)  Total Positions: 2
Program ID: 150-51-21-018

Richmond

Medical College of Virginia/Virginia Commonwealth University Program
Medical College of Virginia/Virginia Commonwealth University
Program Director:
Shawn Ruddy, MD
Medical College of Virginia
PO Box 860683
Richmond, VA 23298-0663
804-828-9695
Length: 2 Year(s)  Total Positions: 2
Program ID: 150-51-21-014

Washington

Seattle

University of Washington Program
University of Washington School of Medicine
University of Washington Medical Center
Veterans Affairs Medical Center (Seattle)
Program Director:
Mark Mannik, MD
Div of Rheumatology
Dept of Medicine BG-28
University of Washington
Seattle, WA 98195
206-543-3414
Length: 2 Year(s)  Total Positions: 5
Program ID: 150-54-21-069

* Updated information not provided.
Selective Pathology (Pathology-Anatomic and Clinical)

California

Los Angeles

Children's Hospital of Los Angeles Program*
Program Director:
Carl W Rettenmier, MD
Children's Hospital of Los Angeles
4650 Sunset Blvd
Los Angeles, CA 90027
213 699-3425
Length: 1 Year(s) Total Positions: 6 (OYI: 0)
Program ID: 301-65-21-001

Colorado

Denver

Children's Hospital Program
Program Director:
Edmund Orsini, MD
Children's Hospital
1355 E 19th Ave
Denver, CO 80218
303 861-6713
Length: 1 Year(s) Total Positions: 1
Program ID: 301-07-21-002

Massachusetts

Boston

Brigham and Women's Hospital Program*
Program Director:
Christopher Crum, MD
Brigham & Women's Hospital
75 Francis St
Boston, MA 02115
617 739-7539
Length: 1 Year(s) Total Positions: 4
Program ID: 301-24-11-003

Children's Hospital Program
Program Director:
Ramzi S Cotran, MD
Children's Hospital
Dept of Pathology
300 Longwood Ave
Boston, MA 02115
617 732-6647
Length: 1 Year(s) Total Positions: 5
Program ID: 301-24-21-004

New York

Buffalo

Roswell Park Cancer Institute Program
Program Director:
John S J Brooks, MD
660 Elm & Carlton St
Buffalo, NY 14203-0000
716 845-7700
Length: 1 Year(s)
Program ID: 301-65-31-016

New York

Hospital for Joint Diseases Orthopaedic Institute Program
Program Director:
German C Steiner, MD
Hospital for Joint Diseases Orthopaedic Institute
Dept of Pathology & Lab Medicine
420 E 72nd St
New York, NY 10021
212 596-6021
Length: 1 Year(s) Total Positions: 2
Program ID: 301-35-21-006

Memorial Sloan-Kettering Cancer Center Program
Program Director:
Juan Rosai, MD
Memorial Sloan-Kettering Cancer Center
1275 York Ave
New York, NY 10021
212 639-8419
Length: 1 Year(s) Total Positions: 20
Program ID: 301-35-21-011

Ohio

Akron

Children's Hospital Medical Center of Akron/NEOUCOM Program
Program Director:
Dimitri P Agamanolis, MD
Children's Hospital Medical Center of Akron
Dept of Pathology
One Perkins Sq
Akron, OH 44308-1823
216 379-8119
Length: 1 Year(s) Total Positions: 2
Program ID: 301-38-11-009

Columbus

Ohio State University Program
Program Director:
Stephen J Qualman, MD
Children's Hospital
700 Children's Dr
Columbus, OH 43205
614 294-6100
Length: 2 Year(s) Total Positions: 2 (OYI: 1)
Program ID: 301-38-21-007

* Updated information not provided.
Pennsylvania
Philadelphia
Fox Chase Cancer Center Program*
Fox Chase Cancer Center
Program Director:
Hernando Salazar, MD
Div of Surgical Pathology
Fox Chase Cancer Center
7701 Barloome Ave
Philadelphia, PA 19111
215 238-3855
Length: 1 Year(s) Total Positions: 2
Program ID: 268-41-015

St Christopher’s Hospital for Children Program*
St Christopher’s Hospital for Children
Program Director:
Jean-Pierre de Chadarevian, MD
St Christopher’s Hospital for Children
Front and 9th Ave
Philadelphia, PA 19134-2396
215 427-6572
Length: 1 Year(s) Total Positions: 1
Program ID: 268-41-009

University of Pennsylvania Program
Children’s Hospital of Philadelphia
Program Director:
C L Witteles, MD
Children’s Hospital of Philadelphia Dept of Pathology
34th St & Civic Center Blvd
Philadelphia, PA 19104
215 696-9595
Length: 1 Year(s) (GYI: 0)
Program ID: 268-41-11-008

Sports Medicine (Orthopaedic Surgery)
Alabama
Birmingham
American Sports Medicine Institute Program*
American Sports Medicine Institute
Program Director:
James B. Andrews, MD
American Sports Medicine Institute
1318 13th St S
Birmingham, AL 35205
205 918
Length: 1 Year(s) Total Positions: 9
Program ID: 268-01-13-026

University of Alabama Medical Center Program*
University of Alabama Hospital
Children’s Hospital of Alabama
Program Director:
William F. Garth, MD
University of Alabama Birmingham Medical Center
Director of Sports Medicine
1900 7th Ave S Ste-402
Birmingham, AL 35223
205 934-1041
Length: 1 Year(s)
Program ID: 268-01-21-024

California
Inglewood
Kerlan–Jobe Orthopaedic Clinic Program*
Kerlan–Jobe Orthopaedic Clinic
Centreline Hospital Medical Center
Program Director:
James E. Tuite, MD
Kerlan–Jobe Orthopaedic Clinic
501 E Hardy St #9
Inglewood, CA 90301
310 674-3200
Length: 1 Year(s) Total Positions: 7
Program ID: 268-05-21-030

Long Beach
Long Beach Memorial Medical Center Program*
Long Beach Memorial Medical Center
Southern California Center for Sports Medicine
Program Director:
Douglas W. Jackson, MD
Memorial Medical Center
2801 Atlantic Ave
Long Beach, CA 90801
310 424-6666
Length: 1 Year(s)
Program ID: 268-05-21-013

Van Nuys
Southern California Orthopaedic Institute Program*
Southern California Orthopaedic Institute
Program Director:
Richard D. Perkel, MD
Southern California Orthopaedic Institute
6815 Noble St
Van Nuys, CA 91405
818 901-0355
Length: 1 Year(s)
Program ID: 268-05-21-043

Colorado
Denver
University of Colorado Program*
University of Colorado Health Sciences Center
Orthopaedic Associates of Aspen and Glenwood
Program Director:
Robert E. Hunter, MD
Wayne K. Grunow, MD
Orthopaedic Associates of Aspen & Glenwood
100 E Main St #101
Aspen, CO 81611
303 925-4141
Length: 1 Year(s)
Program ID: 268-07-21-035

Vail
Steadman Hawkins Clinic Program
Steadman Hawkins Clinic
Vail Valley Medical Center
Program Director:
Richard J. Hawkins, MD FRCS C
Steadman Hawkins Clinic
Orthopaedic Surgery
181 W Meadow Dr Ste 400
Vail, CO 81657
970 476-1100
Length: 1 Year(s) Total Positions: 5
Program ID: 268-07-21-063

Connecticut
Farmington
University of Connecticut Program
University of Connecticut School of Medicine
Univ of Connecticut Health Center/John Dempsey Hospital
Program Director:
John F. Peterson, MD
University of Connecticut
283 Farmington Ave
Farmington, CT 06032-0997
203 777-5000
Length: 1 Year(s) Total Positions: 1
Program ID: 268-08-21-006

* Updated information not provided.
New Haven
Yale-New Haven Medical Center Program
Yale-New Haven Hospital
Program Director: Peter Joki, MD
Yale Sports Medicine
240 Sargent Dr
New Haven, CT 06511
203 562-2856
Length: 1 Year(s) Total Positions: 1
Program ID: 208-08-02010

Florida
Gainesville
University of Florida Program
University of Florida College of Medicine
Shands Hospital at the University of Florida
Program Director: Peter A Indelicato, MD
University of Florida
Hampton Oaks Sports Medicine Center
Box 100241
Gainesville, FL 32610
800 964-0345
Length: 1 Year(s) Total Positions: 1
Program ID: 208-11-21-010

Miami
University of Miami-Jackson Memorial Medical Center Program
University of Miami-Jackson Memorial Medical Center
Doctor's Hospital
Program Director: John W Urbe, MD
Doctor's Hospital
5000 University Dr
Ste 3330
Coral Gables, FL 33146
305 668-3320
Length: 1 Year(s) Total Positions: 1
Program ID: 208-11-21-015

Georgia
Columbus
Hughston Sports Medicine Foundation Program*
Hughston Sports Medicine Foundation
Hughston Sports Medicine Hospital
Program Director: Champ L Baker, MD
The Hughston Clinic PC
PO Box 9517
Columbus, GA 31908-9517
404 924-6664
Length: 1 Year(s) Total Positions: 6
Program ID: 208-12-21-046

* Updated information not provided.

Illinois
Chicago
Rush Medical College Program*
Rush-Presbyterian-St Luke's Medical Center
Program Director: Bernard R Bach Jr, MD
Rush-Presbyterian-St Luke’s Medical Center
Sports Medicine Section
1725 W Harrison St Ste 410
Chicago, IL 60612
312 443-2444
Length: 1 Year(s) Total Positions: 1
Program ID: 208-11-01-064

University of Chicago Program
University of Chicago Hospitals
Program Director: Bruce Reider, MD
University of Chicago Hospitals
5841 S Maryland MC0170
Chicago, IL 60637
312 702-6346
Length: 1 Year(s) Total Positions: 1
Program ID: 208-16-21-034

Indiana
Indianapolis
Methodist Hospital of Indiana Program
Methodist Hospital of Indiana
Program Director: K Donald Shellbourne, MD
Thomas A Brady Sports Medicine Clinic
5115 N Capitol Ave
Indianapolis, IN 46202
317 924-9636
Length: 1 Year(s) Total Positions: 2
Program ID: 208-17-21-003

Kentucky
Lexington
University of Kentucky Medical Center Program
University Hospital-Albert B Chandler Medical Center
Program Director: David N Cahorns, MD
University Hospital-Albert B Chandler Medical Center
The Kentucky Clinic Box 429
Lexington, KY 40536-0294
606 323-3223
Length: 1 Year(s) Total Positions: 1
Program ID: 208-30-21-018

Louisiana
New Orleans
Louisiana State University Program
Louisiana State University School of Medicine
Lake Charles Memorial Hospital
Medical Center of Louisiana at New Orleans-LSU Division
Program Director: David Drea Jr, MD
Louisiana State University Medical Center
2025 Gravier Ste 400
New Orleans, LA 70112
504 849-4000
Length: 1 Year(s) Total Positions: 2
Program ID: 208-21-31-002

Tulane University Program
Tulane University School of Medicine
Tulane University Hospital and Clinics
Program Director: Michael E Bruner, MD
Tulane Medical Center
Dept of Orthopaedics SS2
1430 Tulane Ave
New Orleans, LA 70112-2689
504 588-5907
Length: 1 Year(s) Total Positions: 1
Program ID: 208-21-21-020

Maryland
Baltimore
Johns Hopkins University Program*
Johns Hopkins University School of Medicine
Children's Hospital and Center for Reconstructive Surgery
Johns Hopkins Hospital
Program Director: Edward G McFarland, MD
The Johns Hopkins University
3061 Greenpring Ave
#301
Baltimore, MD 21211
301 276-9000
Length: 1 Year(s) Total Positions: 1
Program ID: 208-25-21-029

Union Memorial Hospital Program
Union Memorial Hospital
Program Director: Leslie S Matthews, MD
Union Memorial Hospital
Dept of Orthopaedic Surgery
3333 N Calvert Ste 400
Baltimore, MD 21218
410 654-2685
Length: 1 Year(s) Total Positions: 2
Program ID: 208-25-21-058

Massachusetts
Boston
Harvard Medical School Program
Massachusetts General Hospital
Program Director: Bertram Zaring, MD
Massachusetts General Hospital
Sports Medicine Unit
16 Parkman St Ste 514
Boston, MA 02114
617 726-2432
Length: 1 Year(s) Total Positions: 2
Program ID: 208-24-31-040

Graduate Medical Education Directory
Accredited Programs in Sports Medicine (Orthopaedic Surgery)

Tufts University Program
New England Medical Center Hospitals
Program Director:
John C Richmond, MD
New England Medical Center Hospital
Dept of Orthopaedic Surgery
750 Washington St Box 198
Boston, MA 02111
617-966-6014
Length: 1 Year(s) Total Positions: 1
Program Id: 268-24-31-069

Worcester
University of Massachusetts Medical Center Program*
University of Massachusetts Medical Center
Program Director:
Arthur M. Pappas, MD
University of Massachusetts Medical Center
Dept of Orthopaedic Surgery
55 Lake Ave N
Worcester, MA 01655
508 856-3171
Length: 1 Year(s) Total Positions: 2
Program Id: 268-24-31-047

Michigan
Detroit
Wayne State University/Detroit Medical Center Program
Wayne State University School of Medicine
Hutzel Hospital
Program Director:
Robert A. Taft, MD
Hutzel Hospital
Div of Sports Medicine
4000 E 12 Mile Rd
Warren, MI 48092
313 573-3190
Length: Year(s) Total Positions: 1
Program Id: 268-25-21-065

Minnesota
Minneapolis
Minneapolis Sports Medicine Center Program
Minneapolis Sports Medicine Center
Abbott-Northwestern Hospital
Fairview Riverside Medical Center
Program Director:
David A. Fischer, MD
Minneapolis Sports Medicine Center
Ste 400
701 25th Ave S
Minneapolis, MN 55404-1443
612 330-9491
Length: 1 Year(s) Total Positions: 2
Program Id: 268-26-21-048

Missouri
Kansas City
University of Missouri at Kansas City Program*
University of Missouri-Kansas City School of Medicine
Baptist Medical Center
St Luke's Hospital
Truman Medical Center-West
Program Director:
Jon E Brown, MD
Univ of Missouri at Kansas City Affiliated Hospitals
6555 Holmes St Ste 630
Kansas City, MO 64109
816 444-9900
Length: 1 Year(s) Program Id: 268-26-21-061

New York
New York
Hospital for Joint Diseases Orthopaedic Institute Program*
Hospital for Joint Diseases Orthopaedic Institute
Program Director:
Mark I. Pilman, MD
Hospital for Joint Diseases
Sports Medicine Center
301 E 17th St
New York, NY 10003
212 598-0052
Length: 1 Year(s) Total Positions: 6
Program Id: 268-35-31-060

Hospital for Special Surgery/Cornell Medical Center Program
Hospital for Special Surgery
Program Director:
Thomas J. Wickiewicz, MD
The Hospital for Special Surgery
Sports Medicine/Shoulder Service
535 E 70th St
New York, NY 10021
212 695-1450
Length: 1 Year(s) Program Id: 268-35-21-025

Lenox Hill Hospital Program
Lenox Hill Hospital
Program Director:
James A. Nicholas, MD
Lenox Hill Hospital
Dept of Orthopaedic Surgery
100 E 77th St
New York, NY 10021-1883
212 404-2245
Length: 1 Year(s) Total Positions: 2
Program Id: 268-35-11-004

New York University University Medical Center Program
New York University University Medical Center
Bellevue Hospital Center
Hospital for Joint Diseases Orthopaedic Institute
Program Director:
Jeffrey Minkoff, MD
New York University Medical Center
550 1st Ave
New York, NY 10016
212 268-8001
Length: 1 Year(s) Total Positions: 1
Program Id: 268-35-21-005

Rochester
University of Rochester Program
Strong Memorial Hospital of the University of Rochester
Program Director:
Kenneth D. DeHaven, MD
Strong Memorial Hospital
Dept of Orthopedics
601 Elmwood Ave Box 665
Rochester, NY 14642
716 275-2070
Length: 1 Year(s) Total Positions: 1
Program Id: 268-35-21-069

West Point
Keller Army Community Hospital Program*
Keller Army Community Hospital
Program Director:
Robert A. Arctero, MD
Letterman Army Institute of Research
Military Trauma Research Div
Presidio of San Francisco, CA 94129-6800
415 561-5816
Length: 1 Year(s) Total Positions: 2
Program Id: 268-35-21-055

Ohio
Cincinnati
Cincinnati Sportsmedicine and Orthopaedic Center Program
Cincinnati Sportsmedicine and Orthopaedic Center
Program Director:
Frank B. Noyes, MD
Cincinnati Sportsmedicine and Orthopaedic Center
Deaconess Hospital
311 Straight St
Cincinnati, OH 45219
513 559-2818
Length: 1 Year(s) Total Positions: 6
Program Id: 268-36-21-041

University of Cincinnati Hospital Group Program
Christ Hospital
University of Cincinnati College of Medicine
Program Director:
Robert S. Heidt, Jr, MD
The Christ Hospital
Bone & Joint Institute
2138 Eshner Ave
Cincinnati, OH 45219
513 368-2742
Length: 1 Year(s) Total Positions: 2
Program Id: 268-36-21-031

Cleveland
Cleveland Clinic Foundation Program
Cleveland Clinic Foundation
Program Director:
John A. Bergfeld, MD
Cleveland Clinic Foundation
6000 Euclid Ave T722
Dept of Ortho-Sports Medicine
Cleveland, OH 44106-5242
216 444-2618
Length: 1 Year(s) Total Positions: 3
Program Id: 268-36-21-028

* Updated information not provided.
Columbus
Ohio State University Program
Ohio State University Medical Center
Riverside Methodist Hospitals
Program Director:
Christopher C. Kaeling, MD
The Ohio State University Hospital
410 W 10th Ave
N-839 Doan Hall
Columbus, OH 43210
614 293-8000
Length: 1 Year(s) Total Positions: 2
Program ID: 268-39-21-008

Oklahoma
Oklahoma City
University of Oklahoma Health Sciences Center Program
University of Oklahoma College of Medicine-Oklahoma City
HCA Presbyterian Hospital
Program Director:
William A. Graha, MD
University of Oklahoma Health Sciences Center
711 Stanton L Young Blvd
Ste 318
Oklahoma City, OK 73104
405 232-4641
Length: 1 Year(s) Total Positions: 2
Program ID: 268-39-21-007

Pennsylvania
Philadelphia
Graduate Hospital Program*
Graduate Hospital
Program Director:
Vincent Di Stefano, MD
Graduate Hospital
Pepper Memorial Pavilion Ste 802
One Graduate Plaza
Philadelphia, PA 19104
215 693-0132
Length: 1 Year(s) Program ID: 268-41-21-014

Temple University Program
Temple University Hospital
Program Director:
Ray A. Moyer, MD
Temple University Hospitals
Dept of Orthopaedic Surgery
Broad & Oregon Sts
Philadelphia, PA 19140
215 707-2111
Length: 1 Year(s) Total Positions: 2
Program ID: 268-41-21-040

Thomas Jefferson University Program
Thomas Jefferson University Hospital
Langone Hospital
Pennsylvania Hospital
Program Director:
Philip J. Marone, MD
533 Walnut St
Philadelphia, PA 19107
215 666-6215
Length: 1 Year(s) Total Positions: 38
Program ID: 268-41-21-054

University of Pennsylvania Program*
Hospital of the University of Pennsylvania
Program Director:
Joseph S. Torg, MD
University of Pennsylvania
3400 Spruce St
Philadelphia, PA 19104
215 662-4069
Length: 1 Year(s) Program ID: 268-41-21-009

Pittsburgh
University Health Center of Pittsburgh Program
University Health Center of Pittsburgh
Presbyterian-University Hospital/UPMC
Program Director:
Fredric H. Feinberg, MD
Center for Sports Medicine & Rehabilitation
Craig at Baum Blvd
Pittsburgh, PA 15213
412 578-3030
Length: 1 Year(s) Total Positions: 1
Program ID: 268-39-21-018

Tennessee
Chattanooga
University of Tennessee College of Medicine at Chattanooga Program*
University of Tennessee College of Medicine-Chattanooga
Knoxville Orthopedic Clinic
Erlanger Medical Center
St Mary’s Medical Center
Program Director:
William T. Youmans, MD
Knoxville Orthopaedic Clinic
1128 Weinberger Rd
Knoxville, TN 37909
615 588-4425
Length: 1 Year(s) Total Positions: 2
Program ID: 268-47-21-029

Texas
Houston
Baylor College of Medicine Program
Baylor College of Medicine
Methodist Hospital
Program Director:
James R. Boccali, MD
Baylor College of Medicine
Dept of Orthopaedic Surgery
8550 Fannin Ste 2825
Houston, TX 77030
713 500-3711
Length: 1 Year(s) Total Positions: 3
Program ID: 268-48-21-027

University of Texas at Houston Program
University of Texas Medical School at Houston
Diagnostic Center Hospital
Hermann Hospital
Program Director:
James F. Butler, MD
Foundation for Orthopaedic Athletic & Reconstructive
6410 Fannin #100
Houston, TX 77030
713 790-2429
Length: 1 Year(s) Total Positions: 1
Program ID: 268-48-21-019

San Antonio
University of Texas Health Science Center at San Antonio (Nix) Program
University of Texas Medical School at San Antonio
Nix Medical Center
Southwest Texas Methodist Hospital
St Luke’s Lutheran Hospital
Program Director:
Jeanne C. Delee, MD
Hebner Medical Center
5100 Heberline Rd
San Antonio, TX 78240
210 561-7069
Length: 1 Year(s) Total Positions: 1
Program ID: 268-48-21-042

University of Texas Health Science Center at San Antonio Program
University of Texas Medical School at San Antonio
Orthopaedic Surgery and Athletic Medicine PA
Program Director:
Peter F. Holmes, MD
Orthopaedic Surgery and Athletic Medicine
8942 Wurzbach Ste 540
San Antonio, TX 78229
210 615-1615
Length: 1 Year(s) Program ID: 268-48-21-032

Utah
Murray
The Orthopedic Specialty Hospital Program
The Orthopedic Specialty Hospital
Program Director:
Ronnie E. Poulson, MD
Thomas E. Rosenberg, MD
The Orthopedic Specialty Hospital
5848 S 300 E
Salt Lake City, UT 84107
801 289-4109
Length: 1 Year(s) Total Positions: 2
Program ID: 268-49-21-011

Salt Lake City
University of Utah Program
University of Utah Medical Center
Program Director:
Robert T. Burks, MD
University of Utah Medical Center
Dept of Orthopaedic Surgery
50 N Medical By
Salt Lake City UT 84132
801 485-2780
Length: 1 Year(s) Total Positions: 1
Program ID: 268-49-21-022

* Updated information not provided.
Virginia

Arlington

Georgetown University Program*
Arlington Hospital
Nirschl Orthopaedic Clinic
Program Director:
Robert P. Nirschl, MD
Nirschl Orthopaedic Clinic
Ste 504
1715 N George Mason Dr
Arlington, VA 22205
703 635-2200
Length: 1 Year(s)
Program ID: 288-51-21-062

Richmond

Orthopaedic Research of Virginia Program*
Orthopaedic Research of Virginia
Tuckahoe Orthopaedic Associates
Program Director:
Richard B Caspari, MD
Tuckahoe Orthopaedic Associates
8619 Three Chopt Rd
Richmond, VA 23229
804 346-1000
Length: 1 Year(s) Total Positions: 4
Program ID: 288-51-21-039

Wisconsin

Madison

University of Wisconsin Program
University of Wisconsin Hospital and Clinics
Program Director:
John P. Orwin, MD
University of Wisconsin Clinical Sciences Center
600 Highland Ave
1200
Madison, WI 53792-3328
608 263-5636
Length: 1 Year(s) Total Positions: 1
Program ID: 288-65-21-017

Surgery-General

Alabama

Birmingham

Birmingham Baptist Medical Centers Program
Birmingham Baptist Medical Centers Inc.
Birmingham Baptist Medical Center-Montclair
Birmingham Baptist Medical Center-Priory West
Program Director:
D. K. Lowe, MD
Baptist Medical Centers
840 Montclair Rd
Suite 307
Birmingham, AL 35213
205 599-0924
Length: 5 Year(s) Total Positions: 14 (GY: 6)
Program ID: 440-01-21-029

Carraway Methodist Medical Center Program
Carraway Methodist Medical Center
Program Director:
Henry L. Lawe, MD
Carraway Methodist Medical Center
Office of Surgical Educ
1800 Carraway Blvd
Birmingham, AL 35204
205 226-6200
Length: 5 Year(s) Total Positions: 10 (GY: 5)
Program ID: 440-01-12-021

University of Alabama Medical Center Program
University of Alabama Hospital
Cooper Green Hospital
Loyola Nolans Hospital and Health Centers
Veterans Affairs Medical Center (Birmingham)
Program Director:
Marshall M. Urist, MD
University of Alabama School of Medicine
General Surgery Residency Program
1922 Seventh Ave S 301 Kracke Bldg
Birmingham, AL 35204-0016
205 254-3000
Length: 5 Year(s) Total Positions: 27 (GY: 14)
Subspecialties: Vascular
Program ID: 440-01-21-022

Mobile

University of South Alabama Program
University of South Alabama Medical Center
Program Director:
Arnold Lutherman, MD
University of South Alabama Medical Center
2451 Pillington St
719 Martin St
Mobile, AL 36617
251 471-7893
Length: 5 Year(s) Total Positions: 26 (GY: 8)
Program ID: 440-01-11-024

Arizona

Phoenix

Good Samaritan Regional Medical Center Program
Good Samaritan Regional Medical Center
Carl T Hayden Veterans Affairs Medical Center (Phoenix)
Phoenix Indian Medical Center
Program Director:
H. M. E. Stone, MD
Phoenix Integrated Surgical Residency Program
1300 N 14Th St 352
Phoenix, AZ 85006-2480
602 239-2392
Length: 5 Year(s) Total Positions: 24 (GY: 6)
Program ID: 440-03-23-026

Maricopa Medical Center Program
Maricopa Medical Center
Program Director:
James M. Malone, MD
Maricopa Medical Center
Dept of Surgery
PO Box 5099
Phoenix, AZ 85010
520 287-5371
Length: 5 Year(s) Total Positions: 30 (GY: 9)
Program ID: 440-03-23-025

Tucson

University of Arizona Program
University of Arizona College of Medicine
Tucson Medical Center
University Medical Center
Veteran Affairs Medical Center (Tucson)
Program Director:
Charles W. Putnam, MD
University of Arizona Health Science Center
Dept of Surgery
1501 N Campbell Ave
Tucson, AZ 85724
520 626-7147
Length: 5 Year(s) Total Positions: 27 (GY: 9)
Subspecialties: Vascular
Program ID: 440-03-21-027

Arkansas

Little Rock

University of Arkansas for Medical Sciences Program
University of Arkansas College of Medicine
John L. McClellan Memorial Veterans Hospital
University Hospital of Arkansas
Program Director:
Robert W. Barnes, MD
University for Medical Sciences
4301 W Markham Slot 520
Little Rock, AR 72205
501 686-5610
Length: 5 Year(s) Total Positions: 26 (GY: 10)
Subspecialties: Vascular
Program ID: 440-04-21-029

* Updated information not provided.
California

Bakersfield

Kern Medical Center Program*
Kern Medical Center
Program Director: Jack H Bloch, MD PhD
David C Jacobson, MD
Kern Medical Center
1830 Flower St
Bakersfield, CA 93301
805 325-2274
Length: 5 Year(s) Total Positions: 14 (GYI: 4)
Program ID: 440-05-01-030

Fresno

University of California (San Francisco)/Fresno Program
UCSF-Fresno Medical Education Program
Valley Children’s Hospital
Valley Medical Center of Fresno
Veterans Affairs Medical Center (Fresno)
Program Director: Steven N Parks, MD
Valley Medical Center of Fresno
645 S Cedar Ave
Fresno, CA 93702-2966
209 493-3770
Length: 5 Year(s) Total Positions: 16 (GYI: 4)
Program ID: 440-05-01-032

Loma Linda

Loma Linda University Program
Loma Linda University Medical Center
Jerry L Pettis Memorial Veterans Hospital
Kaiser Foundation Hospital (Fontana)
Riverside General Hospital-University Medical Center
San Bernardino County Medical Center
Program Director: Bryan Fandrich, MD
Loma Linda University Medical Center
Dept of Surgery Ran 5A08
PO Box 2000
Loma Linda, CA 92354
909 824-4268
Length: 5 Year(s) Total Positions: 45 (GYI: 18)
Subspecialities: V.G
Program ID: 440-05-01-034

Los Angeles

Cedars-Sinai Medical Center Program
Cedars-Sinai Medical Center
Program Director: Jonathan B Hiatt, MD
Cedars-Sinai Medical Center
8700 Beverly Blvd Ste 7215
Los Angeles, CA 90048
323 855-8574
Length: 5 Year(s) Total Positions: 25 (GYI: 5)
Program ID: 440-05-01-037

Charles R Drew University Program*
Charles R Drew University of Medicine and Science
California Medical Center (Los Angeles)
LAC+KLMed/Drew Medical Center
Long Beach Memorial Medical Center
Program Director: Arthur W Fleming, MD
Martin Luther King Jr-Drew Medical Center
12021 S Willow Ave
Los Angeles, CA 90059
310 605-6520
Length: 6 Year(s) Total Positions: 37 (GYI: 12)
Program ID: 440-05-01-040

* Updated information not provided.

UCLA Medical Center Program
UCLA School of Medicine
LAC+KLMed View Medical Center
UCLA Medical Center
Veterans Affairs Medical Center (Sepulveda)
Veterans Affairs Medical Center (West Los Angeles)
Program Director: Stanley W Ashley, MD
Dept of Surgery
UCLA Shil of Med
10882 Le Conte Ave
Los Angeles, CA 90024-749
310 825-6558
Length: 6 Year(s) Total Positions: 51 (GYI: 15)
Subspecialities: V.G
Program ID: 440-05-01-042

University of Southern California Program
Los Angeles County-USC Medical Center
USC University Hospital
Program Director: Gary L Pinnington, MD
Los Angeles County-USC Medical Center
1206 N State St Ste 1000
Los Angeles, CA 90033
213 206-7705
Length: 5 Year(s) Total Positions: 79 (GYI: 36)
Program ID: 440-05-11-030

Oakland

University of California (Davis) East Bay Program
Kaiser Permanente Medical Center (Oakland)
Highland General Hospital
Naval Hospital (Oakland)
Program Director: Claude H Organ Jr, MD
University of California (Davis) East Bay
1411 E 33rd St
Oakland, CA 94602
510 837-4287
Length: 5 Year(s) Total Positions: 48 (GYI: 13)
Subspecialities: V.G
Program ID: 440-05-01-030

Orange

University of California (Irvine) Program
University of California (Irvine) Medical Center
Veterans Affairs Medical Center (Long Beach)
Program Director: Russell A Williams, MD
University of California (Irvine) Medical Center
Dept of Surgery
101 City Dr
Orange, CA 92666
714 456-7250
Length: 5 Year(s) Total Positions: 43 (GYI: 17)
Subspecialities: OB/GYN
Program ID: 440-05-01-033

Pasadena

Huntington Memorial Hospital Program
Huntington Memorial Hospital
Program Director: Paul W Johnston, MD
100 W California Blvd
PO Box 7013
Pasadena, CA 91109-7013
818 957-1169
Length: 5 Year(s) Total Positions: 12 (GYI: 5)
Program ID: 440-05-11-047

San Diego

Naval Medical Center (San Diego) Program
Naval Medical Center (San Diego)
Program Director: Jerry J Ragland, MD
General Surgery Dept
Naval Medical Center
San Diego, CA 92134-5600
619 522-7570
Length: 5 Year(s) Total Positions: 38 (GYI: 23)
Program ID: 440-05-01-037

University of California (San Diego) Program
University of California (San Diego) Medical Center
Veterans Affairs Medical Center (San Diego)
Program Director: A R Moussa, MD
UCSD Medical Center
Dept of Surgery
200 W Arbor Dr #8402
San Diego, CA 92103-8402
619 543-8800
Length: 5 Year(s) Total Positions: 42 (GYI: 16)
Program ID: 440-05-01-048

San Francisco

University of California (San Francisco) Program
University of California (San Francisco) School of Medicine
Kaiser Foundation Hospital (San Francisco)
Mount Zion Medical Center of the University of California
San Francisco General Hospital Medical Center
University of California (San Francisco) Medical Center
Veterans Affairs Medical Center (San Francisco)
Program Director: Theodore B Schrock, MD
University of California (San Francisco)
Dept of Surgery 543 S
San Francisco, CA 94143-0470
415 476-1239
Length: 5 Year(s) Total Positions: 83 (GYI: 36)
Subspecialities: V.G
Program ID: 440-05-01-052

Accredited Programs in Surgery-General

Graduate Medical Education Directory 773
Santa Barbara
Santa Barbara Cottage Hospital Program
Santa Barbara Cottage Hospital
Program Director:
George A Higgins, MD
Santa Barbara Cottage Hospital
PO Box 609
Santa Barbara, CA 93102
805 569-7316
Length: 5 Year(s)  Total Positions: 12 (GYI: 6)
Program ID: 440-05-12-083

Stanford
Stanford University Program*
Stanford University Hospital
Kaiser Permanente Medical Center (Santa Clara)
Santa Clara Valley Medical Center
Veterans Affairs Medical Center (Palo Alto)
Program Director:
John E Niederhuber, MD
Stanford University Medical Center
Div of General Surgery MSORX 228
-360 Pasteur Dr
Stanford, CA 94305-5101
415 725-7389
Length: 5 Year(s)  Total Positions: 56 (GYI: 20)
Program ID: 440-05-21-054

Stockton
San Joaquin General Hospital Program
San Joaquin General Hospital
Stanislaus Medical Center
Program Director:
Nathaniel M Masulo, MD
San Joaquin General Hospital
PO Box 1029
Stockton, CA 95201-0299
209 468-5600
Length: 5 Year(s)  Total Positions: 12 (GYI: 3)
Program ID: 440-05-12-055

Torrance
Los Angeles County-Harbor-UCLA Medical Center Program
Los Angeles County-Harbor-UCLA Medical Center
St Mary Medical Center
Program Director:
Rodney A White, MD
Harbor Medical Center
1000 W Carson St Box 25
Torrance, CA 90509
310 222-2700
Length: 5 Year(s)  Total Positions: 37 (GYI: 10)
Subspecialties: VS
Program ID: 440-05-21-056

Travis AFB
David Grant USAF Medical Center Program
David Grant Medical Center
Program Director:
A Leich Kline, MD
60th Medical Group/SGHS
101 Bodin Circle
Travis AFB, CA 94535-1800
707 435-5180
Length: 5 Year(s)  Total Positions: 15 (GYI: 6)
Program ID: 440-05-31-001

Colorado
Aurora
Fitzsimons Army Medical Center Program
Fitzsimons Army Medical Center
Program Director:
Phillip L Mallory II, MD
General Surgery Service
Fitzsimons Army Medical Center
Aurora, CO 80025-5001
303 247-2805
Length: 5 Year(s)  Total Positions: 17 (GYI: 9)
Program ID: 440-07-13-006

Denver
St Joseph Hospital Program
St Joseph Hospital
Program Director:
Jeffrey R Clark, MD
St Joseph Hospital
Surgery Education
1335 Franklin St
Denver, CO 80218-1121
303 227-7410
Length: 5 Year(s)  Total Positions: 20 (GYI: 12)
Program ID: 440-07-22-067

University of Colorado Program
University of Colorado Health Sciences Center
Denver Health and Hospitals
Rose Medical Center
Veterans Affairs Medical Center (Denver)
Program Director:
C Edward Hartford, MD
University of Colorado Health Sciences Center
4200 E Ninth Ave Campus Box C-302
Denver, CO 80262
303 270-7440
Length: 5 Year(s)  Total Positions: 64 (GYI: 22)
Subspecialties: PDS
Program ID: 440-07-21-055

Connecticut
Bridgeport
Bridgeport Hospital Program
Bridgeport Hospital
Program Director:
Marvin A McMillen, MD
Bridgeport Hospital
267 Grant St PO Box 5000
Bridgeport, CT 06610-5000
203 384-3111
Length: 5 Year(s)  Total Positions: 13 (GYI: 4)
Program ID: 440-08-21-059

Farmington
University of Connecticut Program
University of Connecticut School of Medicine
Hartford Hospital
Mount Sinai Hospital
New Britain General Hospital
St Francis Hospital and Medical Center
Univ of Connecticut Health Center/John Dempsey Hospital
Program Director:
Steven T Ruby, MD
University of Connecticut School of Medicine
Dept of Surgery
Farmington, CT 06030-3955
203 679-3407
Length: 5 Year(s)  Total Positions: 49 (GYI: 21)
Subspecialties: CCS
Program ID: 440-08-21-390

New Haven
Hospital of St Raphael Program
Hospital of St Raphael
Griffin Hospital
Program Director:
Ralph B Reinbold, MD
Hospital of Saint Raphael
1450 Chapel St
New Haven, CT 06511
203 789-3501
Length: 5 Year(s)  Total Positions: 25 (GYI: 8)
Program ID: 440-08-21-663

Yale-New Haven Medical Center Program
Yale-New Haven Hospital
Veterans Affairs Medical Center (West Haven)
Program Director:
Bauer S Sample, MD PhD
Yale Univ Sch of Med
333 Cedar St
New Haven, CT 06520-8047
203 737-4366
Length: 5 Year(s)  Total Positions: 38 (GYI: 18)
Subspecialties: CDS, PDS
Program ID: 440-08-21-664

Waterbury
St Mary’s Hospital Program
St Mary’s Hospital
Program Director:
V Timothy Shea Jr, MD
St Mary’s Hospital
56 Franklin St
Waterbury, CT 06706
203 574-6314
Length: 5 Year(s)  Total Positions: 14 (GYI: 5)
Program ID: 440-06-21-065

Waterbury Hospital Health Center Program
Waterbury Hospital Health Center
Yale-New Haven Hospital
Program Director:
Edward M Konolick, MD
Waterbury Hospital Health Center
64 Robbins St
Waterbury, CT 06701
203 773-7357
Length: 5 Year(s)  Total Positions: 12 (GYI: 4)
Program ID: 440-06-11-066

* Updated information not provided.
Delaware

Wilmington

The Medical Center of Delaware Program
The Medical Center of Delaware
Program Director: Denis J. Hoekstra, MD
Medical Center of Delaware
Dept of Surgery Ste 128
4145 Ogletown-Stanton Rd
Newark, DE 19713
302 731-4854
Length: 5 Year(s) Total Positions: 23 (GYI: 7)
Program ID: 440-00-11-087

District of Columbia

Washington

George Washington University Program
George Washington University School of Medicine
Children's National Medical Center
George Washington University Hospital
Holy Cross Hospital of Silver Spring
Veterans Affairs Medical Center (Washington, DC)
Program Director: Bruce A. Orkin, MD
Dept of Surgery
2150 Pennsylvania Ave NW
Washington, DC 20037
202 994-5573
Length: 6 Year(s) Total Positions: 30 (GYI: 13)
Program ID: 440-10-21-069

Georgetown University Program
Georgetown University Hospital
Arlington Hospital
District of Columbia General Hospital
Fairfax Hospital
Veterans Affairs Medical Center (Washington, DC)
Program Director: Russell J. Nauta, MD
Georgetown University Hospital
Dept of Surgery
3800 Reservoir Rd NW
Washington, DC 20007
202 687-8783
Length: 5 Year(s) Total Positions: 46 (GYI: 18)
Program ID: 440-10-21-068

Howard University Program
Howard University Hospital
District of Columbia General Hospital
Greater Southeast Community Hospital
Howard University Hospital Center
Program Director: LaSalle D. Leffall Jr, MD
Dept of Surgery 4B02
Howard University Hospital
2441 Georgia Ave NW
Washington, DC 20059
202 866-1441
Length: 5 Year(s) Total Positions: 37 (GYI: 9)
Program ID: 440-10-21-070

Walter Reed Army Medical Center Program
Walter Reed Army Medical Center
Program Director: David P. Jaques, MD
Chief Department of Surgery
Walter Reed Army Medical Center
6955 10th St NW
Washington, DC 20307-5001
202 782-6968
Length: 6 Year(s) Total Positions: 27 (GYI: 8)
Subspecialties: VS
Program ID: 440-10-11-007

Washington Hospital Center Program
Washington Hospital Center
Program Director: John R. Kirkpatrick, MD
Washington Hospital Center
110 Irving St NW
Ste NAG-553
Washington, DC 20010-3975
202 877-6425
Length: 5 Year(s) Total Positions: 41 (GYI: 10)
Program ID: 440-10-31-071

Florida

Gainesville

University of Florida Program
University of Florida College of Medicine
Shands Hospital at the University of Florida
Veterans Affairs Medical Center (Gainesville)
Veterans Affairs Medical Center (Lake City)
Program Director: Timothy C. Flynn, MD
University Florida Dept of Surgery
College of Medicine
Box 100378
Gainesville, FL 32610-0378
352 206-0608
Length: 5 Year(s) Total Positions: 38 (GYI: 20)
Subspecialties: VS
Program ID: 449-11-21-072

Jacksonville

University of Florida Health Science Center/ Jacksonville Program
University Medical Center (UFHSC)
Program Director: Joseph J. Tepas III, MD
Univ of Florida Health Science Center/Jacksonville
665 W Eighth St
Jacksonville, FL 32209
904 648-3060
Length: 5 Year(s) Total Positions: 30 (GYI: 8)
Program ID: 449-11-21-073

Miami

University of Miami-Jackson Memorial Medical Center Program
University of Miami-Jackson Memorial Medical Center
Veterans Affairs Medical Center (Miami)
Program Director: Donato G Huertas, MD
Univ of Miami-Jackson Men Med Ctr 1200 Maria Elias
Dept of Surgery
PO Box 016010
Miami, FL 33101
305 696-7103
Length: 5 Year(s) Total Positions: 54 (GYI: 24)
Subspecialties: CCS
Program ID: 449-11-21-074

Miami Beach

Mount Sinai Medical Center of Greater Miami Program
Mount Sinai Medical Center of Greater Miami
Memorial Hospital
University of Miami-Jackson Memorial Medical Center
Program Director: Manuel Sivina, MD
Mount Sinai Medical Center of Greater Miami
4300 Alton Rd
Suite 212-A
Miami Beach, FL 33140
305 674-2760
Length: 5 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 440-11-22-075

Orlando

Orlando Regional Healthcare System Program
Orlando Regional Medical Center
Program Director: Charles A. Bues, MD
Orlando Regional Medical Center
1414 Kilb Ave
Box 100
Orlando, FL 32806
407 841-5142
Length: 5 Year(s) Total Positions: 15 (GYI: 5)
Program ID: 440-11-11-076

Tampa

University of South Florida Program
University of South Florida College of Medicine
James A. Haley Veterans Hospital
Tampa General Healthcare
Veterans Affairs Medical Center (Bay Pines)
Program Director: Peter J. Paor, MD
Dept of Surgery
University of South Florida
12002 Bruce B Downs Blvd Box 16
Tampa, FL 33612-4799
813 877-7027
Length: 5 Year(s) Total Positions: 44 (GYI: 13)
Subspecialties: VS
Program ID: 440-11-31-078

Georgia

Atlanta

Emory University Program
Emory University School of Medicine
Crawford Long Hospital of Emory University
Emory University Hospital
Grady Memorial Hospital
Henrietta Egleston Hospital for Children
Piedmont Hospital
Veterans Affairs Medical Center (Atlanta)
Program Director: William C Wood, MD
Emory University School of Medicine
Glenn Memorial Medical Center
66 Butler St SE Ste 314
Atlanta, GA 30303
404 476-3563
Length: 5 Year(s) Total Positions: 69 (GYI: 14)
Subspecialties: VS
Program ID: 440-12-12-079

* Updated information not provided.
Savannah
Memorial Medical Center Program
Memorial Medical Center
Program Director:
Carl R. Boyd, MD
Memorial Medical Center
PO Box 22094
Savannah, GA 31405-2094
912-350-5084
Length: 5 Year(s) Total Positions: 14 (GYS: 6)
Program ID: 440-13-31-189

Hawaii
Honolulu
University of Hawaii Program
University of Hawaii John A Burns School of Medicine
Kaiser Foundation Hospital (Honolulu)
Kapiolani Medical Center for Women and Children
Queen's Medical Center
St Francis Medical Center
Straub Clinic and Hospital
Program Director:
Judson McNamara, MD
University of Hawaii Integrated
Surgical Residency Prog
3500 Lunalilo Hwy Rm 612
Honolulu, HI 96813
808-522-2222
Length: 5 Year(s) Total Positions: 20 (GYS: 12)
Subspecialties: OUS
Program ID: 440-14-31-085

Tripler AMC
Tripler Army Medical Center Program
Tripler Army Medical Center
Program Director:
Paul R. Correll, MD
General Surgery Service
Tripler Army Medical Center
Honolulu, HI 96859-5000
808-433-3434
Length: 5 Year(s) Total Positions: 24 (GYS: 7)
Program ID: 440-14-31-088

Illinois
Chicago
Columbus Hospital Program
Columbus Hospital
Program Director:
Mary M Condrey, MD
Columbus Hospital
Dept of Surgery
2530 N Lakeview Ave
Chicago, IL 60614
312-583-0787
Length: 5 Year(s) Total Positions: 8 (GYS: 4)
Program ID: 440-16-31-086

McGaw Medical Center of Northwestern University Program
Northwestern University Medical School
Evantion Hospital
Northwestern Memorial Hospital
Veteran Affairs Lakeside Medical Center (Chicago)
Program Director:
David L. Nachwold, MD
Northwestern University Medical School
250 E Superior St Ste 201
Chicago, IL 60611
312-996-5069
Length: 5 Year(s) Total Positions: 58 (GYS: 29)
Subspecialties: OUS
Program ID: 440-16-31-091

Rush Medical College Program*
Rush-Presbyterian-St Luke's Medical Center
ERHS Christ Hospital and Medical Center
Program Director:
Richard A. Pirnie, MD
Rush-Presbyterian-St Luke's Medical Center
1633 W Congress Pl
Chicago, IL 60612-3845
312-942-5279
Length: 5 Year(s) Total Positions: 51 (GYS: 22)
Program ID: 440-16-31-102

University of Chicago Program
University of Chicago Hospitals
Lutheran General Hospital
Program Director:
Robert J. Baren, MD
University of Chicago Hospital
5841 S Maryland Ave MC 5093
Chicago, IL 60637-1470
312-735-5217
Length: 5 Year(s) Total Positions: 35 (GYS: 8)
Subspecialties: OUS
Program ID: 440-16-31-044

University of Illinois College of Medicine at Chicago Metropolitan Group Hospitals Program
University of Illinois College of Medicine at Chicago
Illinois Masonic Medical Center
Navy Hospital and Medical Center
St Francis Hospital of Evanston
Program Director:
Yosef H. Batsch, MD
Metropolitan Group Hospitals
336 W Wellington Ave
Rm 4013
Chicago, IL 60657-5103
312-296-7083
Length: 5 Year(s) Total Positions: 36 (GYS: 12)
Program ID: 440-16-31-096

University of Illinois College of Medicine at Chicago Program
University of Illinois College of Medicine at Chicago
EHS Christ Hospital and Medical Center
Michael Reese Hospital and Medical Center
University of Illinois Hospital and Clinics
Veteran Affairs Westside Medical Center (Chicago)
Program Director:
Charles L. Rice, MD
University of Illinois at Chicago
Dept of Surgery (MC 909)
580 S Wood St Rm 516 CNS
Chicago, IL 60612-7322
312-896-7665
Length: 5 Year(s) Total Positions: 70 (GYS: 23)
Program ID: 440-16-31-395

a Updated information not provided.
Maywood
Loyola University Program
Foster G McGaw Hospital-Loyola University of Chicago
Edward J Rucka Jr Veterans Affairs Hospital
MacNeal Memorial Hospital
Resurrection Medical Center
Program Director:
William H Baker, MD
Loyola University Medical Center
Dept of Surgery
2160 S First Ave
Maywood, IL 60153
708 216-8187
Length: 5 Year(s) Total Positions: 64 (GYI: 26)
Subspecialties: VS
Program ID: 440-76-21-009

North Chicago
Fitch University of Health Sciences/Chicago Medical School Program
Fitch University of Health Sciences/Chicago Medical School
Mount Sinai Hospital Medical Center of Chicago
Veterans Affairs Medical Center (North Chicago)
Program Director:
William Schumar, MD
Fitch Univ of Health Sciences/The Chicago Medical School
Dept of Surgery
California Ave at 15th St
Chicago, IL 60663
312 257-4454
Length: 5 Year(s) Total Positions: 28 (GYI: 6)
Program ID: 440-16-21-385

Peoria
University of Illinois College of Medicine at Peoria Program
University of Illinois College of Medicine at Peoria
St Francis Medical Center
Program Director:
Hugh V Firor, MD
University of Illinois College of Medicine at Peoria
Dept of Surgery
420 NE Green Oak Ste 302
Peoria, IL 61603
309 685-3971
Length: 5 Year(s) Total Positions: 11 (GYI: 3)
Program ID: 440-16-21-101

Springfield
Southern Illinois University Program
Southern Illinois University School of Medicine
Memorial Medical Center
St John's Hospital
Program Director:
Alan G Birtch, MD
Southern Illinois University School of Medicine
PO Box 19239 Mail Code 1312
800 N Radog
Springfield, IL 62704-9230
217 785-8874
Length: 5 Year(s) Total Positions: 29 (GYI: 8)
Subspecialties: VS
Program ID: 440-16-21-102

Indiana
Indianapolis
Indiana University Medical Center Program
Indiana University Medical Center
Richard L Roudebush Veterans Affairs Medical Center
William N Wilkward Memorial Hospital
Program Director:
Jay L Greenfield, MD
Indiana University Medical Center
545 N Barchill Dr
Indianapolis, IN 46202-5125
317 274-4865
Length: 5 Year(s) Total Positions: 49 (GYI: 18)
Program ID: 440-17-21-103

Methodist Hospital of Indiana Program
Methodist Hospital of Indiana
Program Director:
William W Turner Jr, MD
Methodist Hospital of Indiana
1633 N Capitol Ave Ste 650
Indianapolis, IN 46202
317 595-6540
Length: 5 Year(s) Total Positions: 34 (GYI: 12)
Subspecialties: VS
Program ID: 440-19-21-106

Iowa
Des Moines
Iowa Methodist Medical Center Program
Iowa Methodist Medical Center
Broadlawns Medical Center
Program Director:
Donald W Norrman, MD
Iowa Methodist Medical Center
Dept of Surgery
1221 Pleasant St Ste 556
Des Moines, IA 50309-1405
515 241-0766
Length: 5 Year(s) Total Positions: 12 (GYI: 4)
Program ID: 440-19-21-105

Veterans Affairs Medical Center Program
Veterans Affairs Medical Center (Des Moines)
Mercy Hospital Medical Center
Program Director:
Lester D Raggedstl II, MD
Veterans Administration Medical Center
Surgical Services
3600 39th St.
Des Moines, IA 50310-6774
515 271-5826
Length: 5 Year(s) Total Positions: 15 (GYI: 7)
Program ID: 440-19-11-106

Iowa City
University of Iowa Hospitals and Clinics Program
University of Iowa Hospitals and Clinics
Veterans Affairs Medical Center (Iowa City)
Program Director:
W John Sharp, MD
University of Iowa Hospitals and Clinics
Dept of Surgery
Iowa City, IA 52242-1000
319 356-1766
Length: 5 Year(s) Total Positions: 35 (GYI: 9)
Subspecialties: VS
Program ID: 440-18-21-107

Kansas
Kansas City
University of Kansas Medical Center Program
University of Kansas School of Medicine
 Dwight D Eisenhower Veterans Affairs Medical Center
University of Kansas Medical Center
Veterans Affairs Medical Center (Kansas City)
Program Director:
Latravus Y Cheung, MD
Univ of Kansas Medical Center
30th & Rainbow Blvd
Kansas City, KS 66109-7385
913 588-6101
Length: 5 Year(s) Total Positions: 34 (GYI: 12)
Subspecialties: VS
Program ID: 440-19-21-108

Wichita
University of Kansas (Wichita) Program
University of Kansas School of Medicine (Wichita)
St Francis Regional Medical Center
Wesley Medical Center
Program Director:
George J Farha, MD
St Francis Regional Medical Center
529 N St Francis
Wichita, KS 67214-3882
316 269-5000
Length: 5 Year(s) Total Positions: 30 (GYI: 6)
Program ID: 440-19-21-387

Kentucky
Lexington
University of Kentucky Medical Center Program
University of Kentucky Albert B Chandler Medical Center
Veterans Affairs Medical Center (Lexington)
Program Director:
William E Strodt, MD
University of Kentucky Dept of General Surgery
880 Rose St
Lexington, KY 40536-0084
859 323-6346
Length: 5 Year(s) Total Positions: 40 (GYI: 16)
Program ID: 440-20-21-112

Louisville
University of Louisville Program
University of Louisville School of Medicine
 Kosair Children's Hospital (Alliant Health System)
 Norton Hospital (Alliant Health System)
 University of Louisville Hospital
Veterans Affairs Medical Center (Louisville)
Program Director:
Hiram C Polk Jr, MD
Dept of Surgery
School of Medicine
University of Louisville
Louisville, KY 40292
502 852-6442
Length: 5 Year(s) Total Positions: 44 (GYI: 16)
Subspecialties: ISS
Program ID: 440-20-21-113

* Updated information not provided.
Accredited Programs in Surgery-General

Louisiana

New Orleans
Alton Ochsner Medical Foundation Program
Alton Ochsner Medical Foundation Leonard J Chabert Medical Center
Program Director: John C Bowes, MD
Alton Ochsner Med Foundation Dept of Graduate Med Educ
1516 Jefferson Hwy
New Orleans, LA 70121
504 842-4072
Length: 5 Year(s) Total Positions: 34 (GYI: 9)
Subspecialties: VS
Program ID: 440-21-21-115

Louisiana State University Program
Louisiana State University School of Medicine Earl K Long Medical Center
Medical Center of Louisiana at New Orleans-LSU Division University Medical Center (Lafayette)
Veterans Affairs Medical Center-LSU service (New Orleans)
Program Director: J Patrick O'Keary, MD
Louisiana State University Dept of Surgery
1542 Tulane Ave
New Orleans, LA 70112-2822
604 568-4751
Length: 5 Year(s) Total Positions: 61 (GYI: 29)
Subspecialties: VS
Program ID: 440-21-21-114

Tulane University Program
Tulane University School of Medicine Hope P Long Regional Medical Center Medical Center of Louisiana at New Orleans-Tulane Division Touro Infirmary Tulane University Hospital and Clinics
Program Director: Lewis M Flint, MD
Tulane University School of Medicine Dept of Surgery
1430 Tulane Ave
New Orleans, LA 70112-2699
504 861-1983
Length: 5 Year(s) Total Positions: 58 (GYI: 21)
Program ID: 440-21-21-116

Shreveport
Louisiana State University (Shreveport) Program
Louisiana State University Medical Center-Shreveport E A Conway Medical Center
Overton Brooks Veterans Affairs Medical Center Willis-Knighton Medical Center
Program Director: John C McDonald, MD
Louisiana State University Medical Center Hospital Medical Educ - Surgery
1501 Kings Hwy PO Box 33932
Shreveport, LA 71130-3932
318 675-6100
Length: 5 Year(s) Total Positions: 35 (GYI: 9)
Program ID: 440-21-21-117

Maine

Portland
Maine Medical Center Program
Maine Medical Center Mercy Hospital
Program Director: Albert W Dibbins, MD
Dept of Surgery
Maine Medical Center
22 Bramhall St
Portland, ME 04102
207 871-6111
Length: 5 Year(s) Total Positions: 22 (GYI: 6)
Program ID: 440-21-21-119

Maryland

Baltimore
Johns Hopkins University Program
Johns Hopkins University School of Medicine
Johns Hopkins Bayview Medical Center
Johns Hopkins Hospital Sinai Hospital of Baltimore
Program Director: John L Cameron, MD
The Johns Hopkins Hospital
720 Rutland Ave
Baltimore, MD 21205
410 955-5166
Length: 5 Year(s) Total Positions: 70 (GYI: 12)
Program ID: 440-21-21-392

St Agnes Hospital of the City of Baltimore Program
St Agnes Hospital of the City of Baltimore
Program Director: Michael A Zacina, MD
St Agnes Hospital
900 Caton Ave
Baltimore, MD 21229
410 366-2719
Length: 5 Year(s) Total Positions: 21 (GYI: 7)
Program ID: 440-21-21-123

Union Memorial Hospital Program
Union Memorial Hospital
Program Director: James C Fuchs, MD
Union Memorial Hospital
201 E University Pkwy
Baltimore, MD 21218-2895
410 554-2395
Length: 5 Year(s) Total Positions: 20 (GYI: 8)
Subspecialties: ISS
Program ID: 440-21-21-127

University of Maryland Program
University of Maryland Medical System
Mercy Medical Center
Program Director: William A Scott, MD
University of Maryland Medical System Dept of Surgery
22 S Greene St
Baltimore, MD 21201
410 328-5877
Length: 5 Year(s) Total Positions: 46 (GYI: 18)
Subspecialties: VS
Program ID: 440-21-21-128

Bethesda

National Naval Medical Center (Bethesda) Program
National Naval Medical Center (Bethesda)
Washington Hospital Center
Program Director: Remal C Gnehm, MD
Dept of General Surgery
National Naval Medical Center
8801 Wisconsin Ave
Bethesda, MD 20889-5800
301 286-4474
Length: 5 Year(s) Total Positions: 28 (GYI: 15)
Program ID: 440-21-21-014

Massachusetts

Boston
Beth Israel Hospital Program
Beth Israel Hospital
Program Director: Robert Johnson, MD
Beth Israel Hospital
200 Brookline Ave
Boston, MA 02215
617 736-3329
Length: 5 Year(s) Total Positions: 28 (GYI: 10)
Program ID: 440-21-11-139

Boston University Program
Boston University Medical Center-Boston Hospital Boston City Hospital Brockton Hospital Carney Hospital Veterans Affairs Medical Center (Boston)
Program Director: James M Becker, MD
Boston University PPGs
88 E Newton St B-506
Boston, MA 02118-2093
617 638-8941
Length: 5 Year(s) Total Positions: 43 (GYI: 17)
Subspecialties: CSS,GS,VS
Program ID: 440-21-11-131

Brigham and Women's Hospital Program
Brigham and Women's Hospital Brookline-West Roxbury Veterans Affairs Medical Center
Program Director: Robert Osteen, MD
Brigham and Women's Hospital
75 Francis St
Boston, MA 02115
617 732-6501
Length: 5 Year(s) Total Positions: 40 (GYI: 13)
Subspecialties: VS
Program ID: 440-21-11-135

Massachusetts General Hospital Program
Massachusetts General Hospital
Program Director: Leslie W Ottinger, MD
Massachusetts General Hospital Fruit St
Boston, MA 02114
617 726-2800
Length: 5 Year(s) Total Positions: 40 (GYI: 10)
Subspecialties: VS
Program ID: 440-24-31-132

* Updated information not provided.
New England Deaconess Hospital/Harvard Medical School Program
New England Deaconess Hospital Faulkner Hospital Mount Auburn Hospital Veterans Affairs Medical Center (Manchester)
Program Director: Albert Bobe Jr, MD New England Deaconess Hospital
One Deaconess Rd Boston, MA 02215 617 632-9774
Length: 5 Year(s) Total Positions: 38 (GYI: 12) Subspecialties: VS
Program ID: 440-24-21-133

New England Medical Center Hospitals Program
New England Medical Center Hospitals Faulkner Hospital Newton-Wellesley Hospital Veterans Affairs Medical Center (Boston)
Program Director: Thomas F O'Donnell Jr, MD New England Medical Center Box 250 750 Washington St Boson, MA 02111 617 632-5800
Length: 5 Year(s) Total Positions: 31 (GYI: 53) Subspecialties: VS
Program ID: 440-24-21-134

St Elizabeth's Medical Center of Boston Program
St Elizabeth's Medical Center of Boston Cardinal Cushing General Hospital
Program Director: James G Petros, MD St Elizabeth's Medical Center of Boston
739 Cambridge St Boston, MA 02138 617 789-2990
Length: 5 Year(s) Total Positions: 18 (GYI: 6) Program ID: 440-24-21-135

Burlington Lahey Clinic Foundation Program
Lahey Clinic
Program Director: John W Brauch, MD Lahey Medical Center Dept of General Surgery 41 Mall Rd Burlington, MA 01805 617 564-5421
Length: 5 Year(s) Total Positions: 15 (GYI: 4) Program ID: 440-24-21-401

Pittsfield Berkshire Medical Center Program
Berkshire Medical Center
Program Director: Parvij S Sadighi, MD Dept of Surgery Berkshire Medical Center Pittsfield, MA 01201 413 447-2741
Length: 5 Year(s) Total Positions: 18 (GYI: 5) Program ID: 440-24-31-137

Springfield Baystate Medical Center Program
Baystate Medical Center
Program Director: Paul Friedmann, MD Baystate Medical Center Dept of Surgery 759 Chestnut St Springfield, MA 01199 413 794-3061
Length: 5 Year(s) Total Positions: 28 (GYI: 8) Program ID: 440-24-21-138

Worcester University of Massachusetts Medical Center Program*
University of Massachusetts Medical Center Medical Center of Central Massachusetts St Vincent Hospital
Program Director: Wayne R Silva, MD University of Massachusetts Medical Center 55 Lake Ave N Worcester, MA 01655 508 538-5837 Length: 5 Year(s) Total Positions: 46 (GYI: 16) Subspecialties: VS Program ID: 440-24-21-139

Michigan Ann Arbor
St Joseph Mercy Hospital Program
St Joseph Mercy Hospital (Catherine McAuley Health System)
Program Director: Verne L Hornal Jr, MD St Joseph Mercy Hospital 5001 E Huron River Dr RHB-2111 PO Box 985 Ann Arbor, MI 48106 734 764-3669 Length: 5 Year(s) Total Positions: 19 (GYI: 6) Program ID: 440-25-11-140

University of Michigan Program
University of Michigan Hospitals
Veterans Affairs Medical Center (Ann Arbor)
Program Director: Lazar J Greenfield, MD University of Michigan Hospitals 1560 E Medical Center Dr Ann Arbor, MI 48109-0342 734 936-5723 Length: 5 Year(s) Total Positions: 30 (GYI: 11) Subspecialties: CSS,VS Program ID: 440-25-21-141

Detroit Henry Ford Hospital Program
Henry Ford Hospital
Program Director: Frank R Lewis, MD Henry Ford Hospital 2798 W Grand Blvd Detroit, MI 48202-2880 313 874-3523 Length: 5 Year(s) Total Positions: 36 (GYI: 10) Subspecialties: CSS,VS Program ID: 440-25-12-143

Sinai Hospital Program
Sinai Hospital
Program Director: Murray G Kling, MD Sinai Hospital 6747 W Outer Dr Detroit, MI 48235-2896 313 453-5770 Length: 5 Year(s) Total Positions: 16 (GYI: 6) Program ID: 440-25-11-144

St John Hospital and Medical Center Program
St John Hospital and Medical Center
Program Director: Larry B Lloyd, MD St John Hospital and Medical Center Department of Medical Education 22101 Morros Rd Detroit, MI 48236 313 343-3875 Length: 5 Year(s) Total Positions: 24 (GYI: 6) Program ID: 440-25-11-145

Wayne State University/Detroit Medical Center Program
Wayne State University School of Medicine Detroit Receiving Hospital and University Health Center Grace Hospital Harper Hospital Veterans Affairs Medical Center (Allen Park)
Program Director: David Pronk, MD University Health Center 6C Dept of Surgery 4401 St Antoine Detroit, MI 48201 313 745-8778 Length: 5 Year(s) Total Positions: 56 (GYI: 18) Subspecialties: VS Program ID: 440-25-21-146

East Lansing Michigan State University Program
Michigan State University College of Human Medicine McLaren Regional Medical Center Michigan Osphal Medical Center Sparrow Hospital St Lawrence Hospital and HealthCare Services
Program Director: Richard E Dean, MD Michigan State University Dept of Surgery E 424 Clinical Ctr East Lansing, MI 48824-1315 517 353-8730 Length: 5 Year(s) Total Positions: 20 (GYI: 6) Program ID: 440-25-21-896

Grand Rapids Blodgett Memorial Medical Center/St Mary's Health Services Program
Blodgett Memorial Medical Center St Mary's Health Services
Program Director: William J Pasinault, MD St Mary's Health Services Medical Education Office 200 Jefferson Grand Rapids, MI 49503 616 774-4742 Length: 5 Year(s) Total Positions: 20 (GYI: 5) Program ID: 440-25-11-152

* Updated information not provided.

Graduate Medical Education Directory 779
Butterworth Hospital/Michigan State University Program
Butterworth Hospital
Program Director: Donald J Schotten, MD
Center for Surgical Education 221 Michigan NE
Ste 200
Grand Rapids, MI 49503
616 774-1681
Length: 5 Year(s) Total Positions: 23 (GYT: 8)
Program ID: 440-25-31-139

Kalamazoo
Kalamazoo Center for Medical Studies/Michigan State University Program
Kalamazoo Center for Medical Studies
Borgess Medical Center
Bresnen Methodist Hospital
Program Director: Duane T Feeser, MD
Michigan State Univ Kalamazoo Ctr for Med Studies
1000 Oakland Dr
Kalamazoo, MI 49008
616 337-9280
Length: 5 Year(s) Total Positions: 14 (GYT: 4)
Program ID: 440-25-31-140

Pontiac
North Oakland Medical Center Program
North Oakland Medical Centers
Program Director: Yvan J Silva, MD
North Oakland Medical Centers
461 W Huron
Pontiac, MI 48341
810 897-7314
Length: 5 Year(s) Total Positions: 12 (GYT: 4)
Program ID: 440-25-11-156

St Joseph Mercy Hospital Program
St Joseph Mercy Community HealthCare System
Program Director: Allan Silbergeld, MD PhD
St Joseph Mercy Hospital
900 Woodward Ave
Pontiac, MI 48341-5485
313 858-3334
Length: 5 Year(s) Total Positions: 14 (GYT: 4)
Program ID: 440-55-11-157

Royal Oak
William Beaumont Hospital Program
William Beaumont Hospital
William Beaumont Hospital-Troy
Program Director: John L Glover, MD
William Beaumont Hospital
3601 W 13 Mile Rd
Royal Oak, MI 48073-6769
313 551-0100
Length: 6 Year(s) Total Positions: 30 (GYT: 8)
Program ID: 440-25-31-158

Saginaw
Saginaw Cooperative Hospitals Program
Saginaw Cooperative Hospitals Inc
Saginaw General Hospital
St Luke's Hospital
St Mary's Medical Center
Program Director: James C Gruenberg, MD
Saginaw Cooperative Hospitals
1000 Houghton Ste 6000
Saginaw, MI 48602
517 771-5827
Length: 5 Year(s) Total Positions: 18 (GYT: 3)
Program ID: 440-25-31-119

Southfield
Providence Hospital Program
Providence Hospital
Samaritan Health Center
Program Director: Shun C Young, MD
Providence Hospital
Med Rutac 1001 W Nine Mile Rd
Southfield, MI 48075
810 242-3073
Length: 5 Year(s) Total Positions: 22 (GYT: 10)
Program ID: 440-25-21-160

Minnesota
Minneapolis
Hennepin County Medical Center Program
Hennepin County Medical Center
Program Director: Donald M Jacobs, MD
Hennepin County Medical Center
761 Park Ave
Minneapolis, MN 55415
612 394-2319
Length: 5 Year(s) Total Positions: 28 (GYT: 10)
Program ID: 440-26-11-161

University of Minnesota Program
University of Minnesota Medical School
North Memorial Medical Center
91 Paul-Burns Medical Center
University of Minnesota Hospital and Clinic
Veterans Affairs Medical Center (Minneapolis)
Program Director: John Najarian, MD
Univ of Minnesota Phillips-Wangensteen Bldg
Dept of Surgery
616 Delaware St SE Box 165
Minneapolis, MN 55455-6082
612 624-8444
Length: 5 Year(s) Total Positions: 112 (GYT: 22)
Subspecialties: CCS
Program ID: 440-28-31-162

Rochester
Mayo Graduate School of Medicine (Scottsdale) Program
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Scottsdale)
Scottsdale Memorial Hospital North
Program Director: Keith A Kelly, MD
Dept of Surgery
Mayo Clinic Scottsdale
13400 E Shea Blvd
Scottsdale, AZ 85259
602 391-8000
Length: 5 Year(s) Total Positions: 5 (GYT: 4)
Program ID: 440-09-21-142

Mayo Graduate School of Medicine Program
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Rochester)
Rochester Methodist Hospital
St Mary's Hospital of Rochester
Program Director: David M Nagorney, MD
MGISM Application Processing Center
Mayo Graduate School of Medicine
300 First St SW
Rochester, MN 55905
507 284-5240
Length: 5 Year(s) Total Positions: 32 (GYT: 22)
Subspecialties: CCS,VS
Program ID: 440-28-21-163

Mississippi
Jackson
University of Mississippi Medical Center Program
University of Mississippi School of Medicine
University Hospital
Veterans Affairs Medical Center (Jackson)
Program Director: Robert S Rhodes, MD
University of Mississippi Medical Center
2500 N State St
Jackson, MS 39216-4030
601 984-5100
Length: 5 Year(s) Total Positions: 38 (GYT: 6)
Program ID: 440-37-31-165

Keesler AFB
Keesler Medical Center Program
Keesler Medical Center
Veterans Affairs Medical Center (Biloxi)
Program Director: Lt Col James E Foster II, MD
AFPC R131 MHS/SGHS
301 Fisher St Suite 204
Keesler AFB, MS 39534-2257
601-377-6558
Length: 5 Year(s) Total Positions: 26 (GYT: 8)
Program ID: 440-37-31-002

* Updated information not provided.
Missouri

Columbia

University of Missouri-Columbia Program
University of Missouri-Columbia School of Medicine
Harry S Truman Memorial Veterans Hospital
University and Children's Hospital
Program Director:
Michael H Metzler, MD
University Missouri Hospital and Clinics
Div of General Surgery N029
One Hospital Dr
Columbia, MO 65212
314-882-2965
Length: 5 Year(s) Total Positions: 20 (GYI: 5)
Subspecialties: VS
Program ID: 440-28-21-166

Washington University Program
Barnes Hospital
Jewish Hospital of St Louis
St Louis Regional Medical Center
Veterans Affairs Medical Center (St Louis)
Program Director:
Samuel A Wells Jr, MD
Washington Univ School of Medicine
10th Pl Walt Hospital Box 8119
660 S Euclid Ave
St Louis, MO 63110
314-362-6020
Length: 5 Year(s) Total Positions: 73 (GYI: 27)
Subspecialties: VS
Program ID: 440-28-21-388

Kansas City

University of Missouri at Kansas City (St Luke's) Program*
St Luke's Hospital
Truman Medical Center-West
Program Director:
Charles W Van Way, MD
St Luke's Hospital
44th & Wornall Rd
Kansas City, MO 64111
816-382-3977
Length: 5 Year(s) Total Positions: 13 (GYI: 4)
Program ID: 440-28-11-169

University of Missouri at Kansas City Program
University of Missouri-Kansas City School of Medicine
Truman Medical Center-West
Program Director:
L Beaty Pemberton, MD
UMCK Department of Surgery
2391 Holmes St
Kansas City, MO 64108
816-566-3065
Length: 5 Year(s) Total Positions: 31 (GYI: 10)
Program ID: 440-28-21-168

St Louis

St Louis University Group of Hospitals Program
St Louis University School of Medicine
Cardinal Glennon Children's Hospital
St John's Mercy Medical Center
St Louis University Hospital
St Mary's Health Center
Veterans Affairs Medical Center (St Louis)
Program Director:
Donald L Kaminski, MD
St Louis University School of Medicine
3650 Vista Ave at Grand Blvd
PO Box 12520
St Louis, MO 63110-2500
314-577-3533
Length: 5 Year(s) Total Positions: 27 (GYI: 11)
Subspecialties: CCS,PO,S,VS
Program ID: 440-28-21-171

Nebraska

Omaha

Creighton University Program
Creighton/Nebraska University Health Foundation
AMH St Joseph Hospital at Creighton University Medical Center
Veterans Affairs Medical Center (Lincoln)
Veterans Affairs Medical Center (Omaha)
Program Director:
Donald A Hinder, MD
Creighton University Dept of Surgery
601 N 30th St
Ne 3740
Omaha, NE 68131
402-289-4009
Length: 5 Year(s) Total Positions: 22 (GYI: 8)
Program ID: 440-30-31-175

University of Nebraska Program
University of Nebraska Medical Center
Veterans Affairs Medical Center (Omaha)
Program Director:
James A Edney, MD
University of Nebraska Medical Center
600 S 42nd St
Omaha, NE 68198-3280
402-559-7272
Length: 5 Year(s) Total Positions: 28 (GYI: 10)
Program ID: 440-30-21-176

Nevada

Reno

University of Nevada Program
University of Nevada School of Medicine
University of Nevada Medical Center of Southern Nevada
Inoziai A Lougans Veterans Affairs Medical Center
Program Director:
Alex G Little, MD
University of Nevada Dept of Surgery
2040 W Charleston Blvd Ste 601
Las Vegas, NV 89102
702-385-1080
Length: 5 Year(s) Total Positions: 16 (GYI: 3)
Program ID: 440-38-21-778

New Hampshire

Lebanon

Dartmouth-Hitchcock Medical Center Program
Mary Hitchcock Memorial Hospital
Veterans Affairs Medical Center (White River Junction)
Program Director:
Robert W Cricklow, MD
Dartmouth-Hitchcock Medical Center
One Medical Center Dr
Lebanon, NH 03756
603-650-7400
Length: 5 Year(s) Total Positions: 33 (GYI: 13)
Subspecialties: VS
Program ID: 440-38-21-177

New Jersey

Camden

UMDNJ-Robert Wood Johnson Medical School (Camden) Program
Cooper Hospital-University Medical Center
Program Director:
Thomas V Whelan, MD
Cooper Hospital-University Medical Center
Three Cooper Plaza Ste 411
Camden, NJ 08103
609-440-2012
Length: 5 Year(s) Total Positions: 11 (GYI: 3)
Subspecialties: CCS
Program ID: 440-33-21-179

Livingston

St Barnabas Medical Center Program
St Barnabas Medical Center
Program Director:
Francis C Nance, MD
St Barnabas Medical Center
94 Old Short Hills Rd
Livingston, NJ 07039-9800
973-535-9645
Length: 5 Year(s) Total Positions: 21 (GYI: 8)
Program ID: 440-38-21-181

Long Branch

Monmouth Medical Center Program
Monmouth Medical Center
Jersey Shore Medical Center
Program Director:
Charles Sills, MD
Monmouth Medical Center
300 Second Ave
Long Branch, NJ 07740
732-571-6259
Length: 5 Year(s) Total Positions: 22 (GYI: 7)
Program ID: 440-38-21-182

Morristown

Morristown Memorial Hospital Program
Morristown Memorial Hospital
Program Director:
Ames L Philpote Jr, MD
Morristown Memorial Hospital
100 Madison Ave
PO Box 1166
Morristown, NJ 07962-1966
973-971-6778
Length: 5 Year(s) Total Positions: 21 (GYI: 6)
Program ID: 440-33-11-183

* Updated information not provided.
Accredited Programs in Surgery-General

**Newark**
UMDNJ-New Jersey Medical School Program
UMDNJ-New Jersey Medical School
Dept of Veterans Affairs Medical Center (East Orange)
Hackensack Medical Center
Newark Beth Israel Medical Center
UMDNJ University Hospital
Program Director:
Edwin A Deitch, MD
UMDNJ-New Jersey Med Sch Med Sci Bldg
165 S Orange Ave MSB-0566
Dept of Surgery
Newark, NJ 07103-3000
201 468-5465
Length: 5 Year(s)  Total Positions: 64 (GYI: 25)
Subspecialties: VS
Program ID: 440-33-21-184

**Piscataway**
UMDNJ-Robert Wood Johnson Medical School Program
UMDNJ-Robert Wood Johnson Medical School
Medical Center at Princeton
Robert Wood Johnson University Hospital
St Peter's Medical Center
Program Director:
Ralph S Greco, MD
UMDNJ-Robert Wood Johnson Medical School
Dept of Surgery
One Robert Wood Johnson Pl CN-19
New Brunswick, NJ 08903-0019
908 322-7674
Length: 5 Year(s)  Total Positions: 32 (GYI: 10)
Subspecialties: VS
Program ID: 440-33-21-187

**Trenton**
St Francis Medical Center Program
St Francis Medical Center
Program Director:
Francis John Cotrone, MD
St Francis Medical Center
Dept of Surgery Rm B154
601 Hamilton Ave
Trenton, NJ 08629
609 599-5065
Length: 5 Year(s)  Total Positions: 12 (GYI: 4)
Program ID: 440-33-31-189

**New York**

**Albany**
Albany Medical Center Program
Albany Medical Center Hospital
St Peter's Hospital
Veterans Affairs Medical Center (Albany)
Program Director:
Dhiraj M Shah, MD
Albany Medical College A-61
Dept of Surgery
47 New Scotland Ave
Albany, NY 12208-5479
518 445-5065
Length: 5 Year(s)  Total Positions: 27 (GYI: 7)
Subspecialties: VS
Program ID: 440-35-21-191

**Bronx**
Albert Einstein College of Medicine Program
Albert Einstein College of Medicine of Yeshiva University
Bronx Municipal Health Center
Montefiore Medical Center-Henry and Lucy Moses Division
Montefiore Medical Center-Weiler Hospital
North Central Bronx Hospital
Program Director:
George W Machleder, MD
Montefiore Medical Center
111 E 210th St
Bronx, NY 10467
718 920-6186
Length: 5 Year(s)  Total Positions: 60 (GYI: 27)
Subspecialties: VS
Program ID: 440-35-21-202

**SUNY Health Science Center at Brooklyn Program**
SUNY HSC at Brooklyn College of Medicine
Kings County Hospital Center
Long Island College Hospital
St Vincent's Medical Center of Richmond
University Hospital/SUNY Health Science Center at Brooklyn
Veterans Affairs Medical Center (Brooklyn)
Program Director:
Richard B Wart, MD PhD
SUNY HSC Ctr at Brooklyn
Dept of Surgery
450 Clarkson Ave Box 40
Brooklyn, NY 11203
718 270-1973
Length: 5 Year(s)  Total Positions: 25 (GYI: 25)
Program ID: 440-35-21-207

**Brooklyn**
Brookdale Hospital Medical Center Program
Brookdale Hospital Medical Center
Program Director:
Gerald W Shattan, MD
Brookdale Hospital Medical Center
Dept of Surgical Serv
1 Brooklyn Plaza
Brooklyn, NY 11205
718 250-6386
Length: 5 Year(s)  Total Positions: 25 (GYI: 8)
Program ID: 440-35-21-207

**SUNY at Buffalo Graduate Medical-Dental Education Consortium Program**
SUNY at Buffalo Grad Medical-Dental Education Consortium
Buffalo General Hospital
Erie County Medical Center
Millard Fillmore Hospital
Veterans Affairs Medical Center (Buffalo)
Program Director:
Eddie L Hoover, MD
Erie County Medical Center
Dept of Surgery
462 Grider St
Buffalo, NY 14215-3008
716 896-3902
Length: 5 Year(s)  Total Positions: 69 (GYI: 35)
Subspecialties: VS
Program ID: 440-35-21-393

*Updated information not provided.*
Cooperstown
Mary Imogene Bassett Hospital Program
Bassett Healthcare
Program Director:
Patrick A Dietz, MD
Med Educ Dept
Mary Imogene Bassett Hospital
One Atwell Rd
Cooperstown, NY 13326-1364
800 852-4656
Length: 5 Year(s)  Total Positions: 14 (GYI: 4)
Program ID: 440-35-31-197

Manhasset
North Shore University Hospital Program
North Shore University Hospital
Program Director:
Anthony J Tortolani, MD
North Shore University
Dept of Surgery
300 Community Dr
Manhasset, NY 11030
516 567-4885
Length: 5 Year(s)  Total Positions: 14 (GYI: 12)
Program ID: 440-35-11-212

New Hyde Park
Albert Einstein College of Medicine at Long Island Jewish Medical Center Program
Long Island Jewish Medical Center
LaGuardia Hospital
Program Director:
Jon R Cohen, MD
Long Island Jewish Medical Center
270-05 76th Ave
New Hyde Park, NY 11042
718 470-7377
Length: 5 Year(s)  Total Positions: 37 (GYI: 10)
Program ID: 440-35-21-219

New Rochelle
New Rochelle Hospital Medical Center Program
New Rochelle Hospital Medical Center
Veterans Affairs Medical Center (Castle Point)
Program Director:
Burrows L Herz, MD
New Rochelle Hospital Medical Center
16 Guion Pl
Dept of Surg 3 Joyce
New Rochelle, NY 10802-1729
914 633-5000
Length: 5 Year(s)  Total Positions: 18 (GYI: 6)
Program ID: 440-35-31-201

New York
Albert Einstein College of Medicine at Beth Israel Medical Center Program
Beth Israel Medical Center
Queens Hospital Center
Program Director:
Moses Nussbaum, MD
Beth Israel Medical Center
711 1st Ave at 16th St
New York, NY 10003
212 430-4004
Length: 5 Year(s)  Total Positions: 15 (GYI: 15)
Program ID: 440-35-31-204

Harlem Hospital Center Program
Harlem Hospital Center
Program Director:
Harold P Freeman, MD
Harlem Hospital Center
106 Lenox Ave
New York, NY 10037
212 939-3625
Length: 5 Year(s)  Total Positions: 31 (GYI: 9)
Program ID: 440-35-31-214

Lenox Hill Hospital Program
Lenox Hill Hospital
Program Director:
M Michael Elenberg, MD
Dept of Surgery
Lenox Hill Hospital
100 E 77th St
New York, NY 10021-1883
212 634-2103
Length: 5 Year(s)  Total Positions: 24 (GYI: 12)
Program ID: 440-35-11-217

Mount Sinai School of Medicine (North General) Program
North General Hospital
Program Director:
Henry Godfrey, MD
North General Hospital
1879 Madison Ave
New York, NY 10035
212 420-4010
Length: 5 Year(s)  Total Positions: 12 (GYI: 5)
Program ID: 440-35-31-215

Mount Sinai School of Medicine Program
Mount Sinai School of Medicine
Einhurst Hospital Center-Mount Sinai Services
Mount Sinai Medical Center
Program Director:
Arthur H Audes Jr, MD
Dept of Surgery
Box 1250
One Gustave L Levy P1
New York, NY 10029-6774
212 241-6601
Length: 5 Year(s)  Total Positions: 74 (GYI: 30)
Subspecialties: VS
Program ID: 440-35-21-225

New York Hospital/Cornell Medical Center Program
New York Hospital
Jamaica Hospital
Memorial Sloan-Kettering Cancer Center
Program Director:
John M Daly, MD
New York Hospital
525 E 68th St P-759
New York, NY 10021
212 745-5144
Length: 5 Year(s)  Total Positions: 67 (GYI: 20)
Program ID: 440-35-31-211

New York University Medical Center Program
New York University Medical Center
Bellevue Hospital Center
Veterans Affairs Medical Center (Manhattan)
Program Director:
Frank C Spencer, MD
New York University Medical Center
556 First Ave
New York, NY 10016
212 263-6678
Length: 5 Year(s)  Total Positions: 76 (GYI: 22)
Subspecialties: VS
Program ID: 440-35-21-994

East Meadow
Nassau County Medical Center Program
Nassau County Medical Center
Program Director:
James T Evans, MD
Nassau County Medical Center
2201 Hempstead Tpke
East Meadow, NY 11554
516 572-6705
Length: 5 Year(s)  Total Positions: 26 (GYI: 8)
Program ID: 440-35-13-199

Flushing
Flushing Hospital Medical Center Program
Flushing Hospital Medical Center
Program Director:
A Addison Barman, MD
Flushing Hospital Medical Center
45th Ave at Parsons Blvd
Flushing, NY 11355
718 670-5898
Length: 5 Year(s)  Total Positions: 20 (GYI: 8)
Program ID: 440-35-11-213

New York Hospital Medical Center of Queens Program* New York Hospital Medical Center of Queens Program Director:
James W Turner, MD
The New York Hospital Medical Center Queens
Main St at South Memorial Ave
Flushing, NY 11355
718 670-1572
Length: 5 Year(s)  Total Positions: 10 (GYI: 2)
Program ID: 440-35-11-206

Jamaica
Catholic Medical Center of Brooklyn and Queens Program Catholic Medical Center of Brooklyn and Queens Inc Catholic Medical Center (Mary Immaculate Hospital) Catholic Medical Center (St Mary's Hospital)
Program Director:
 Walter P Pinal, MD
Catholic Medical Center of Brooklyn and Queens
88-25 135th St
Parsons Manor Ste 2P
Jamaica, NY 11432
718 828-7110
Length: 5 Year(s)  Total Positions: 10 (GYI: 2)
Program ID: 440-35-21-310

*Updated information not provided.
Presbyterian Hospital in the City of New York Program
Presbyterian Hospital in the City of New York Overlook Hospital
Program Director: R Peter Altman, MD
Presbyterian Hospital in the City of New York
177 Fort Washington Ave
Miohelen 703-313
New York, NY 10032-3784
212 366-3038
Length: 5 Year(s)  Total Positions: 56  (GYI: 21)
Subspecialties: FDS
Program ID: 440-35-21-239

St Luke’s-Roosevelt Hospital Center Program
St Luke’s-Roosevelt Hospital Center
St Luke’s-Roosevelt Hospital Center- Roosevelt Division
St Luke’s-Roosevelt Hospital Center-St Luke’s Division
Program Director:
K David Tilson, MD
St Luke’s-Roosevelt Hospital Center
1000 Eleventh Ave
New York, NY 10019
212 245-7200
Length: 5 Year(s)  Total Positions: 51  (GYI: 18)
Program ID: 440-35-21-383

Rochester University of Rochester Program
Strong Memorial Hospital of the University of Rochester
Gennesee Hospital
Rochester General Hospital
Program Director:
Seymour I Schwartz, MD
Dept of Surgery
University of Rochester Med Ctr
601 Elmwood Ave
Rochester, NY 14642-0610
716 275-2720
Length: 5 Year(s)  Total Positions: 56  (GYI: 19)
Subspecialties: CCS,VS
Program ID: 440-35-21-240

Staten Island Staten Island University Hospital Program
Staten Island University Hospital
Program Director:
Melvin H Werth Jr, MD
Staten Island University Hospital
475 Seaview Ave
Staten Island, NY 10305
718 226-8608
Length: 5 Year(s)  Total Positions: 16  (GYI: 6)
Program ID: 440-35-11-236

Stony Brook SUNY at Stony Brook Program
University Hospital-SUNY at Stony Brook
Veterans Affairs Medical Center (Northport)
Winthrop-University Hospital
Program Director:
Naji Alumradd, MD
State University of New York at Stony Brook
Dept of Surgery
HSC T-19 Rm 020
Stony Brook, NY 11794-8191
516 444-1791
Length: 5 Year(s)  Total Positions: 37  (GYI: 12)
Subspecialties: VS
Program ID: 440-35-21-242

Syracuse SUNY Health Science Center at Syracuse Program
University Hospital-SUNY Health Science Center at Syracuse
Community-General Hospital of Greater Syracuse
Crouse-Irving Memorial Hospital
Veterans Affairs Medical Center (Syracuse)
Program Director:
John D Hulverson, MD
SUNY Health Science Center at Syracuse
Dept of Surgery
750 E Adams St
Syracuse, NY 13210
315 464-4550
Length: 5 Year(s)  Total Positions: 44  (GYI: 21)
Program ID: 440-35-21-244

Valhalla New York Medical College (Cabrini) Program
New York Medical College
Cabrini Medical Center
Metropolitan Hospital Center
Program Director:
Raymond D LaRaja, MD
Dept of Surgery
Cabrini Medical Center
227 E 10th St R-309
New York, NY 10003
212 265-6727
Length: 5 Year(s)  Total Positions: 25  (GYI: 7)
Program ID: 440-35-21-209

New York Medical College (Lincoln) Program
New York Medical College
Our Lady of Mercy Medical Center
Lincoln Medical and Mental Health Center
Program Director:
William M Stahl, MD
Lincoln Medical and Mental Health Center
Dept of Surgery
234 E 144th St
Bronx, NY 10461
718 570-5890
Length: 5 Year(s)  Total Positions: 36  (GYI: 12)
Subspecialties: CCS
Program ID: 440-35-31-223

New York Medical College (Stamford) Program
New York Medical College
Stamford Hospital
Program Director:
James E Barone, MD
Stamford Hospital
PO Box 6016
Stamford, CT 06904-8317
203 266-7479
Length: 5 Year(s)  Total Positions: 12  (GYI: 4)
Program ID: 440-36-21-264

New York Medical College at St Vincent's Hospital and Medical Center of New York Program
New York Medical College
St Vincent’s Hospital and Medical Center of New York
St Joseph’s Hospital and Medical Center
Program Director:
Marc K Wallack, MD
St Vincent’s Hospital and Medical Center of New York
Dept of Surgery-Cornin 862
183 W 11th St
New York, NY 10011
212 944-5944
Length: 5 Year(s)  Total Positions: 42  (GYI: 14)
Program ID: 440-35-21-234

New York Medical College at Westchester County Medical Center Program
New York Medical College
Metropolitan Hospital Center
St Vincent's Medical Center
Westchester County Medical Center
Program Director:
John A Savino, MD
New York Medical College
Dept of Surgery
Munger Pavilion
Valhalla, NY 10595
914 226-7048
Length: 5 Year(s)  Total Positions: 28  (GYI: 5)
Subspecialties: CCS
Program ID: 440-35-21-227

North Carolina Chapel Hill University of North Carolina Hospitals Program
University of North Carolina Hospitals
Wake Medical Center
Program Director:
Anthony A Meyer, MD PhD
University of North Carolina School of Medicine
Dept of Surgery
166 Burnett-Wynn Bldg CB47050
Chapel Hill, NC 27590-7060
919 946-4563
Length: 5 Year(s)  Total Positions: 43  (GYI: 14)
Subspecialties: CCS,VS
Program ID: 440-36-21-245

Charlotte Carolinas Medical Center Program
Carolinas Medical Center
Program Director:
L G Walker Jr, MD
Carolinas Medical Center
Dept of General Surgery
PO 32061
Charlotte, NC 28222-2361
704 355-3136
Length: 5 Year(s)  Total Positions: 17  (GYI: 4)
Program ID: 440-36-12-246

* Updated information not provided.
Durham

Duke University Program
Duke University Medical Center
Durham Regional Hospital
Veterans Affairs Medical Center (Asheville)
Veterans Affairs Medical Center (Durham)

Program Director: Theodore Pappas, MD
Duke University Medical Center
Dept of Surgery
PO Box 3479
Durham, NC 27710
919 641-3442
Length: 6 Year(s) Total Positions: 62 (GYI: 23)
Subspecialties: CCS
Program ID: 440-38-31-247

Greenville

East Carolina University Program
East Carolina University School of Medicine
Pitt County Memorial Hospital

Program Director: Walter J Pories, MD
East Carolina University School of Medicine
Dept of Surgery
Greenville, NC 27835-4354
919 816-4659
Length: 5 Year(s) Total Positions: 28 (GYI: 6)
Program ID: 440-38-11-248

Wilmington

New Hanover Regional Medical Center Program
New Hanover Regional Medical Center

Program Director: J Gary Maxwell, MD
New Hanover Regional Medical Center
2183 S 17th St
PO Box 9025
Wilmington, NC 28402-0925
910 343-0161
Length: 5 Year(s) Total Positions: 10 (GYI: 2)
Program ID: 440-38-31-249

Winston-Salem

Bowman Gray School of Medicine Program
North Carolina Baptist Hospital
Forbush Memorial Hospital

Program Director: Richard H Dean, MD
Bowman Gray School of Medicine
Dept of General Surgery
Medical Center Blvd
Winston-Salem, NC 27157-1096
316 716-4443
Length: 5 Year(s) Total Positions: 38 (GYI: 17)
Subspecialties: VS
Program ID: 440-38-31-250

North Dakota

Grand Forks

University of North Dakota Program
Univ of North Dakota School of Medicine
United Hospital
Veterans Affairs Medical and Regional Office Center (Fargo)

Program Director: William K Becker, MD
University of North Dakota
Dept of Surgery
PO Box 9037
Grand Forks, ND 58202-9037
701 777-3069
Length: 5 Year(s) Total Positions: 13 (GYI: 5)
Program ID: 440-38-21-379

Ohio

Akron

Akron City Hospital (Summa Health System/NEUOCOM Program
Akron City Hospital (Summa Health System)

Program Director: Duane L Donovan, MD
Akron City Hospital
555 W Market St
Akron, OH 44308
216 975-7933
Length: 5 Year(s) Total Positions: 16 (GYI: 3)
Program ID: 440-38-21-361

Akron General Medical Center/NEUOCOM Program
Akron General Medical Center

Program Director: Daniel P Guyton, MD
Akron General Medical Center
400 Wabash Ave
Akron, OH 44307
216 394-7841
Length: 5 Year(s) Total Positions: 12 (GYI: 3)
Program ID: 440-38-31-252

Cincinnati

Good Samaritan Hospital Program
Good Samaritan Hospital
Providence Hospital

Program Director: Richard E Hallam, MD
Good Samaritan Hospital
375 Diemyt Ave
2nd Fl Tower
Cincinnati, OH 45229-2499
513 872-3220
Length: 5 Year(s) Total Positions: 23 (GYI: 7)
Subspecialties: VS
Program ID: 440-38-31-253

Jewish Hospital of Cincinnati Program
Jewish Hospital of Cincinnati

Program Director: Creighton B Wright, MD
Jewish Hospital of Cincinnati
Dept of Surgery
5200 Burnet Ave
Cincinnati, OH 45229
513 660-3182
Length: 5 Year(s) Total Positions: 13 (GYI: 4)
Program ID: 440-38-31-254

University of Cincinnati Hospital Group Program
University of Cincinnati Hospital
Veterans Affairs Medical Center (Cincinnati)

Program Director: Joseph F Pachter, MD
University of Cincinnati Medical Center
Dept of Surgery
231 Bethesda Ave
Cincinnati, OH 45267-0658
513 558-8661
Length: 5 Year(s) Total Positions: 60 (GYI: 20)
Program ID: 440-38-21-355

Cleveland

Case Western Reserve University Program
University Hospitals of Cleveland
MetroHealth Medical Center
Mount Sinai Medical Center
Veterans Affairs Medical Center (Cleveland)

Program Director: Jerry M Shuck, MD
University Hospitals of Cleveland
Dept of Surgery
2014 Abington Rd
Cleveland, OH 44106
216 844-3874
Length: 5 Year(s) Total Positions: 68 (GYI: 31)
Program ID: 440-38-21-399

Cleveland Clinic Foundation Program
Cleveland Clinic Foundation

Program Director: Frederick Alexander, MD
Cleveland Clinic Foundation
9500 Euclid Ave TV32
Dept of General Surgery
Cleveland, OH 44195-5342
216 444-5690
Length: 5 Year(s) Total Positions: 24 (GYI: 8)
Subspecialties: VS
Program ID: 440-38-23-257

Health Cleveland Program
Health Cleveland Corporation
Health Cleveland (Fairview General Hospital)

Program Director: Stephen P BeMine, MD
Fairview General Hospital
Dept of Surgery
18101 Lerain Ave
Cleveland, OH 44111-5666
216 476-7150
Length: 5 Year(s) Total Positions: 19 (GYI: 6)
Program ID: 440-38-23-358

Meridia Huron Hospital Program
Meridia Huron Hospital
Meridia Hillcrest Hospital

Program Director: Raphael S Chung, MD
Meridia Huron Hospital
19511 Tennen Rd
Cleveland, OH 44112
216 761-4229
Length: 5 Year(s) Total Positions: 10 (GYI: 2)
Program ID: 440-38-23-359

St Luke’s Medical Center Program
St Luke’s Medical Center

Program Director: Helmut Schreiber, MD
St Luke's Medical Center
11511 Shaker Blvd
Cleveland, OH 44104
216 598-5785
Length: 5 Year(s) Total Positions: 12 (GYI: 4)
Program ID: 440-38-11-262

*Updated information not provided.*
Columbus
Mount Carmel Health Program
Mount Carmel Medical Center
Mount Carmel East Hospital
Program Director:
Thomas H Hartman, MD
Mount Carmel Health
785 W State St
Columbus, OH 43222
614 225-5683
Length: 5 Year(s) Total Positions: 14 (GYI: 6)
Program ID: 440-36-23-363

Ohio State University Program
Ohio State University Medical Center
Grant Medical Center
Program Director:
Ronald M Ferguson, MD
Ohio State University Hospital
Dept of Surgery
410 W Tenth Ave
Columbus, OH 43210-1228
614 283-8701
Length: 5 Year(s) Total Positions: 40 (GYI: 14)
Subspecialties: CCS,VS
Program ID: 440-36-21-584

Riverside Methodist Hospitals Program
Riverside Methodist Hospitals
Program Director:
James M Blackford, MD
Riverside Methodist Hospitals
2535 Olentangy River Rd
Med Educ Dept
Columbus, OH 43214
614 566-5762
Length: 5 Year(s) Total Positions: 14 (GYI: 6)
Program ID: 440-36-12-365

Dayton
Wright State University Program
Wright State University School of Medicine
Children's Medical Center
Good Samaritan Hospital and Health Center
Kettering Medical Center
Miami Valley Hospital
St Elizabeth Medical Center
USA Medical Center (Wright-Patterson)
Veterans Affairs Medical Center (Dayton)
Program Director:
James B Peoples, MD
Wright State University School of Medicine
PO Box 927
Dayton, OH 45401-9060
513 220-2177
Length: 5 Year(s) Total Positions: 46 (GYI: 15)
Program ID: 440-36-31-386

Toledo
Medical College of Ohio at Toledo Program
Medical College of Ohio Hospital
St Vincent Medical Center
Toledo Hospital
Program Director:
David C Allison, MD
Medical College of Ohio at Toledo
Dept of Surgery
3000 Arlington Ave
Toledo, OH 43696-0008
419 381-3970
Length: 5 Year(s) Total Positions: 28 (GYI: 8)
Program ID: 440-36-21-369

Youngstown
St Elizabeth Hospital Medical Center/NEOUCOM Program
St Elizabeth Hospital Medical Center
Program Director:
Rashid A Abu, MD
1044 Belmont Ave
PO Box 1790
Youngstown, OH 44501-1790
216 450-0124
Length: 5 Year(s) Total Positions: 19 (GYI: 6)
Program ID: 440-36-11-270

Western Reserve Care System/NEOUCOM Program
Western Reserve Care System
Northside Medical Center
Southside Medical Center
To Children's Hospital
Program Director:
Jeffrey R Rubis, MD
Western Reserve Care System
Northside Medical Center
500 Gypsy Ln
Youngstown, OH 44501-0890
216 740-0483
Length: 5 Year(s) Total Positions: 22 (GYI: 8)
Program ID: 440-36-21-271

Oklahoma
Oklahoma City
University of Oklahoma Health Sciences Center Program
University of Oklahoma College of Medicine-Oklahoma City
Children's Hospital of Oklahoma
University Hospital and Clinics
Veterans Affairs Medical Center (Oklahoma City)
Program Director:
Russel G Postler, MD
Univ of Oklahoma Health Sciences Center Dept of Surgery
PO Box 26501
Oklahoma City, OK 73190
405 271-7912
Length: 5 Year(s) Total Positions: 26 (GYI: 4)
Program ID: 440-39-21-273

Tulsa
University of Oklahoma College of Medicine-Tulsa Program
University of Oklahoma College of Medicine-Tulsa
Hillcrest Medical Center
St Francis Hospital
St John Medical Center
Veterans Affairs Medical Center (Muskegee)
Program Director:
Prank A Clinecz, MD
University of Oklahoma College of Medicine-Tulsa
Dept of Surgery
2808 S Sheridan Rd
Tulsa, OK 74129-1077
918 741-3632
Length: 5 Year(s) Total Positions: 19 (GYI: 11)
Program ID: 440-39-21-274

Oregon
Portland
Emanuel Hospital/Kaiser Foundation Hospital Program
Emanuel Hospital and Health Center
Kaiser Permanente-NW Region
Program Director:
Jay Patel, MD
Emanuel Hospital and Health Center
2801 N Gantenbein Ave
Portland, OR 97227
503 226-4647
Length: 5 Year(s) Total Positions: 7 (GYI: 7)
Program ID: 440-49-21-275

Oregon Health Sciences University Program
Oregon Health Sciences University Hospital
Good Samaritan Hospital and Medical Center
Kaiser Permanente-NW Region
St Vincents Hospital and Medical Center
Veterans Affairs Medical Center (Portland)
Program Director:
Donald D Trunkney, MD
Oregon Health Sciences University
3811 SW Sam Jackson Pk Rd L233
Portland, OR 97201-3088
503 494-7758
Length: 5 Year(s) Total Positions: 57 (GYI: 16)
Subspecialties: VS
Program ID: 440-49-21-276

Pennsylvania
Abington
Abington Memorial Hospital Program
Abington Memorial Hospital
Program Director:
Thomas L Dent, MD
Abington Memorial Hospital
Dept of Surgery
1200 Old York Rd
Abington, PA 19001
215 576-7664
Length: 5 Year(s) Total Positions: 18 (GYI: 7)
Program ID: 440-41-12-279

Allentown
Lehigh Valley Hospital/Pennsylvania State University Program
Lehigh Valley Hospital
Program Director:
Gary G Nieschulas, MD
Lehigh Valley Hospital
Cedar Crest and I-78
PO Box 696
Allentown, PA 18105-1556
610 402-8386
Length: 5 Year(s) Total Positions: 21 (GYI: 5)
Program ID: 440-41-21-280

* Updated information not provided.
Bethlehem
St Luke's Hospital Program
St Luke's Hospital
Program Director:
Joel C Rosenfeld, MD
St Luke's Hospital
801 Ostrum St
Bethlehem, PA 18015
610 964-4646
Length: 6 Year(s) Total Positions: 10 (GYI: 2)
Program ID: 440-41-21-398

Danville
Geisinger Medical Center Program
Geisinger Medical Center
Program Director:
John E Deitch, MD
Geisinger Medical Center
N Academy Ave Dept of Surgery
Danville, PA 17822
717 271-6955
Length: 5 Year(s) Total Positions: 11 (GYI: 9)
Subspecialties: VS
Program ID: 440-41-11-388

Easton
Easton Hospital Program
Easton Hospital
Program Director:
Jay B Fisher, MD
Easton Hospital
250 S 1st St
Easton, PA 18042
610 250-4014
Length: 5 Year(s) Total Positions: 14 (GYI: 4)
Program ID: 440-41-11-284

Harrisburg
Policlinic Medical Center Program
Policlinic Medical Center
Program Director:
Stephen M Weiss, MD
Policlinic Medical Center
2601 N Third St
Harrisburg, PA 17110
717 763-2288
Length: 5 Year(s) Total Positions: 12 (GYI: 4)
Program ID: 440-41-21-384

Hershey
Milton S Hershey Medical Center of Pennsylvania State University Program
Penn State University Hospital-Milton S Hershey Med Ctr
Harrisburg Hospital
Program Director:
Gordon L Kaufman Jr, MD
Milton S Hershey Medical Center of the Penn State University
Dept of Surgery
500 University Dr
Hershey, PA 17033
717 531-3313
Length: 5 Year(s) Total Positions: 15 (GYI: 15)
Subspecialties: CCS,VS
Program ID: 440-41-21-287

Johnstown
Temple University/Coneaugh Valley Memorial Hospital Program
Coneaugh Valley Memorial Hospital
Program Director:
Richard A Moore, MD PhD
Coneaugh Memorial Hospital
1086 Franklin St
Johnstown, PA 15905-4368
814 533-9699
Length: 5 Year(s) Total Positions: 12 (GYI: 4)
Subspecialties: VS
Program ID: 440-41-11-388

McKeensport
McKeensport Hospital Program
McKeensport Hospital
Program Director:
Richard P Bondi, MD
McKeensport Hospital
1500 FBIA Ave
McKeensport, PA 15132-2483
412 664-2654
Length: 5 Year(s) Total Positions: 10 (GYI: 2)
Program ID: 440-41-21-289

Philadelphia
Albert Einstein Medical Center Program*
Albert Einstein Medical Center
Program Director:
Robert G Somers, MD
Albert Einstein Medical Center
5501 Old York Rd
Philadelphia, PA 19141
215 456-6030
Length: 5 Year(s) Total Positions: 23 (GYI: 9)
Program ID: 440-41-11-291

Episcopal Hospital Program
Episcopal Hospital
St Agnes Medical Center
Program Director:
David Hlevien, MD
Episcopal Hospital
100 E Lehigh Ave
Philadelphia, PA 19123-1008
215 427-7042
Length: 5 Year(s) Total Positions: 6 (GYI: 6)
Program ID: 440-41-11-202

Graduate Hospital Program
Graduate Hospital
Underwood Memorial Hospital
Program Director:
Charles C Wellhuth Jr, MD
Graduate Hospital Ste 1101
One Graduate Plaza
Philadelphia, PA 19146
215 863-3566
Length: 5 Year(s) Total Positions: 32 (GYI: 12)
Program ID: 440-41-21-200

MCPHU/Hahnemann University Hospital Program
Hahnemann University Hospital
Crozer-Chester Medical Center
Program Director:
Joseqin Santiago, MD
Hahnemann University Hospital
Mail Stop 413
Broad & Vine Sts
Philadelphia, PA 19102-1102
215 762-8175
Length: 5 Year(s) Total Positions: 31 (GYI: 12)
Program ID: 440-41-21-294

MCPHU/Medical College of Pennsylvania Hospital Program
Medical College of Pennsylvania Hospital
Frankford Hospital (Torrance Campus)
Veterans Affairs Medical Center (Philadelphia)
Program Director:
Joel J Rostockyj, MD
Medical College of Pennsylvania
Dept of Surgery
3300 Henry Ave
Philadelphia, PA 19129-1191
215 842-6640
Length: 5 Year(s) Total Positions: 33 (GYI: 8)
Program ID: 440-41-21-295

Mercy Catholic Medical Center Program
Mercy Catholic Medical Center
Mercy Catholic Medical Center Fitzwater Mercy Division
Mercy Catholic Medical Center Miniericordia Division
Program Director:
Chris D Thanass, MD
Mercy Catholic Medical Center
54th & Cedar Ave
Philadelphia, PA 19143
610 237-4860
Length: 5 Year(s) Total Positions: 12 (GYI: 4)
Program ID: 440-41-11-297

Pennsylvania Hospital Program
Pennsylvania Hospital
Program Director:
David L Paskin, MD
Pennsylvania Hospital
Dept of Surgery
Eighth & Spruce St
Philadelphia, PA 19107
215 829-6800
Length: 5 Year(s) Total Positions: 18 (GYI: 8)
Subspecialties: VS
Program ID: 440-41-11-298

Temple University Program
Temple University Hospital
Fox Chase Cancer Center
Reading Hospital and Medical Center
Program Director:
Daniel T Dempsey, MD
Temple University Hospital
4041 N Broad St
Philadelphia, PA 19140
215 221-3634
Length: 5 Year(s) Total Positions: 34 (GYI: 14)
Program ID: 440-41-11-200

Thomas Jefferson University Program
Thomas Jefferson University Hospital
Methodist Hospital
Program Director:
Herbert E Cohn, MD
Francis E Rosario, MD
Thomas Jefferson University
Dept of Surgery
1015 Chestnut St Ste 820
Philadelphia, PA 19107
215 955-0964
Length: 5 Year(s) Total Positions: 41 (GYI: 12)
Program ID: 440-41-21-301

University of Pennsylvania Program
Hospital of the University of Pennsylvania
Presbyterian Medical Center of Philadelphia
Veterans Affairs Medical Center (Philadelphia)
Program Director:
Clyde F Barker, MD
Hospital of the University of Pennsylvania
3400 Spruce St
Philadelphia, PA 19104
215 662-6166
Length: 5 Year(s) Total Positions: 25 (GYI: 5)
Subspecialties: VS
Program ID: 440-41-21-302

* Updated information not provided.
| Accredited Programs in Surgery-General |

**Pittsburgh**

**MCNHP/UAllegheny General Hospital Program**
- Allegheny General Hospital
  - **Program Director:**
    - Daniel L Diamond, MD
  - Dept of Surgery
    - Allegheny General Hospital
    - 320 E North Ave
    - Pittsburgh, PA 15212-6966
    - 412 358-3605
  - Length: 5 Year(s) Total Positions: 20 (GYI: 9)
  - Program ID: 440-41-12-303

**Mercy Hospital of Pittsburgh Program**
- Mercy Hospital of Pittsburgh
  - **Program Director:**
    - Howard A Zaren, MD
  - Dept of Surgery
    - 1400 Locust St
    - Pittsburgh, PA 15219
    - 412 262-5525
  - Length: 5 Year(s) Total Positions: 23 (GYI: 8)
  - Program ID: 440-41-12-305

**University Health Center of Pittsburgh Program**
- University Health Center of Pittsburgh
  - Children’s Hospital of Pittsburgh
  - Montefiore University Hospital (UPMC)
  - Presbyterian University Hospital/UPMC
  - Veterans Affairs Medical Center (Pittsburgh)
  - **Program Director:**
    - Richard L Simmons, MD
  - University of Pittsburgh Dept of Surgery
    - 467 Scaife Hall
    - Pittsburgh, PA 15261
    - 412 648-9805
  - Length: 5 Year(s) Total Positions: 47 (GYI: 24)
  - Subspecialties: CCS, FDS
  - Program ID: 440-41-21-304

**Western Pennsylvania Hospital Program**
- Western Pennsylvania Hospital
  - **Program Director:**
    - Albert D Baffoli Jr, MD
  - Western Penn Pennsylvania Hospital
    - 4900 Friendship Ave
    - Ste 2202
    - Pittsburgh, PA 15224
    - 412 676-4898
  - Length: 5 Year(s) Total Positions: 25 (GYI: 8)
  - Program ID: 440-41-12-308

**Sayre**

**Guthrie Healthcare System Program**
- Robert Packer Hospital
  - **Program Director:**
    - Carl W Kowalczyk, MD
  - Guthrie Healthcare System
    - Guthrie Sq
    - Sayre, PA 18840-1698
    - 717 364-9063
  - Length: 5 Year(s) Total Positions: 19 (GYI: 7)
  - Program ID: 440-41-12-309

**Wynnewood**

**Lankenau Hospital Program**
- Lankenau Hospital
  - **Program Director:**
    - Robert D Smink, MD
  - Lankenau Hospital Dept of General Surgery
    - 100 Lancaster Ave W of City Line
    - Wynnewood, PA 19096
    - 610 645-2100
  - Length: 5 Year(s) Total Positions: 12 (GYI: 4)
  - Program ID: 440-41-11-296

**York**

**York Hospital Program**
- York Hospital
  - **Program Director:**
    - Jonathan E Shoads Jr, MD
  - York Hospital
    - 1001 S George St
    - York, PA 17405
    - 717 851-2202
  - Length: 5 Year(s) Total Positions: 15 (GYI: 3)
  - Program ID: 440-41-12-310

**Puerto Rico**

**Mayaguez**

**Ramón E Betances Hospital-Mayaguez Medical Center Program**
- Dr Ramón E Betances Hospital-Mayaguez Medical Center
  - **Program Director:**
    - Victor N Ortiz-Justiniano, MD
  - Mayaguez Medical Center
    - Box 3008
    - Mayaguez, PR 00681
    - 809 833-7013
  - Length: 5 Year(s) Total Positions: 14 (GYI: 4)
  - Program ID: 440-42-21-380

**Ponce**

**Ponce Regional Hospital Program**
- Ponce Regional Hospital
  - **Program Director:**
    - Victor M Carlo-Domínguez, MD
  - Ponce Regional Hospital
    - PO Box 391
    - Ponce, PR 00733
    - 809 843-0040
  - Length: 5 Year(s) Total Positions: 20 (GYI: 8)
  - Program ID: 440-42-21-362

**San Juan**

**University of Puerto Rico Program**
- University of Puerto Rico School of Medicine
  - University Hospital
    - Veterans Affairs Medical Center (San Juan)
  - **Program Director:**
    - Eduardo A Santiago-Delphin, MD
  - University of Puerto Rico
    - Med Sci Campus
    - GPO Box 260097
    - San Juan, PR 00936-5067
    - 787 726-2440
  - Length: 5 Year(s) Total Positions: 42 (GYI: 15)
  - Program ID: 440-42-31-313

**Rhode Island**

**Providence**

**Brown University Program**
- Rhode Island Hospital
  - Miriam Hospital
  - Veterans Affairs Medical Center (Providence)
  - **Program Director:**
    - Kirby J Tread, MD
  - Rhode Island Hospital
    - APC 198
    - 600 Eddy St
    - Providence, RI 02903
    - 401 444-5883
  - Length: 5 Year(s) Total Positions: 45 (GYI: 18)
  - Subspecialties: CCS
  - Program ID: 440-43-21-314

**South Carolina**

**Charleston**

**Medical University of South Carolina Program**
- Medical University of South Carolina College of Medicine
  - Charleston Memorial Hospital
  - MUSC Medical Center
  - Naval Hospital (Charleston)
  - Veterans Affairs Medical Center (Charleston)
  - **Program Director:**
    - Fred A Crawford Jr, MD
  - MUSC Medical Center
    - 171 Ashley Ave
    - Charleston, SC 29425-2270
    - 803 792-3072
  - Length: 5 Year(s) Total Positions: 34 (GYI: 16)
  - Program ID: 440-45-21-315

**Columbia**

**Richland Memorial Hospital-University of South Carolina School of Medicine Program**
- Richland Memorial Hospital-University of South Carolina School of Medicine
  - **Program Director:**
    - Williams Jennings Bryan Dorn Veterans Hospital
  - Richard M Bell, MD
  - Univ of South Carolina-Richland Memorial Hosp
  - Dept of Surgery
  - Two Richland Medical Pk Ste 300
    - Columbia, SC 29052
    - 803 256-2557
  - Length: 5 Year(s) Total Positions: 17 (GYI: 5)
  - Program ID: 440-45-21-316

**Greenville**

**Greenville Hospital System Program**
- Greenville Hospital System
  - **Program Director:**
    - Joseph C Mochar Jr, MD
  - Greenville Hospital System
    - Dept of Surgical Educ
    - 701 Grove Rd
    - Greenville, SC 29605
    - 803 455-7988
  - Length: 5 Year(s) Total Positions: 14 (GYI: 6)
  - Program ID: 440-45-11-317

*Updated information not provided.*
Spartanburg
Spartanburg Regional Medical Center Program
Spartanburg Regional Medical Center
Program Director:
Henry G Kelley, MD
101 E Wood St
Spartanburg, SC 29303
803 560-6336
Length: 5 Year(s) Total Positions: 14 (GYT: 6)
Program ID: 440-45-31-318

Tennessee
Chattanooga
University of Tennessee College of Medicine at Chattanooga Program* University of Tennessee College of Medicine-Chattanooga Erlanger Medical Center
Program Director:
H Phillip Burns, MD
Chattanooga Univ-Univ of Tennessee College of Medicine Dept of Surgery
921 E Third St Ste 400
Chattanooga, TN 37403
423 778-5506
Length: 5 Year(s) Total Positions: 27 (GYT: 10)
Program ID: 440-47-13-320

Johnson City
East Tennessee State University Program
James H Quillen College of Medicine Holston Valley Hospital and Medical Center Johnson City Medical Center Hospital Veterans Affairs Medical Center (Mountain Home)
Program Director:
William Browder, MD
East Tennessee State University Dept of Surgery Box 70575
Johnson City, TN 37614-0575
423 928-3288
Length: 5 Year(s) Total Positions: 23 (GYT: 7)
Program ID: 440-47-21-377

Knoxville
University of Tennessee Medical Center at Knoxville Program
University of Tennessee Graduate School of Medicine University of Tennessee Memorial Hospital
Program Director:
Henry S Nelson Jr, MD
The University of Tennessee Graduate Sch of Medicine
1924 Alcoa Hwy
Knoxville, TN 37920
865 544-5330
Length: 5 Year(s) Total Positions: 20 (GYT: 6)
Subspecialities: CCS,VS
Program ID: 440-47-11-321

Memphis
University of Tennessee Program
University of Tennessee College of Medicine Baptist Memorial Hospital Methodist Hospital-Central Unit Regional Medical Center at Memphis University of Tennessee Medical Center Veterans Affairs Medical Center (Memphis)
Program Director:
Eugene Mangiantie, MD
University of Tennessee Memphis Dept of Surgery
956 Court Ave Ste 0210
Memphis, TN 38163
901 448-5910
Length: 5 Year(s) Total Positions: 62 (GYT: 23)
Subspecialities: CCS,PD,VS
Program ID: 440-47-21-324

Nashville
Vanderbilt University Program
Vanderbilt University Medical Center St Thomas Hospital Veterans Affairs Medical Center (Nashville)
Program Director:
C Wright Pinson, MD
Vanderbilt (University Medical Center T1212 Medical Center N
1161 21st Ave S
Nashville, TN 37232-2720
615 343-6642
Length: 5 Year(s) Total Positions: 61 (GYT: 24)
Subspecialities: CCS,VS
Program ID: 440-47-21-327

Texas
Dallas
Baylor University Medical Center Program
Baylor University Medical Center John Peter Smith Hospital (Tarrant County Hospital District)
Program Director:
Ronald C Jones, MD
Baylor University Medical Center Dept of Surgery
5500 Gaston Ave
Dallas, TX 75246-0999
214 880-2468
Length: 5 Year(s) Total Positions: 35 (GYT: 16)
Subspecialities: VS
Program ID: 440-48-21-338

Methodist Hospitals of Dallas Program
Methodist Hospitals of Dallas
Program Director:
Richard M Dickerman, MD
Methodist Hospitals of Dallas Medical Education PO Box 660999
Dallas, TX 75266-9996
214 847-2303
Length: 5 Year(s) Total Positions: 11 (GYT: 5)
Program ID: 440-48-12-329

El Paso
Texas Tech University (El Paso) Program
Texas Tech University Health Sciences Center at El Paso R E Thompson General Hospital
Program Director:
Edward C Saltzstein, MD
Texas Tech University Health Sciences Center Dept of Surgery
4900 Alabama Ave
El Paso, TX 79905-1288
915 545-5667
Length: 5 Year(s) Total Positions: 11 (GYT: 3)
Program ID: 440-48-11-332

William Beaumont Army Medical Center Program
William Beaumont Army General Medical Center
Program Director:
Lie Stephen F Hetz, MD
Col Silvio Cabellon Jr, MD
William Beaumont Army Medical Center Dept of Surgery
5906 N Fインドra St.
El Paso, TX 79925-5001
915 599-2088
Length: 5 Year(s) Total Positions: 15 (GYT: 6)
Program ID: 440-48-12-009

Fort Sam Houston
Brooke Army Medical Center Program
Brooke Army Medical Center
Program Director:
Maj Russell Martin, MD
Brooke Army Medical Center HSH-SDG/Rdmg 1000
2450 Stanley Rd
Fort Sam Houston, TX 78234-6046
512 222-0848
Length: 5 Year(s) Total Positions: 21 (GYT: 6)
Subspecialities: CCS
Program ID: 440-48-22-010

Accredited Programs in Surgery-General

* Updated information not provided.

Graduate Medical Education Directory 789
Galveston
University of Texas Medical Branch Hospitals Program
University of Texas Medical Branch Hospitals
Program Director:
James C Thompson, MD
University of Texas Medical Branch Hospitals
Dept of Surgery
Galveston, TX 77550
409 772-1285
Length: 5 Year(s) Total Positions: 36 (GYI: 17)
Program ID: 440-48-11-333

Houston
Baylor College of Medicine Program
Baylor College of Medicine
Davis County Hospital District-Ben Taub General Hospital
Methodist Hospital
Veterans Affairs Medical Center (Houston)
Program Director:
Charles H McCollum, MD
Baylor College of Medicine
Surgery Residency
6151 Baylor Plaza San 402D
Houston, TX 77030
713 796-0789
Length: 5 Year(s) Total Positions: 68 (GYI: 27)
Subspecialties: Peds, VS
Program ID: 440-48-21-334

St Joseph Hospital Program
St Joseph Hospital
Central Texas Medical Foundation
University of Texas M D Anderson Cancer Center
Program Director:
Samuel L Soehnlein, MD
St Joseph Hospital
1819 La Branch
Houston, TX 77002
713 766-2994
Length: 5 Year(s) Total Positions: 21 (GYI: 6)
Program ID: 440-48-22-335

University of Texas at Houston Program
University of Texas Medical School at Houston
Hermann Hospital
Lyndon B Johnson General Hospital
University of Texas M D Anderson Cancer Center
Program Director:
John Rex Potts III, MD
University of Texas Medical School Dept of Medicine
6431 Fannin St 4.206
Houston, TX 77030
713 796-5410
Length: 5 Year(s) Total Positions: 49 (GYI: 18)
Subspecialties: CCH
Program ID: 440-48-21-337

Lackland AFB
Wilford Hall USAF Medical Center Program
Wilford Hall USAF Medical Center (SG)
Program Director:
Richard E Kanaf, MD
50th Medical Wing/VS
2000 Bergquist Dr Ste 1
Lackland AFB
San Antonio, TX 78236-5000
210 670-5060
Length: 5 Year(s) Total Positions: 35 (GYI: 14)
Program ID: 440-48-21-344

Lubbock
Texas Tech University (Lubbock) Program
Texas Tech University Health Sciences Center at Lubbock University Medical Center
Program Director:
G Tom Shires, MD
Texas Tech University Health Science Center
Dept of Surgery
3901 4th
Lubbock, TX 79430
806-743-2372
Length: 5 Year(s) Total Positions: 18 (GYI: 6)
Program ID: 440-48-21-363

San Antonio
University of Texas Health Science Center at San Antonio Program
University of Texas Medical School at San Antonio
Audie L Murphy Memorial Veterans Hospital (San Antonio)
University Hospital-South Texas Medical Center
Program Director:
Kenneth R Srinivas, MD PhD
University of Texas Health Science Center
Surg of Surgery
7700 Floyd Curl Dr
San Antonio, TX 78284-7842
210 367-5711
Length: 5 Year(s) Total Positions: 44 (GYI: 19)
Program ID: 440-48-21-338

Temple
Texas A&M College of Medicine-Scott and White Program
Scott and White Memorial Hospital
Olin E Teague Veterans Center
Program Director:
Randall W Smith, MD
Texas A&M-Scott and White
Graduate Med Educ
2401 S State St
Temple, TX 76508-5001
800-596-4463
Length: 5 Year(s) Total Positions: 15 (GYI: 3)
Program ID: 440-48-21-339

Utah
Salt Lake City
University of Utah Program
University of Utah Medical Center
Holy Cross Hospital
LDS Hospital
Primary Children's Medical Center
Veterans Affairs Medical Center (Salt Lake City)
Program Director:
James McCreary, MD
University of Utah Medical Center Dept of Surgery
50 N Medical Dr
Salt Lake City, UT 84132
801-581-4488
Length: 5 Year(s) Total Positions: 39 (GYI: 17)
Program ID: 440-48-21-340

Vermont
Burlington
Medical Center Hospital of Vermont Program
Medical Center Hospital of Vermont
Program Director:
James C Bierb, MD
Medical Center Hospital of Vermont
Surgery Educ Office
Fletcher House 319
Burlington, VT 05401
800-656-2266
Length: 5 Year(s) Total Positions: 28 (GYI: 11)
Program ID: 400-60-21-341

Virginia
Charlottesville
University of Virginia Program
University of Virginia Medical Center
Veterans Affairs Medical Center (Salem)
Program Director:
Curtis G Driehaus, MD
University of Virginia Hospitals
Dept of Surgery Box 181-95
Charlottesville, VA 22908
804-982-2145
Length: 5 Year(s) Total Positions: 40 (GYI: 28)
Program ID: 440-48-21-342

Norfolk
Eastern Virginia Graduate School of Medicine Program
Eastern Virginia Graduate School of Medicine
DePaul Medical Center
Sentara Leigh Hospital
Sentara Norfolk General Hospital
Veterans Affairs Medical Center (Hampton)
Program Director:
L D Britt, MD MPH
Eastern Virginia Grad Sch of Med 6th Fl Hofheimer Hall
Dept of General Surgery
825 Fairfax Ave
Norfolk, VA 23507-1912
804 446-8050
Length: 5 Year(s) Total Positions: 38 (GYI: 12)
Subspecialties: VS
Program ID: 440-51-21-343

Portsmouth
Naval Medical Center (Portsmouth) Program
Naval Medical Center
Program Director:
Capt Adam M Robinson, Jr, MD
Dept of General Surgery
Naval Medical Center
620 John Paul Jones Circle
Portsmouth, VA 23708-5100
804-398-5460
Length: 5 Year(s) Total Positions: 24 (GYI: 15)
Program ID: 440-51-32-615

* Updated information not provided.
## Richmond

**Medical College of Virginia/Virginia Commonwealth University Program**
Medical College of Virginia/Virginia Commonwealth University
Hunter Holmes McGuire VA Medical Center (Richmond)
Medical College of Virginia Hospitals

**Program Director:**
Andrew S. Wechsler, MD

MCV/Virginia Commonwealth Univ
PO Box 980965
Richmond, VA 23298-9645
804-289-7874

*Length: 5 Year(s)  Total Positions: 45  (GYI: 17)*
*Subspecialties: VS*
*Program ID: 440-51-31-344*

## Roanoke

**Carilion Health System Program**
Carilion Health System
Community Hospital of Roanoke Valley
Roanoke Memorial Hospitals

**Program Director:**
Ross S. Dawes, MD

Roanoke Memorial Hospitals (Carilion Health System)
Bellevue at Jefferson St
PO Box 13867
Roanoke, VA 24033
703-881-8520

*Length: 5 Year(s)  Total Positions: 30  (GYI: 6)*
*Program ID: 440-51-31-345*

## Virginia

**Virginia Mason Medical Center Program**
Virginia Mason Medical Center
Haborview Medical Center

**Program Director:**
John A. Ryan Jr, MD

Virginia Mason Medical Center
Office of Housestaff Affairs (HF-ME)
325 Seneca St
Seattle, WA 98101
206-687-6150

*Length: 5 Year(s)  Total Positions: 24  (GYI: 5)*
*Program ID: 440-56-12-349*

**Tacoma**

**Madigan Army Medical Center Program**
Madigan Army Medical Center
University of Washington Medical Center

**Program Director:**
William C. Williard, MD

Madigan Army Medical Center
Dept. of Surgery
Tacoma, WA 98431-6000
256-868-2200

*Length: 5 Year(s)  Total Positions: 15  (GYI: 6)*
*Program ID: 440-56-12-111*

## Washington

**Seattle**

**Swedish Medical Center-Seattle Program**
Swedish Medical Center-Seattle
Harborview Medical Center

**Program Director:**
Michael J. Hart, MD
Surgical Residency "A" Fl NW
747 Broadway
PO Box 14999
Seattle, WA 98111-9999
206-386-1123

*Length: 5 Year(s)  Total Positions: 12  (GYI: 4)*
*Program ID: 440-54-32-347*

**University of Washington Program**
University of Washington School of Medicine
Harborview Medical Center
Providence Medical Center
University of Washington Medical Center
Veterans Affairs Medical Center (Seattle)

**Program Director:**
Hugh M. Pry, MD
University of Washington
Dept of Surgery RF-25
1969 NE Pacific St
Seattle, WA 98195
206-543-3067

*Length: 5 Year(s)  Total Positions: 37  (GYI: 12)*
*Subspecialties: VS*
*Program ID: 440-54-21-548*

## Wisconsin

**La Crosse**

**Gundersen Medical Foundation-La Crosse Lutheran Hospital Program**
Gundersen Medical Foundation-La Crosse Lutheran Hospital

**Program Director:**
Thomas H. Coghill, MD
Gundersen Medical Foundation
Lutheran Hospital-La Crosse
1886 South Ave
La Crosse, WI 54601-6429
608-782-3280

*Length: 5 Year(s)  Total Positions: 10  (GYI: 2)*
*Program ID: 440-56-12-354*

## Madison

**University of Wisconsin Program**
University of Wisconsin Hospital and Clinics
William S. Middleton Veterans Hospital

**Program Director:**
Folker O. Bentez, MD
University of Wisconsin Hospital and Clinics
Dept of Surgery 3F1
1000 N Oak Ave
Madison, WI 53792-7375
608-263-5177

*Length: 5 Year(s)  Total Positions: 30  (GYI: 8)*
*Program ID: 440-56-21-355*

## Marshfield

**University of Wisconsin (Marshfield) Program**
Marshfield Clinic-St Joseph's Hospital

**Program Director:**
Bruce E. Brink, MD
Marshfield Clinic
Dept of General Surgery 3F1
1000 N Oak Ave
Marshfield, WI 54449
715-387-5584

*Length: 5 Year(s)  Total Positions: 10  (GYI: 2)*
*Program ID: 440-56-31-356*

## Milwaukee

**Medical College of Wisconsin Program**
Medical College of Wisconsin Affiliate Hospitals Inc
Clement J Zablocki Veterans Affairs Medical Center
Proedertt Memorial Lutheran Hospital
John L. Doane Hospital

**Program Director:**
Robert E. Condon, MD
Proedertt Memorial Lutheran Hospital Dept of Surgery
9000 W Wisconsin Ave
Milwaukee, WI 53226
414-464-5705

*Length: 5 Year(s)  Total Positions: 48  (GYI: 12)*
*Subspecialties: VS*
*Program ID: 440-56-21-557*

*Updated information not provided.*
Surgical Critical Care (Surgery-General)

Florida

Miami
University of Miami-Jackson Memorial Medical Center Program
University of Miami-Jackson Memorial Medical Center
Program Director: Joseph M. Ciofetta, MD
University of Miami School of Medicine
Dept of Surgery (B44)
1600 NW 12th Ave
Miami, FL 33136
305-663-2740
Length: 1 Year(s) Total Positions: 4
Program ID: 442-11-21-004

Hawaii

Honolulu
University of Hawaii Program
University of Hawaii John A Burns School of Medicine
Queen's Medical Center
Program Director: Mihue Xu, MD
University of Hawaii at Manoa
John A Burns Sch of Medicine
1350 Lusitania St 6th Fl
Honolulu, HI 96813
808-692-2623
Length: 1 Year(s) Total Positions: 1
Program ID: 442-11-21-036

Maryland

Baltimore
Johns Hopkins University Program
Johns Hopkins University School of Medicine
Johns Hopkins Hospital
Program Director: Pamela A. Lipsietz, MD
600 N Wolfe St
Baltimore, MD 21287-6005
410-955-3739
Length: 1 Year(s) Total Positions: 5
Program ID: 442-23-31-009
University of Maryland Program
University of Maryland Medical System
Program Director: Donald S. Gunn, MD
Univ of Maryland Sch of Med
Sect of Trauma & Critical Care
22 S Greene St
Baltimore, MD 21201
410-328-9761
Length: 1 Year(s) Total Positions: 12
Program ID: 442-25-21-032

Massachusetts

Boston
Boston University Program
Boston University Medical Center-Boston Hospital
Boston Medical Center
Program Director: Richard C. Dennis, MD
Boston University Medical Center Hospital
Critical Care Medicine A2707
88 E Newton St
Boston, MA 02118-2803
617-638-8006
Length: 1 Year(s) Total Positions: 4
Program ID: 442-24-21-011

Michigan

Ann Arbor
University of Michigan Program
University of Michigan Hospitals
Program Director: Robert H. Bartlett, MD
University of Michigan Hospital
1500 E Medical Center Dr
Ann Arbor, MI 48109-0831
313-936-5422
Length: 1 Year(s) Total Positions: 4
Program ID: 442-25-21-013

Connecticut

Hartford
Hartford Hospital/University of Connecticut Program
Hartford Hospital
Program Director: Neil S. Yeast, MD
Hartford Hospital
80 Seymour St
PO Box 5007
Hartford, CT 06102-5007
203-854-5222
Length: 1 Year(s) Total Positions: 4
Program ID: 442-25-21-033

New Haven
Yale-New Haven Medical Center Program*
Yale-New Haven Hospital
Bridgeport Hospital
Program Director: Stephen M. Cohn, MD
Surgical Critical Care
350 Congress Ave Ste 3A
New Haven, CT 06510
203-796-2575
Length: 1 Year(s)
Program ID: 442-08-21-045

**Updated information not provided.**
Minnesota

Minneapolis

University of Minnesota Program
University of Minnesota Medical School
St Paul-Ramsey Medical Center
University of Minnesota Hospital and Clinic
Veterans Affairs Medical Center (Minneapolis)
Program Director:
Frank A Carea, MD
University of Minnesota Hospitals and Clinics
420 Delaware St SE
Box 42 UMMHC
Minneapolis, MN 55455
612 624-8989
Length: 1 Year(s) Total Positions: 6
Program ID: 443-26-21-022

New Jersey

Camden

UMDNJ-Robert Wood Johnson Medical School (Camden) Program
Cooper Hospital-University Medical Center
Program Director:
Gus J Slotman, MD
Cooper Hospital-University Medical Center
Dept of Surg/Div of Surg Crit Care
3 Cooper Plaza Ste 411
Camden, NJ 08103
609 963-3673
Length: 1 Year(s) Total Positions: 3
Program ID: 443-35-21-031

New York

Manhasset

North Shore University Hospital Program
North Shore University Hospital
Program Director:
Dan S Reiner, MD
Robert J Ward, MD
North Shore University Hospital
300 Community Dr
Manhasset, NY 11030-3976
516 568-4964
Length: 1 Year(s) Total Positions: 2
Program ID: 443-35-21-015

New York Medical College at Westchester County Medical Center Program
New York Medical College
Westchester County Medical Center
Program Director:
John A Savino, MD
Dept of Surgery
Munger Pavilion
Valhalla, NY 10595
914 693-6352
Length: 1 Year(s) Total Positions: 2
Program ID: 443-35-11-035

North Carolina

Chapel Hill

University of North Carolina Hospitals Program
University of North Carolina Hospitals
Program Director:
Anthony A Meyer, MD
University of North Carolina Hospitals and Clinics
164 Burnett Womack
Campus 72101
Chapel Hill, NC 27599-7210
919 966-4321
Length: 1 Year(s) Total Positions: 2
Program ID: 443-35-21-026

Ohio

Columbus

Ohio State University Program
Ohio State University Medical Center
Program Director:
Louis Planachuk, MD
The Ohio State University Hospital
410 W Tenth Ave
NT37 Don Hall
Columbus, OH 43210
614 294-4027
Length: 1 Year(s) Total Positions: 2
Program ID: 443-35-21-021

* Updated information not provided.

Graduate Medical Education Directory
Pennsylvania

Hershey

Milton S Hershey Medical Center of Pennsylvania State University Program*
Penn State University Hospital Milton S Hershey Med Ctr
Program Director: Robert N Conney, MD
Dept of Surgery
The Milton S Hershey Med Ctr
PO Box 8560
Hershey, PA 17033
717 531-4404
Length: 1 Year(s)
Program ID: 443-41-21-041

Pittsburgh

University Health Center of Pittsburgh Program
University Health Center of Pittsburgh Presbyterian University Hospital/UPMC
Program Director: Andrew B Pelitsman, MD
Surgical Critical Care Fellowship
1071 Scuffe Hall
Pittsburgh, PA 15261
412 686-9055
Length: 1 Year(s) Total Positions: 3
Program ID: 443-41-24-005

Rhode Island

Providence

Brown University Program*
Rhode Island Hospital
Miriin Hospital
Program Director: R. Hank Simms, MD
Dept of Surgery Div of Surgical Critical Care/ Trauma
Rhode Island Hospital
593 Eddy St
Providence, RI 02903
401 444-5583
Length: 1 Year(s)
Program ID: 443-43-21-044

Tennessee

Knoxville

University of Tennessee Medical Center at Knoxville Program*
University of Tennessee Graduate School of Medicine
University of Tennessee Memorial Hospital
Program Director: Elaine L Enderson, MD
Div of Trauma/Critical Care
Univ of TN Med Ctr at Knoxville
1804 Alcoa Hwy U-11
Knoxville, TN 37920
865 544-8286
Length: 1 Year(s)
Program ID: 443-47-21-043

Memphis

University of Tennessee Program
University of Tennessee College of Medicine
Regional Medical Center at Memphis
Program Director: Timothy C Fabian, MD
Univ of Tennessee Memphis
Dept of Surgery
865 Court Ave Box 16
Memphis, TN 38163
901 448-5914
Length: 1 Year(s) Total Positions: 1
Program ID: 443-47-21-024

Nashville

Vanderbilt University Program
Vanderbilt University Medical Center
Program Director: Loren D Nelson, MD
Vanderbilt University School of Medical
T-3104 Med Ctr N
1111 21st & Garland Ave
Nashville, TN 37232-3100
615 343-6914
Length: 1 Year(s) Total Positions: 2
Program ID: 443-47-21-007

Texas

Dallas

University of Texas Southwestern Medical School Program
University of Texas Southwestern Medical School
Dallas County Hospital District Parkland Memorial Hospital
Program Director: Joseph P Miele, MD
Univ of Texas Southwestern Medical Center
Dept of Surgery
5523 Harry Hines Blvd
Dallas, TX 75390
214 648-7305
Length: 1 Year(s) Total Positions: 2
Program ID: 443-48-21-001

Fort Sam Houston

Brooke Army Medical Center Program
Brooke Army Medical Center
Program Director: LTC Jonathan H Jaffin, MD
Brooke Army Medical Center
Dept of Surgery
Critical Care Med
Fort Sam Houston, TX 78234-6200
210 916-8350
Length: 1 Year(s) Total Positions: 1
Program ID: 443-48-23-006

Houston

University of Texas at Houston Program*
University of Texas Medical School at Houston
Hermann Hospital
Program Director: Nathan E Coates, MD
Dept of Surgery
University of Texas at Houston
6431 Fannin MSB 6.164
Houston, TX 77030
713 794-5169
Length: 1 Year(s)
Program ID: 443-48-21-038

* Updated information not provided.

Wisconsin

Milwaukee

Medical College of Wisconsin Program
Medical College of Wisconsin Affiliated Hospitals Inc
 Froedtert Memorial Lutheran Hospital
John L. Joyce Hospital
Program Director: Robert E Condon, MD
Dept of Surgery
9200 W Wisconsin Ave
Milwaukee, WI 53226
414 454-5085
Length: 1 Year(s) Total Positions: 2
Program ID: 443-56-21-010

Graduate Medical Education Directory

794
Thoracic Surgery

Alabama

Birmingham

University of Alabama Medical Center
Program
University of Alabama Hospital
Veterans Affairs Medical Center (Birmingham)
Program Director:
A D Pacileo, MD
University of Alabama Medical Center
UAB Station
Birmingham, AL 35294-0016
205 934-6306
Length: 2 Year(s)  Total Positions: 4
Program ID: 460-01-21-097

Arizona

Tucson

University of Arizona Program
University of Arizona College of Medicine
University Medical Center
Veterans Affairs Medical Center (Tucson)
Program Director:
Jack O Coppeland, MD
University of Arizona Health Sciences Center
Cardiothoracic Surgery
5011 N Campbell Ave Rm 4402
Tucson, AZ 85724
602 626-6339
Length: 2 Year(s)  Total Positions: 2
Program ID: 460-05-21-106

Arkansas

Little Rock

University of Arkansas for Medical Sciences Program
University of Arkansas College of Medicine
Arkansas Children's Hospital
John L McCollum Memorial Veterans Hospital
University Hospital of Arkansas
Program Director:
James E Barrell Jr, MD
Arkansas Children's Hospital
800 Marshall St
Little Rock, AR 72202-3591
501 320-1059
Length: 2 Year(s)  Total Positions: 2
Program ID: 460-04-21-08

California

Loma Linda

Loma Linda University Program
Loma Linda University Medical Center
Kaiser Foundation Hospital (Fontana)
Program Director:
Steven R Gunstey, MD
Loma Linda Medical Center
Div of Cardiothoracic Surgery
11234 Anderson St Rm 218A
Loma Linda, CA 92354
909 824-2364
Length: 3 Year(s)  Total Positions: 3
Program ID: 460-05-21-102

Los Angeles

UCLA Medical Center Program
UCLA School of Medicine
UCLA Medical Center
Veterans Affairs Medical Center (West Los Angeles)
Program Director:
Hillidh Lai, MD
UCLA Ctr for the HHM Sci
Cardiothoracic Surgery Rm 62-182A
10830 Le Conte Ave
Los Angeles, CA 90024-1705
310 206-2323
Length: 2 Year(s)  Total Positions: 3
Program ID: 460-05-21-018

University of Southern California Program
Los Angeles County USC Medical Center
Children's Hospital of Los Angeles
Program Director:
Vaugn A Starner, MD
USC Cardiothoracic Surgery Training Program at LAC-USC Med Ctr
CHLA and University Hospital
1510 San Pablo St Ste 415
Los Angeles, CA 90033
213 342-5049
Length: 2 Year(s)  Total Positions: 5
Program ID: 460-05-21-001

Sacramento

University of California (Davis) Program
University of California (Davis) Medical Center
Children's Hospital Medical Center of Northern California
Kaiser Foundation Hospital (Sacramento)
Program Director:
John B. Benfield, MD
University of California Davis Medical Center
Div of Cardiothoracic Surgery
401 X St
Sacramento, CA 95817
916 734-3663
Length: 2 Year(s)  Total Positions: 2
Program ID: 460-05-21-112

San Diego

University of California (San Diego) Program
University of California (San Diego) Medical Center
Veterans Affairs Medical Center (San Diego)
Program Director:
Stuart W Jumiloski, MD
Richard Petersen, MD
UCSD Med Ctr
Div of Cardiothoracic Surgery
200 W Arbor Dr Rm 8092
San Diego, CA 92103-8892
619 693-6133
Length: 2 Year(s)  Total Positions: 2
Program ID: 460-05-21-109

San Francisco

University of California (San Francisco) Program
University of California (San Francisco) School of Medicine
University of California (San Francisco) Medical Center
Veterans Affairs Medical Center (San Francisco)
Program Director:
Frank L Hanley, MD
Benson B Roe, MD
University of California San Francisco
Div of Cardiothoracic Surgery
M-563 Box 0118
San Francisco, CA 94143-0118
415 476-4017
Length: 2 Year(s)  Total Positions: 2
Program ID: 460-05-21-015

Stanford

Stanford University Program
Stanford University Hospital
Veterans Affairs Medical Center (Palo Alto)
Program Director:
Bruce A Birze, MD
Stanford University School of Medicine
Dept of Cardiothoracic Surgery
Stanford, CA 94305-5247
415 725-5771
Length: 2 Year(s)  Total Positions: 6
Subspecialties: VS
Program ID: 460-05-21-016

Colorado

Denver

University of Colorado Program
University of Colorado Health Sciences Center
Children's Hospital
Veterans Affairs Medical Center (Denver)
Program Director:
Frederick L Grover, MD
Univ of Colorado Hhh Sci Ctr
4200 E Ninth Ave #6810
Denver, CO 80262
303 270-4527
Length: 3 Year(s)  Total Positions: 3
Program ID: 460-07-21-017

* Updated information not provided.
Connecticut

New Haven

Yale-New Haven Medical Center Program
Yale-New Haven Hospital
Program Director: John A Ritterbandes, MD
Yale University School of Medicine
330 Cedar St
New Haven, CT 06510-0962
203 785-2794
Length: 2 Year(s) Total Positions: 4
Program ID: 460-08-21-018

District of Columbia

Washington

George Washington University Program
George Washington University School of Medicine
Children's National Medical Center
George Washington University Hospital
Veterans Affairs Medical Center (Washington, DC)
Washington Hospital Center
Program Director: Benjamin J Aaron, MD
George Washington University
2150 Pennsylvania Ave
Washington, DC 20037
202 984-3847
Length: 2 Year(s) Total Positions: 4
Program ID: 460-18-21-019

Walter Reed Army Medical Center Program
Walter Reed Army Medical Center
Program Director: Michael J Barry, MD
Chief Thoracic Surgery Service
Walter Reed Army Medical Center
6825 16th St NW
Washington, DC 20307-6001
202 576-1453
Length: 2 Year(s) Total Positions: 2
Program ID: 460-16-11-063

Florida

Gainesville

University of Florida Program
University of Florida College of Medicine
Shands Hospital at the University of Florida
Veterans Affairs Medical Center (Gainesville)
Program Director: James A Alexander, MD
PO Box 100286-0286
Gainesville, FL 32610-0286
904 446-0864
Length: 2 Year(s) Total Positions: 3
Program ID: 460-11-31-020

Miami

University of Miami-Jackson Memorial Medical Center Program
University of Miami-Jackson Memorial Medical Center
Mount Sinai Medical Center of Greater Miami
Veterans Affairs Medical Center (Miami)
Program Director: Richard J Thuerer, MD
Jackson Memorial Hospital
1611 NW 12th Ave
K Tower 3073
Miami, FL 33136-1094
305 444-9834
Length: 2 Year(s) Total Positions: 4
Program ID: 460-11-21-021

Georgia

Atlanta

Emory University Program
Emory University School of Medicine
Crawford Long Hospital of Emory University
Emory University Hospital
Grady Memorial Hospital
Hercietta Egleston Hospital for Children
Veterans Affairs Medical Center (Atlanta)
Program Director: Robert A Guyton, MD
The Emory Clinic Cardiothoracic Surgery
1965 Clifton Rd NE
Atlanta, GA 30322
404 329-3069
Length: 2 Year(s) Total Positions: 9
Program ID: 460-12-21-022

Augusta

Medical College of Georgia Program
Medical College of Georgia Hospital and Clinics
Veterans Affairs Medical Center (Augusta)
Program Director: H Victor Moore, MD
Med Coll of Georgia Hosp and Clinics
Dept of Cardiothoracic Surgery
GA 4000-Augusta, GA 30912-4040
706 721-3328
Length: 2 Year(s) Total Positions: 3
Program ID: 460-12-21-023

Illinois

Chicago

McGaw Medical Center of Northwestern University Program
Northwestern University Medical School
Children's Memorial Medical Center
Evanston Hospital
Northwestern Memorial Hospital
Veterans Affairs Lakeside Medical Center (Chicago)
Program Director: John H Sanders Jr, MD
Northwestern University Medical School
251 E Chicago Ave
Wiley Tower Ste #1090
Chicago, IL 60611
312 996-3212
Length: 3 Year(s) Total Positions: 3
Program ID: 460-16-21-025

Rush-Presbyterian-St Luke's Medical Center Program
Rush-Presbyterian-St Luke's Medical Center
Program Director: Hansan Najafi, MD
Rush-Presbyterian-St Luke's Medical Center
1653 W Congress Pkwy
Chicago, IL 60612-8964
312 926-5073
Length: 2 Year(s) Total Positions: 6
Subspecialties: VS
Program ID: 460-16-21-037

University of Chicago Program
University of Chicago Hospitals
LaRance Memorial Health System
Louis A Weiss Memorial Hospital
Program Director: Robert B Karp, MD
University of Chicago
5841 S Maryland Ave MC5040
Chicago, IL 60637
312 734-2500
Length: 2 Year(s) Total Positions: 2
Program ID: 460-16-11-028

University of Illinois College of Medicine at Chicago Program
University of Illinois College of Medicine at Chicago
Cook County Hospital
BHS Christ Hospital and Medical Center
University of Illinois Hospital and Clinics
Veterans Affairs Westside Medical Center (Chicago)
Program Director: Renee S Hartz, MD
Univ of Illinois Hosp Div of Cardiothoracic Surgery
1740 W Taylor St
MC360 Rm 2164-UH
Chicago, IL 60612
312 996-7566
Length: 2 Year(s) Total Positions: 2
Program ID: 460-16-21-029

Maywood

Loyola University Program
Foster G McGaw Hospital-Loyola University of Chicago
Edward H Hines Jr Veterans Affairs Hospital
Program Director: Rogue Pifarrre, MD
Foster G McGaw Hospital
Thoracic and Cardiovascular Surgery
2166 S First Ave
Maywood, IL 60153
708 216-6588
Length: 2 Year(s) Total Positions: 4
Program ID: 460-16-31-030

Indiana

Indianapolis

Indiana University University Medical Center Program
Indiana University Medical Center
Richard L Roudebush Veterans Affairs Medical Center
Program Director: John W Brown, MD
Indiana University Medical Center
Emerson Hall 212
545 Barnhill Dr
Indianapolis, IN 46203-0125
317 274-7150
Length: 2 Year(s) Total Positions: 4
Program ID: 460-17-21-031

* Updated information not provided.
Iowa

Iowa City

University of Iowa Hospitals and Clinics Program
University of Iowa Hospitals and Clinics
Program Director:
Douglas M Behrendt, MD
University Iowa Hospitals and Clinics
Dept of Surgery
Div of Cardiothoracic Surgery
Iowa City, IA 52242-1009
319 356-2761
Length: 2 Year(s) Total Positions: 4
Program ID: 460-15-21-032

Louisiana

New Orleans

Alton Ochsner Medical Foundation Program
Alton Ochsner Medical Foundation
Program Director:
John L Ochsner, MD
Alton Ochsner Medical Foundation
Dept of Graduate Med Edu
1616 Jefferson Hwy
New Orleans, LA 70121
504 842-0473
Length: 3 Year(s) Total Positions: 2
Program ID: 460-21-21-038

Tulane University Program
Tulane University School of Medicine
Louisiana State University School of Medicine
Medical Center of Louisiana at New Orleans
Tulane University Hospital and Clinics
Veterans Affairs Medical Center-LSU Service (New Orleans)
Program Director:
John D Pigott, MD
Tulane University Medical School
1430 Tulane Ave
New Orleans, LA 70112
504 552-7465
Length: 2 Year(s) Total Positions: 2
Program ID: 460-21-21-103

Massachusetts

Boston

Boston University Program
Boston University Medical Center
Program Director:
Richard J Shemanski, MD
University Hospital Dept of Cardio-Thoracic Surgery
88 E Newton St
Boston, MA 02118-2983
617 638-7560
Length: 3 Year(s) Total Positions: 2
Program ID: 460-24-21-039

Brigham and Women's Hospital/Children's Hospital Program*
Brigham and Women's Hospital
Children's Hospital
Program Director:
Lawrence E Cohen, MD
Brigham and Women's Hospital
76 Francis St
Boston, MA 02115
617 732-7678
Length: 2 Year(s) Total Positions: 6
Program ID: 460-24-23-048

Massachusetts General Hospital Program
Massachusetts General Hospital
Children's Hospital
Mount Auburn Hospital
Program Director:
Mortimer J Buckley, MD
Massachusetts General Hospital
65 Fruit St
Boston, MA 02114
617 726-3726
Length: 3 Year(s) Total Positions: 7
Program ID: 460-24-11-040

New England Deaconess Hospital Program
New England Deaconess Hospital
Children's Hospital
Program Director:
Sidney Levinson, MD
New England Deaconess Hospital
110 Francis St Ste S5
Boston, MA 02215
617 632-5832
Length: 2 Year(s) Total Positions: 3
Program ID: 460-24-21-041

New England Medical Center Hospitals Program
New England Medical Center Hospitals
St Elizabeth's Medical Center of Boston
Program Director:
Douglas D Payne, MD
New England Medical Center
760 Washington St
Boston, MA 02111
617 636-5093
Length: 2 Year(s) Total Positions: 2
Program ID: 460-24-21-042

Kansas

Kansas City

University of Kansas Medical Center Program*
University of Kansas School of Medicine
University of Kansas Medical Center
Veterans Affairs Medical Center (Kansas City)
Program Director:
Jim F Moran, MD
1212 Kansas University Hospital
University of Kansas Medical Center
3601 Rainbow Blvd
Kansas City, KS 66160-7373
913 588-2340
Length: 2 Year(s) Total Positions: 2
Program ID: 460-18-21-108

Kentucky

Lexington

University of Kentucky Medical Center Program
University Hospital Albert B Chandler Medical Center
Veterans Affairs Medical Center (Lexington)
Program Director:
Robert K Salley, MD
University of Kentucky Medical Center
800 Rose St MN726
Dept of Cardiothoracic Surgery
Lexington, KY 40506-0084
606 323-4634
Length: 2 Year(s) Total Positions: 2
Program ID: 460-30-21-034

Louisville

University of Louisville Program
University of Louisville School of Medicine
Joseph Hospital
Kosair Children's Hospital (Alliant Health System)
University of Louisville Hospital
Veterans Affairs Medical Center (Louisville)
Program Director:
Lamanda A Gray Jr, MD
School of Medicine Dept of Surgery
University of Louisville
Louisville, KY 40292
502 855-6199
Length: 2 Year(s) Total Positions: 4
Program ID: 460-19-21-105

* Updated information not provided.

Graduate Medical Education Directory 797
Accredited Programs in Thoracic Surgery

Worcester
University of Massachusetts Medical Center Program*
University of Massachusetts Medical Center
Children's Hospital
St Vincent Hospital
Program Director: Thomas J Vander Salm, MD
University of Massachusetts Medical Center
55 Lake Ave N
Worcester, MA 01605
508-856-2216
Length: 3 Year(s) Total Positions: 3
Program ID: 460-54-21-111

Rochester
Mayo Graduate School of Medicine Program
Mayo Graduate School of Medicine Mayo Foundation
Mayo Clinic (Rochester)
Rochester Methodist Hospital
St Mary's Hospital of Rochester
Program Director: Hartnell V. Schaff, MD
MSOM Application Processing Ctr
Mayo Graduate School of Medicine
209 First St SW
Rochester, MN 55905
507-284-7969
Length: 3 Year(s) Total Positions: 6
Program ID: 460-28-21-047

St Louis
Barnes Hospital Group Program
Barnes Hospital
Jewish Hospital of St Louis
St Louis Children's Hospital
Program Director: James L Cox, MD
Grad Med Educ Washington University
One Barnes Hospital Plaza
St Louis, MO 63110
314-362-6185
Length: 2 Year(s) Total Positions: 6
Program ID: 460-28-21-061

St Louis University Group of Hospitals Program
St Louis University School of Medicine
Cardinal Glennon Children's Hospital
St Louis University Hospital
Veterans Affairs Medical Center (St Louis)
Program Director: George C Kaiser, MD
St Louis University School of Medicine
3635 Vista Ave and Grand Blvd
PO Box 15250
St Louis, MO 63110-0250
314-377-3520
Length: 2 Year(s) Total Positions: 2
Program ID: 460-28-21-052

Michigan
Ann Arbor
University of Michigan Program
University of Michigan Hospitals
Veterans Affairs Medical Center (Ann Arbor)
Program Director: Mark B Orringer, MD
University Hospital
2110 N. Alfred Taubman Hil, Care
1500 E Medical Center Dr
Ann Arbor, MI 48109-6544
313-950-4875
Length: 2 Year(s) Total Positions: 9
Program ID: 460-25-21-044

Mississippi
Jackson
University of Mississippi Medical Center Program
University of Mississippi School of Medicine
University Hospital
Veterans Affairs Medical Center (Jackson)
Program Director: Bobby J Heath, MD
University of Mississippi Medical Center
2500 N State St
Jackson, MS 39216-4825
601-984-1700
Length: 2 Year(s) Total Positions: 1
Program ID: 460-27-11-048

Missouri
Columbia
University of Missouri-Columbia Program
University of Missouri-Columbia School of Medicine
Harry S Truman Memorial Veterans Hospital
University and Children's Hospital
Program Director: Jack J Curtis, MD
University of Missouri Hospital and Clinics
Dept of Cardiothoracic Surg MA312
Columbia, MO 65212
314-856-0144
Length: 2 Year(s) Total Positions: 2
Program ID: 460-28-21-049

St Louis
Barnes Hospital Group Program
Barnes Hospital
Jewish Hospital of St Louis
St Louis Children's Hospital
Program Director: James L Cox, MD
Grad Med Educ Washington University
One Barnes Hospital Plaza
St Louis, MO 63110
314-362-6185
Length: 2 Year(s) Total Positions: 6
Program ID: 460-28-21-061

New Jersey
Newark
Newark Beth Israel Medical Center Program
Newark Beth Israel Medical Center
Children's Hospital of New Jersey
Program Director: Isaac Gleichman, MD
Newark Beth Israel Medical Center
301 Lyons Ave
Newark, NJ 07112
201-926-7255
Length: 2 Year(s) Total Positions: 1
Program ID: 460-28-11-054

UMDNJ-New Jersey Medical School Program
UMDNJ-New Jersey Medical School
Dept of Veterans Affairs Medical Center (East Orange)
St Michael's Medical Center (Cathedral Health Services Inc)
UMDNJ-University Hospital
Program Director: James S Donahue, MD
UMDNJ-New Jersey Medical School
Section of Cardiothoracic Surgery
185 S Orange Ave G-584
Newark, NJ 07103-3714
201-992-5078
Length: 2 Year(s) Total Positions: 3
Program ID: 460-28-21-053

* Updated information not provided.
Piscataway
UMDNJ-Robert Wood Johnson Medical School Program
UMDNJ-Robert Wood Johnson Medical School
Deborah Heart and Lung Center
Robert Wood Johnson University Hospital
St Peter's Medical Center
Program Director:
James W Mackenzie, MD
UMDNJ-Robert Wood Johnson Medical School
One Robert Wood Johnson Pk EN19
61 French St
New Brunswick, NJ 08903-0019
908 235-7896
Length: 2 Year(s)  Total Positions: 5
Program ID: 469-53-11-110

Brooklyn
SUNY Health Science Center at Brooklyn Program
SUNY HSC at Brooklyn College of Medicine
Kings County Hospital Center
Maimonides Medical Center
University Hospital-SUNY Health Science Center at Brooklyn
Veterans Affairs Medical Center (Brooklyn)
Program Director:
Joseph F. Cunningham, Jr, MD
SUNY Health Science Center at Brooklyn
Div of Cardiothoracic Surgery
456 Clarkson Ave
Brooklyn, NY 11203
718 270-1981
Length: 2 Year(s)  Total Positions: 4
Program ID: 469-53-11-066

New York
Albany
Albany Medical Center Program*
Albany Medical Center Hospital
Program Director:
Victor A Ferraris, MD PhD
Albany Medical College Dept of Thoracic Surgery
47 New Scotland Ave
Ste 32023-41
Albany, NY 12208-3470
518 262-5714
Length: 2 Year(s)  Total Positions: 2
Program ID: 469-53-11-056

Buffalo
SUNY at Buffalo Graduate Medical-Dental Education Consortium Program*
SUNY at Buffalo Grad Medical-Dental Education Consortium
Buffalo General Hospital
Children's Hospital of Buffalo
Millard Fillmore Hospitals
Roswell Park Cancer Institute
Veterans Affairs Medical Center (Buffalo)
Program Director:
Eddie L Hoover, MD
Erie County Medical Center
452 Grider St
Buffalo, NY 14215
716 898-0502
Length: 2 Year(s)  Total Positions: 6
Program ID: 469-53-21-066

New Hyde Park
Albert Einstein College of Medicine at Long Island Jewish Medical Center Program
Long Island Jewish Medical Center
Program Director:
L Michael Gravet, MD
Long Island Jewish Med Ctr Dept of Cardiothoracic Surgery
The Heart Institute Fl 2132
270-05 76th Ave
New Hyde Park, NY 11040
718 476-7460
Length: 2 Year(s)  Total Positions: 2
Program ID: 469-53-21-062

Syracuse
SUNY Health Science Center at Syracuse Program
University Hospital-SUNY Health Science Center at Syracuse
Crouse-Irving Memorial Hospital
Program Director:
Frederick B Parker Jr, MD
SUNY Health Science Center
Div of Cardiopulmonary Surgery
750 E Adams St
Syracuse, NY 13210
315 464-5549
Length: 2 Year(s)  Total Positions: 2
Program ID: 469-53-21-068

* Updated information not provided.
North Carolina

Chapel Hill

University of North Carolina Hospitals Program
University of North Carolina Hospitals
Program Director: Benson R Wilson, MD
University of North Carolina School of Medicine
Div of Cardiothoracic Surgery
108 Burnett-Womack Bldg CB47065
Chapel Hill, NC 27599-7955
919 966-3318
Length: 2 Year(s) Total Positions: 3
Program ID: 460-06-11-049

Ohio

Cleveland

Case Western Reserve University Program
University Hospitals of Cleveland MetroHealth Medical Center
Veterans Affairs Medical Center (Cleveland)
Program Director:
Alexander S Geha, MD, MS
University Hospitals of Cleveland
11100 East Blvd Ave
Cleveland, OH 44106-5000
216 844-3651
Length: 2 Year(s) Total Positions: 4
Program ID: 460-38-21-074

Cleveland Clinic Foundation Program
Cleveland Clinic Foundation
Program Director:
Delos M Cosgrove III, MD
Cleveland Clinic Foundation
1900 Euclid Ave P25
Dept of Thoracic Surgery
Cleveland, OH 44195
216 445-6510
Length: 3 Year(s) Total Positions: 6
Program ID: 460-38-12-078

Columbus

Ohio State University Program
Ohio State University Medical Center
Children's Hospital
Program Director:
P David Myerowitz, MD
The Ohio State University Hospital
N 855 Doan Hall
410 W Tenth Ave
Columbus, OH 43210
614 293-8865
Length: 3 Year(s) Total Positions: 3
Program ID: 460-38-21-077

Oklahoma

Oklahoma City

University of Oklahoma Health Sciences Center Program
University of Oklahoma College of Medicine-Oklahoma City
Children's Hospital of Oklahoma
University Hospital and Clinics
Veterans Affairs Medical Center (Oklahoma City)
Program Director:
Ronald C Edkins, MD
University of Oklahoma College of Medicine
PO Box 26951
Oklahoma City, OK 73190
405 271-5789
Length: 2 Year(s) Total Positions: 2
Program ID: 460-39-21-078

Oregon

Portland

Oregon Health Sciences University Program
Oregon Health Science University Hospital
Veterans Affairs Medical Center (Portland)
Program Director:
Adnan Cobanoglu, MD
Oregon Health Sciences University L503
5111 SW Sam Jackson Park Rd
Portland, OR 97239-3098
503 444-7520
Length: 2 Year(s) Total Positions: 2
Program ID: 460-40-21-079

Pennsylvania

Hershey

Milton S Hershey Medical Center of Pennsylvania State University Program
Penn State University Hospital Milton S Hershey Med Ctr
Program Director:
William S Pierce, MD
Milton S Hershey Medical Center of the Penn State University
Dept of Surgery C4068
500 University Dr PO Box 850
Hershey, PA 17033
717 531-8338
Length: 2 Year(s) Total Positions: 2
Program ID: 460-41-11-080

Philadelphia

 MCPHU/Hahnemann University Hospital Program
Hahnemann University Hospital
Fox Chase Cancer Center
St Christopher's Hospital for Children
Program Director:
Stanley K Brockman, MD
Hahnemann University
Broad & Vine MS111
Philadelphia, PA 19102-1182
215 762-7500
Length: 2 Year(s) Total Positions: 3
Program ID: 460-41-31-104

Thomas Jefferson University Program
Thomas Jefferson University Hospital
Children's Hospital of Philadelphia
The Medical Center of Delaware
Program Director:
Richard N Edin, MD
Thomas Jefferson University
925 Walnut St Ste 807
Philadelphia, PA 19107
215 655-6054
Length: 3 Year(s) Total Positions: 3
Program ID: 460-41-31-081

University of Pennsylvania Program
Hospital of the University of Pennsylvania
Children's Hospital of Philadelphia
Program Director:
Timothy J Gardner, MD
Hospital of the University of Pennsylvania
3400 Spruce St
Fourth Silverstein Pavilion
Philadelphia, PA 19104
215 662-3022
Length: 2 Year(s) Total Positions: 4
Program ID: 460-41-21-082

* Updated information not provided.
Pittsburgh
MCPH/Allegheny General Hospital Program
Allegheny General Hospital
West Virginia University Hospitals
Program Director: George J Magovern, MD
Dept of Surgery
Allegheny General Hospital
330 E North Ave
Pittsburgh, PA 15212-0866
412 368-5716
Length: 2 Year(s) Total Positions: 4
Program ID: 460-41-21-004

University Health Center of Pittsburgh Program
University Health Center of Pittsburgh
Children's Hospital of Pittsburgh
Presbyterian University Hospital/UPMC
Westmoreland Hospital
Program Director: Barley P Griffith, MD
University Health Center of Pittsburgh
Dept of Surgery
407 Scaife Hall
Pittsburgh, PA 15261
412 648-8660
Length: 2 Year(s) Total Positions: 6
Program ID: 460-41-21-005

South Carolina
Charleston
Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
Charleston Memorial Hospital
MUSC Medical Center
Veterans Affairs Medical Center (Charleston)
Program Director: Fred A Crawford Jr, MD
Medical University of South Carolina
141 Ashley Ave
Charleston, SC 29425
843 792-5807
Length: 3 Year(s) Total Positions: 3
Program ID: 460-41-24-007

Tennessee
Memphis
University of Tennessee Program
University of Tennessee College of Medicine
Baptist Memorial Hospital
Le Bonheur Children's Medical Center
Regional Medical Center at Memphis
University of Tennessee Medical Center
Veterans Affairs Medical Center (Memphis)
Program Director: Donald C Watson, MD
University of Tennessee Memphis
Div of Thoracic Surgery
958 Court Ave 6280
Memphis, TN 38163
901 448-4521
Length: 2 Year(s) Total Positions: 4
Program ID: 460-47-21-008

Nashville
Vanderbilt University Program
Vanderbilt University Medical Center
Veterans Affairs Medical Center (Nashville)
Program Director: Harvey W Bender Jr, MD
The Vanderbilt Clinic
Rm: 2986
130 3rd Ave S
Nashville, TN 37232-5704
615 322-0024
Length: 2 Year(s) Total Positions: 6
Program ID: 460-47-31-007

Texas
Dallas
University of Texas Southwestern Medical School Program
University of Texas Southwestern Medical School
Children's Medical Center of Dallas
Dallas County Hospital District-Parkland & Memorial Hospital
St. Paul Medical Center
Veterans Affairs Medical Center (Dallas)
Program Director: W Stevens Ring, MD
University of Texas Southwestern Medical School
5323 Harry Hines Blvd
Cardiothoracic Surgery
Dallas, TX 75235-8879
214 648-3500
Length: 2 Year(s) Total Positions: 6
Program ID: 460-49-21-007

Fort Sam Houston
Brooke Army Medical Center Program
Brooke Army Medical Center
Wilford Hall USAF Medical Center (SG)
Program Director: David J Cohen, MD
Brooke Army Medical Center
BSIE-SDC/666G-2286
1960 Stanley Blvd
Fort Sam Houston, TX 78234-0567
210 116-4912
Length: 2 Year(s) Total Positions: 3
Program ID: 460-41-24-004

Galveston
University of Texas Medical Branch Hospitals Program
University of Texas Medical Branch Hospitals
Program Director: Vincent R Centi, MD
University of Texas Medical Branch Hospitals
Div of Thoracic Surgery
RT F-28
Galveston, TX 77550-0528
409 762-1203
Length: 2 Year(s) Total Positions: 1
Program ID: 460-48-21-001

Houston
Baylor College of Medicine Program
Baylor College of Medicine
Harris County Hospital District-Ben Taub General Hospital
Methodist Hospital
Texas Children's Hospital
Veterans Affairs Medical Center (Houston)
Program Director: Kenneth Mattos, MD
Bayor College of Medicine
Surgery Residency
One Baylor Plaza Rm: 402D
Houston, TX 77030
713 798-6078
Length: 2 Year(s) Total Positions: 6
Program ID: 460-49-21-004

Texas Heart Institute Program
Texas Heart Institute
Hermann Hospital
St Luke's Episcopal Hospital
Texas Children's Hospital
University of Texas M D Anderson Cancer Center
Program Director: Denton A Cooley, MD
Texas Heart Institute
PO Box 20345
Houston, TX 77225-0345
713 791-4900
Length: 2 Year(s) Total Positions: 8
Program ID: 460-49-21-003

San Antonio
University of Texas Health Science Center at San Antonio Program
University of Texas Medical School at San Antonio
Audie L Murphy Memorial Veterans Hospital (San Antonio)
University Hospital South Texas Medical Center
Program Director: J Kent Trinkle, MD
University of Texas Health Science Center
Div of Cardiothoracic Surgery
7700 Floyd Curl Dr
San Antonio, TX 78284-941
210 567-9417
Length: 2 Year(s) Total Positions: 3
Program ID: 460-49-21-004

Salt Lake City
University of Utah Program
University of Utah Medical Center
LDS Hospital
Primary Children's Medical Center
Veterans Affairs Medical Center (Salt Lake City)
Program Director: S V Kasewang, MD
University of Utah Medical Center
150 N Medical Dr
Salt Lake City, UT 84132
801 581-5311
Length: 2 Year(s) Total Positions: 4
Program ID: 460-49-21-005

* Updated information not provided.
Virginia

Charlottesville

University of Virginia Program

University of Virginia Medical Center

Program Director:
Irving L. Kuo, MD

University of Virginia Hospitals

Dept of Surgery

Box 319

Charlottesville, VA 22908

804 924 2158

Length: 2 Year(s)  Total Positions: 4

Program ID: 460-51-11-006

Richmond

Medical College of Virginia/Virginia Commonwealth University Program

Medical College of Virginia/Virginia Commonwealth University

Hunter Holmes McGuire VA Medical Center (Richmond)

Medical College of Virginia Hospitals

Program Director:
Andrew D Ochsner, MD

MC/Virginia Commonwealth Univ

PO Box 880849

Richmond, VA 23288-0845

804 828-7874

Length: 2 Year(s)  Total Positions: 4

Program ID: 460-51-11-007

Washington

Seattle

University of Washington Program

University of Washington School of Medicine

Children's Hospital and Medical Center

University of Washington Medical Center

Veterans Affairs Medical Center (Seattle)

Program Director:
Edward D Verrier, MD

Div of Cardiopulmonary Surgery SA-26

University of Washington

1165 NE Pacific Ave Em A115

Seattle, WA 98109

206 616 8370

Length: 2 Year(s)  Total Positions: 4

Program ID: 460-54-21-408

West Virginia

Morgantown

West Virginia University Program

West Virginia University Hospitals

Monongalia General Hospital

Program Director:
Gordon F. Murray, MD

Dept of Surgery

PO Box 9228 HSCN

West Virginia University

Morgantown, WV 26506

304 293-8869

Length: 2 Year(s)  Total Positions: 1

Program ID: 460-55-11-099

Wisconsin

Madison

University of Wisconsin Program

University of Wisconsin Hospital and Clinics

St Mary's Hospital Medical Center

William S Middleton Veterans Hospital

Program Director:
Robert M Memter Jr, MD

University of Wisconsin Hospital and Clinics

Div of Cardiothoracic Surgery

600 Highland Ave ESC H4/368

Madison, WI 53792-3236

608 263-6389

Length: 2 Year(s)  Total Positions: 4

Program ID: 460-56-21-100

Milwaukee

Medical College of Wisconsin Program

Medical College of Wisconsin Affiliated Hospitals Inc

Children's Hospital of Wisconsin

Clement J Zablocki Veterans Affairs Medical Center

John H Dunn Hospital

Program Director:
Gordon N Olinger, MD

Medical College of Wisconsin Milwaukee Regional Med Ctr

8700 W Wisconsin Ave

Milwaukee, WI 53226

414 357-5545

Length: 2 Year(s)  Total Positions: 4

Program ID: 460-56-21-101

Transitional Year

Alabama

Birmingham

Birmingham Baptist Medical Centers Program

Birmingham Baptist Medical Centers Inc.

Birmingham Baptist Medical Center-Montclair

Birmingham Baptist Medical Center-Princeton

Program Director:
Robert A Kurnitz, MD

Baptist Medical Center-Montclair

840 Montclair Hl

Birmingham, AL 35213

205 992-1591

Length: 1 Year(s)  Total Positions: 14  (GY: 14)

Sponsoring Spec: DR,OS,IM

Program ID: 999-01-00-001

Carraway Methodist Medical Center Program

Carraway Methodist Medical Center

Program Director:
E David Haigler Jr, MD

Carraway Methodist Medical Center

1900 Carraway Blvd

Birmingham, AL 35234

205 222-6358

Length: 1 Year(s)  Total Positions: 6  (GY: 6)

Sponsoring Spec: FP,IM,OBG

Program ID: 999-01-00-002

Arizona

Phoenix

Good Samaritan Regional Medical Center Program

Good Samaritan Regional Medical Center

Carl T Hayden Veterans Affairs Medical Center (Phoenix)

Program Director:
Patrick S Fasulka, MD

Good Samaritan Regional Medical Center

Dept of Med Ed

1111 E McDowell Rd PO Box 2174

Phoenix, AZ 85002-2174

602 239-4383

Length: 1 Year(s)  Total Positions: 6  (GY: 6)

Sponsoring Spec: IM,OBG,FP,PD

Program ID: 999-08-00-404

Maricopa Medical Center Program

Maricopa Medical Center

Program Director:
Paul A Blackburn, DO

Maricopa Medical Center

2611 E Roosevelt

Phoenix, AZ 85006

602 267-5808

Length: 1 Year(s)  Total Positions: 8  (GY: 8)

Sponsoring Spec: IM,OBG,PD

Program ID: 999-03-00-005

* Updated information not provided.
Tucson

Tucson Hospitals Medical Education Program
Tucson Hospitals Medical Education Program Inc
Kino Community Hospital
Tucson Medical Center
Program Director:
Eric G Ramsay, MD
Tucson Hospitals Medical Education Program
PO Box 42146
5301 E Grant Rd
Tucson, AZ 85726
928-299-5666
Length: 1 Year(s) Total Positions: 12 (GYI: 12)
Sponsoring Spec: GS,IM
Program ID: 999-06-00-006

Arkansas

Little Rock

University of Arkansas for Medical Sciences Program
University of Arkansas for Medical Sciences
Arkansas Children's Hospital
Baptist Medical Center
John L McClellan Memorial Veterans Hospital
St Vincent Infortmative Medical Center
Program Director:
Susan S Beland, MD
University of Arkansas for Medical Sciences
4301 W Markham
 Slot 692
Little Rock, AR 72205-7109
501-686-5738
Length: 1 Year(s) Total Positions: 29 (GYI: 29)
Sponsoring Spec: AN,IM,0BS
Program ID: 999-06-00-007

California

Bakersfield

Kern Medical Center Program
Kern Medical Center
Program Director:
Jennifer J Abrahams, MD
Kern Medical Center
1830 Flower St
Bakersfield, CA 93305
256-526-2300
Length: 1 Year(s) Total Positions: 11 (GYI: 11)
Sponsoring Spec: GS,IM,OBG
Program ID: 999-06-00-222

Fresno

University of California (San Francisco)Fresno Program
UCSF-Fresno Medical Education Program
Valley Medical Center of Fresno
Program Director:
Linda L Kuntzastahi, MD
Valley Medical Center of Fresno
445 E Cedar Ave
Fresno, CA 93702
209-453-6005
Length: 1 Year(s) Total Positions: 11 (GYI: 11)
Sponsoring Spec: EM,IM,OBG,PD
Program ID: 999-06-00-149

Oakland

Highland General Hospital Program
Highland General Hospital
Program Director:
Steven Sacerbit, MD
Highland General Hospital
Depts of Medicine
1411 E 51st Ave
Oakland, CA 94609
510-435-4260
Length: 1 Year(s) Total Positions: 11 (GYI: 11)
Sponsoring Spec: EM,GS,IM
Program ID: 999-06-00-185

Naval Hospital (Oakland) Program
Naval Hospital (Oakland)
Program Director:
David B Moyer, MD
Naval Hospital
8700 Mountain Blvd
Oakland, CA 94627-5000
415-633-8049
Length: 1 Year(s) Total Positions: 6 (GYI: 6)
Sponsoring Spec: OB
Program ID: 999-06-00-196

San Bernardino

San Bernardino County Medical Center Program
San Bernardino County Medical Center
Program Director:
Elizabeth Richards, MD
San Bernardino County Medical Center
780 E Gilbert St
San Bernardino, CA 92415-0005
909-387-7202
Length: 1 Year(s) Total Positions: 18 (GYI: 18)
Sponsoring Spec: PG,OB
Program ID: 999-06-00-009

San Diego

Mercy Hospital and Medical Center Program
Mercy Hospital and Medical Center
Program Director:
Edwin H Heffernan, MD
Mercy Hosp and Med Ctr
Depts of Med Edu
4077 5th Ave
San Diego, CA 92103-2180
619-290-7200
Length: 1 Year(s) Total Positions: 18 (GYI: 18)
Sponsoring Spec: EM,PD
Program ID: 999-06-00-010

Naval Medical Center (San Diego) Program
Naval Medical Center (San Diego)
Program Director:
Laura M Clapper, MC, USN
Naval Medical Center
3800 Bob Wilson Dr
San Diego, CA 92134-6000
619-612-6988
Length: 1 Year(s) Total Positions: 11 (GYI: 11)
Sponsoring Spec: GS,IM
Program ID: 999-06-00-151

San Jose

Santa Clara Valley Medical Center Program
Santa Clara Valley Medical Center
Program Director:
Steven S Guest, MD
Santa Clara Valley Medical Center
Depts of Medicine
125 S Bascom Ave
San Jose, CA 95128
408-886-6806
Length: 1 Year(s) Total Positions: 16 (GYI: 16)
Sponsoring Spec: DLM,PD
Program ID: 999-06-00-013

Stockton

San Joaquin General Hospital Program
San Joaquin General Hospital
Program Director:
Sheila Knapo, MD
San Joaquin General Hospital
PC Box 1020
Stockton, CA 95201
209-468-6611
Length: 1 Year(s) Total Positions: 4 (GYI: 4)
Sponsoring Spec: PG,GS,IM
Program ID: 999-06-00-014

Torrance

Los Angeles County-Harbor-UCLA Medical Center Program
Los Angeles County-Harbor-UCLA Medical Center
Program Director:
Jerrol A Turner, MD
Los Angeles County-Harbor-UCLA Med Ctr
1000 W Carson St
Box 2
Torrance, CA 90509
310-222-2903
Length: 1 Year(s) Total Positions: 20 (GYI: 20)
Sponsoring Spec: EM,GS,IM,OB,PD
Program ID: 999-06-00-016

Travis AFB

David Grant USAF Medical Center Program
David Grant Medical Center
Program Director:
Capt Terry D Atwood, MD
56th Medical Group/SGH
201 Rodin Circle
Travis AFB, CA 94555-1800
707-433-3034
Length: 1 Year(s) Total Positions: 4 (GYI: 4)
Sponsoring Spec: GS,IM,OB,PD
Program ID: 999-06-00-008

Colorado

Aurora

Fitzsimons Army Medical Center Program
Fitzsimons Army Medical Center
Program Director:
Sharon L Hamsburg, MD
Fitzsimons Army Medical Center
Attn: HSHG-ZBA-E
Aurora, CO 80045-6000
303-246-4845
Length: 1 Year(s) Total Positions: 10 (GYI: 10)
Sponsoring Spec: GS,IM
Program ID: 999-07-00-016

* Updated information not provided.
District of Columbia

Washington

Georgetown University Program
Georgetown University School of Medicine
Fairfax Hospital
Program Director:
James N Cooper, MD
Dept of Medicine
Fairfax Hospital
2300 Gallows Rd
Falls Church, VA 22046
703-688-3582
Length: 1 Year(s) Total Positions: 8 (GYI: 8)
Sponsoring Spec: IM,PD,TV
Program ID: 999-01-00-205

Howard University (DC General) Program
District of Columbia General Hospital
Program Director:
W Goins, MD
District of Columbia General Hospital Program
16th & Massachusetts Ave SE
Rm 3218
Washington, DC 20033
202-676-7356
Length: 1 Year(s) Total Positions: 11 (GYI: 11)
Sponsoring Spec: GS,IM,OBG,PD
Program ID: 999-10-00-186

Howard University Hospital Program
Howard University Hospital
Program Director:
Adrian O Hosten, MD
Howard University Hospital
2041 Georgia Ave NW
Washington, DC 20050
202-865-6020
Length: 1 Year(s) Total Positions: 17 (GYI: 17)
Sponsoring Spec: GS,IM
Program ID: 999-10-00-032

Walter Reed Army Medical Center Program
Walter Reed Army Medical Center
Program Director:
Christine T Scott, MD
Walter Reed Army Medical Center
Med Educ Office
Washington, DC 20307-5001
202-782-6905
Length: 1 Year(s) Total Positions: 17 (GYI: 17)
Sponsoring Spec: GS,IM,OBG,PD
Program ID: 999-10-00-024

Georgia

Atlanta

Emory University Program
Emory University School of Medicine
Emory University Hospital
Grady Memorial Hospital
Henrietta Egleston Hospital for Children
Program Director:
H Kenneth Walker, MD
Emory University
Dept of Medicine
60 Butler St SE
Atlanta, GA 30303
404-616-3528
Length: 1 Year(s) Total Positions: 18 (GYI: 18)
Sponsoring Spec: IM,PD
Program ID: 999-12-00-026

Georgia Baptist Medical Center Program
Georgia Baptist Medical Center
Program Director:
David L Anders, MD
Georgia Baptist Medical Center
MedEduc Box 423
303 Paviot-Dr NE
Atlanta, GA 30312
404-265-4627
Length: 1 Year(s) Total Positions: 9 (GYI: 9)
Sponsoring Spec: GS,IM,OBG
Program ID: 999-12-00-027

Augusta

Medical College of Georgia Program
Medical College of Georgia Hospital and Clinics
Veterans Affairs Medical Center (Augusta)
Program Director:
Chesley L Richards Jr, MD
Medical College of Georgia
Dept of Medicine
BW 540
Augusta, GA 30912
706-721-3423
Length: 1 Year(s) Total Positions: 4 (GYI: 4)
Sponsoring Spec: AN,DR,GS,IM,OBG,OPH,ORS,OTO,PD,PS
Program ID: 999-12-00-028

Columbus

The Medical Center Program
The Medical Center Inc
Program Director:
K Clark Gillette Jr, MD
The Medical Center Inc
710 Center St Box 100
Columbus, GA 31902-2294
706-571-4390
Length: 1 Year(s) Total Positions: 4 (GYI: 4)
Sponsoring Spec: PF/OS
Program ID: 999-12-00-229

Fort Gordon

Dwight David Eisenhower Army Medical Center Program
Dwight David Eisenhower Army Medical Center
Program Director:
Laura M Pink, MD
Dwight David Eisenhower Army Medical Center
Transitional Year Prgm
Office of GME
Fort Gordon, GA 30905-5050
706-791-6523
Length: 1 Year(s) Total Positions: 12 (GYI: 12)
Sponsoring Spec: GS,IM,OBG
Program ID: 999-12-00-029

Macon

Mercer University School of Medicine Program
Medical Center of Central Georgia
Program Director:
T W Treadwell Jr, MD
Medical Center of Central Georgia
3599 Eisenhower Pkwy
Macon, GA 31206-3608
912-745-3588
Length: 1 Year(s) Total Positions: 4 (GYI: 4)
Sponsoring Spec: FG,GS,IM,OBG
Program ID: 999-12-00-233

* Updated information not provided.
Hawaii

Honolulu

University of Hawaii Program
University of Hawaii John A Burns School of Medicine
Kaiser Foundation Hospital (Moanalua)
Kapiolani Medical Center for Women and Children
Kaul定点 Medical Center
Queen’s Medical Center
St Francis Medical Center
Straub Clinic and Hospital

Program Director:
Max G Botticelli, MD
Univ of Hawaii Integrated Transitional Program
University Tower 7th Fl
1356 Lusitania St
Honolulu, HI 96813-2427
808 684-7477

Length: 1 Year(s)
Total Positions: 14 (GYI: 14)
Sponsoring Spec: GS,IM,OBG,PD
Program ID: 999-14-00-031

Cook County Hospital Program*

Cook County Hospital
Program Director:
Myrla Sullivan, MD
Cook County Hospital
720 S Wolcott St
Chicago, IL 60612
312 633-3180

Length: 1 Year(s)
Total Positions: 12 (GYI: 12)
Sponsoring Spec: AN,DR,EM,GS,IM,OBG,PD
Program ID: 999-16-00-174

Illinois Masonic Medical Center Program

Illinois Masonic Medical Center
Program Director:
Frank J Knicik, MD
Transition Year Pgm Med Edc Dept
Illinois Masonic Medical Center
650 Wellington Ave
Chicago, IL 60661-5103
312 296-2389

Length: 1 Year(s)
Total Positions: 6 (GYI: 6)
Sponsoring Spec: AN,DR,EM,GS,IM,OBG,PD
Program ID: 999-16-00-034

Louis A Weiss Memorial Hospital Program

Louis A Weiss Memorial Hospital
Program Director:
Daniel W Berland, MD
Louis A Weiss Memorial Hospital
4646 N Marine Dr
Chicago, IL 60640-9966
312 878-8700

Length: 1 Year(s)
Total Positions: 8 (GYI: 8)
Sponsoring Spec: GS
Program ID: 999-16-00-035

McGaw Medical Center of Northwestern University (Evaston) Program

Northwestern University Medical School
Evaston Hospital
Program Director:
C Laurence Etheridge, MD
Evaston Hospital
2650 Ridge Ave
Evaston, IL 60201-1781
708 879-3510

Length: 1 Year(s)
Total Positions: 8 (GYI: 8)
Sponsoring Spec: AN,IM,N
Program ID: 999-16-00-037

Ravenswood Hospital Medical Center Program

Ravenswood Hospital Medical Center
Program Director:
Norbert Nadel, MD
Ravenswood Hospital Medical Center
4550 N Winchester Ave
Chicago, IL 60650-5205
312 975-4300

Length: 1 Year(s)
Total Positions: 9 (GYI: 9)
Sponsoring Spec: PP,IM,OBG
Program ID: 999-16-00-163

Resurrection Medical Center Program

Resurrection Medical Center
Loyola University of Chicago Stritch School of Medicine
Program Director:
Joseph L Daddio, MD
Resurrection Medical Center
Med Edc Office
7435 W Talbot Ave
Chicago, IL 60631
312 792-5144

Length: 1 Year(s)
Total Positions: 6 (GYI: 6)
Sponsoring Spec: FF
Program ID: 999-16-00-207

TRIPPER AMC

Tripler Army Medical Center Program

Tripler Army Medical Center
Program Director:
Alfred B Brooks, MD
Tripler Army Medical Center
Dept of the Army
Honolulu, HI 96850
808 433-5923

Length: 1 Year(s)
Total Positions: 20 (GYI: 20)
Sponsoring Spec: GS,IM,OBG,PD
Program ID: 999-14-00-030

Illinois

Berwyn

MacNeal Memorial Hospital Program
MacNeal Memorial Hospital
Program Director:
John L Skowry, MD
MacNeal Memorial Hospital
3210 S Oak Park Ave
Berwyn, IL 60402
708 798-3400

Length: 1 Year(s)
Total Positions: 13 (GYI: 13)
Sponsoring Spec: PP,IM,OBG
Program ID: 999-16-00-042

Chicago

Columbus Hospital Program
Columbus Hospital
Program Director:
John P Quinn, MD
Columbus Hospital
2200 N Lakeview Ave
Chicago, IL 60614
312 833-6784

Length: 1 Year(s)
Total Positions: 6 (GYI: 6)
Sponsoring Spec: GS,IM
Program ID: 999-16-00-033

Evanston

St Francis Hospital of Evanston Program
St Francis Hospital of Evanston
Program Director:
Marko Jachtorowycz, MD
St Francis Hospital of Evanston
365 Ridge Ave
Evanston, IL 60202-3299
708 482-6227

Length: 1 Year(s)
Total Positions: 10 (GYI: 10)
Sponsoring Spec: DR,IM
Program ID: 999-16-00-038

North Chicago

Finch University of Health Sciences/Chicago Medical School Program

Finch University of Health Sciences/Chicago Medical School
Swedish Covenant Hospital
Program Director:
Michael J Planketi, MD
Swedish Covenant Hospital
5135 N California ave
Chicago, IL 60625
312 899-3808

Length: 1 Year(s)
Total Positions: 6 (GYI: 6)
Sponsoring Spec: PP,IM
Program ID: 999-16-00-291

Oak Park

West Suburban Hospital Medical Center Program

West Suburban Hospital Medical Center
Program Director:
Malcolm A Dean, MD
West Suburban Hospital Medical Center
Dept of Medicine Ran L 600
Erie at Austin
Oak Park, IL 60302
708 335-6300

Length: 1 Year(s)
Total Positions: 6 (GYI: 6)
Sponsoring Spec: PP,IM
Program ID: 999-16-00-154

Scott AFB

USAF Medical Center (Scott) Program*

USAF Medical Center (Scott)
Program Director:
Major Kelly H Woodward, MD
USAF Medical Center
Scott/SGIM
Scott AFB, IL 62225
618 256-7531

Length: 1 Year(s)
Sponsoring Spec: PP,OBG,PD
Program ID: 999-16-00-155

* Updated information not provided.
Indiana

Fort Wayne

Fort Wayne Medical Education Program
Fort Wayne Medical Education Program
Lutheran Hospital of Indiana
Parkview Memorial Hospital
St Joseph's Medical Center

Program Director:
Brenda S Stiles, MD
Fort Wayne Medical Education Program
2448 Lake Ave
Fort Wayne, IN 46805
219-422-8573

Length: 1 Year(s) Total Positions: 2 (GYI: 2)
Sponsoring Spec: FP/OB
Program ID: 999-17-02-515

Indianapolis

Indiana University Medical Center Program
Indiana University Medical Center
Community Hospitals of Indianapolis
Richard L Roudebush Veterans Affairs Medical Center
William N Whizard Memorial Hospital

Program Director:
Glenn J Bingle, MD
Community Hospitals of Indianapolis
1500 N Ritter
Indianapolis, IN 46219
317-275-5561

Length: 1 Year(s) Total Positions: 2 (GYI: 2)
Sponsoring Spec: IM
Program ID: 999-17-00-317

Methodist Hospital of Indiana Program
Methodist Hospital of Indiana
Program Director:
Stephen J Jao, MD
Methodist Hospital of Indiana
1-55 at 21st St
PO Box 1397
Indianapolis, IN 46206-1397
317-923-8295

Length: 1 Year(s) Total Positions: 8 (GYI: 8)
Sponsoring Spec: EM/FP/IM/Ob/Gynec/Ped
Program ID: 999-17-00-040

St Vincent Hospital and Health Care Center Program*
St Vincent Hospital and Health Care Center
Program Director:
Robert D Robinson, MD
St Vincent Hospital and Health Services
2001 W 86th St
Indianapolis, IN 46260
317-338-2172

Length: 1 Year(s) Total Positions: 12 (GYI: 12)
Sponsoring Spec: FP/IM/Ob/Gynec/Ped
Program ID: 999-17-00-044

Iowa

Des Moines

Broadlawns Medical Center Program
Broadlawns Medical Center
Iowa Methodist Medical Center

Program Director:
Dennis J Walter, MD
Broadlawns Medical Center
1801 Hickman Rd
Des Moines, IA 50314
515-272-2203

Length: 1 Year(s) Total Positions: 4 (GYI: 4)
Sponsoring Spec: FP/OB/Ob/Gynec/Ped
Program ID: 999-18-00-043

Iowa Methodist Medical Center Program
Iowa Methodist Medical Center
Veterans Affairs Medical Center (Des Moines)

Program Director:
Douglas B Drohan, MD
Iowa Methodist Medical Center
1200 Pleasant St
Des Moines, IA 50309-8976
515-241-6200

Length: 1 Year(s) Total Positions: 4 (GYI: 4)
Sponsoring Spec: GS/IM/Ped
Program ID: 999-18-00-220

Louisiana

New Orleans

Louisiana State University Program
Louisiana State University School of Medicine
Medical Center of Louisiana at New Orleans-LSU Division

Program Director:
Charles W Hutton, MD
LSU School of Medicine
1542 Tulane Ave
New Orleans, LA 70112-2822
504-588-4670

Length: 1 Year(s) Total Positions: 8 (GYI: 8)
Sponsoring Spec: IM/Ped
Program ID: 999-21-00-046

Tulane University Program
Tulane University School of Medicine
Children's Hospital
Medical Center of Louisiana at New Orleans-Tulane Division
Tulane University Hospital and Clinics
Veterans Affairs Medical Center-Tulane Service (New Orleans)

Program Director:
Irwin Cohen, MD
Tulane Medical School
Transitional Prgm (SL-14)
1430 Tulane Ave
New Orleans, LA 70112-2822
504-588-5271

Length: 1 Year(s) Total Positions: 18 (GYI: 18)
Sponsoring Spec: IM/Ped
Program ID: 999-21-00-047

Muncie

Ball Memorial Hospital Program
Ball Memorial Hospital
Program Director:
Geordi T Costello, MD
Ball Memorial Hospital
2401 University Ave
Muncie, IN 47306
317-741-1095

Length: 1 Year(s) Total Positions: 8 (GYI: 8)
Sponsoring Spec: IM/Ped
Program ID: 999-17-00-157

Shreveport

Louisiana State University-Shreveport (LSUS) Program
Louisiana State University Medical Center-Shreveport
G A Conway Medical Center
Overton Brooks Veterans Affairs Medical Center

Program Director:
Kevin M Stitt, MD
Louisiana State University Medical Center
1501 Kings Hwy
PO Box 33932
Shreveport, LA 71130-3322
318-675-5389

Length: 1 Year(s) Total Positions: 12 (GYI: 12)
Sponsoring Spec: GS/IM/Ped
Program ID: 999-21-00-048

Maryland

Andrews AFB

Malcolm Grow USAF Medical Center Program
89th Medical Group
National Naval Medical Center (Bethesda)

Program Director:
Lie Col Jose J Gutierrez-Nunez, MD
89th Medical Group
(SGE)

Andrews AFB, MD 20531-6000
301-861-5552

Length: 1 Year(s) (GYI: 1)
Sponsoring Spec: FP/OB
Program ID: 999-23-00-023

Baltimore

Harbor Hospital Center Program
Harbor Hospital Center

Program Director:
Richard B Williams, MD
Harbor Hospital Center
3001 S Hanover St
Baltimore, MD 21225-1290
301-273-3015

Length: 1 Year(s) Total Positions: 3 (GYI: 3)
Sponsoring Spec: IM/OB
Program ID: 999-23-00-050

Maryland General Hospital Program
Maryland General Hospital
Program Director:
William C Anthony, MD
Maryland General Hospital
627 Linden Ave Ste 3B
Baltimore, MD 21201
410-228-8780

Length: 1 Year(s) Total Positions: 18 (GYI: 18)
Sponsoring Spec: IM/OB
Program ID: 999-23-00-049

Bethesda

National Naval Medical Center (Bethesda) Program*
National Naval Medical Center (Bethesda)

Program Director:
Capt Donna B Perry, MD
Naval Hospital
Bethesda, MD 20889-5011
301-295-2427

Length: 1 Year(s)
Sponsoring Spec: GS/IM/Ped
Program ID: 999-23-00-011

* Updated information not provided.
Massachusetts

Boston

Carney Hospital/Boston University Program

Carney Hospital

Program Director:
Richard A. Geckman, MD
Carney Hospital

1100 Decker Ave
Boston, MA 02124-6666

617 398-8900

Length: 1 Year(s)  Total Positions: 7  (GY: 7)
Sponsoring Spec: IM, OBS
Program ID: 999-24-00-159

Lemuel Shattuck Hospital Program

Lemuel Shattuck Hospital

Program Director:
Harry Skaggs, MD

Lemuel Shattuck Hospital

170 Morton St
Jamaica Plain, MA 02130-3882

617 522-8110

Length: 1 Year(s)  Total Positions: 7  (GY: 7)
Sponsoring Spec: IM, P
Program ID: 999-24-00-199

Brockton

Brockton Hospital/Boston University Program

Brockton Hospital

Program Director:
Burton J. Polakosky, MD
Brockton Hospital

680 Centre St
Brockton, MA 02402-3086

508 941-7521

Length: 1 Year(s)  Total Positions: 7  (GY: 7)
Sponsoring Spec: IM, IM
Program ID: 999-24-00-158

Cambridge

Cambridge Hospital Program

Cambridge Hospital

Program Director:
Ira L. Mindlin, MD
Cambridge Hospital

1400 Cambridge St
Cambridge, MA 02138

617 495-1024

Length: 1 Year(s)  Total Positions: 12  (GY: 12)
Sponsoring Spec: IM, OB, FP, P
Program ID: 999-24-00-054

Framingham

MetroWest Medical Center/Boston University Program*

MetroWest Medical Center

Program Director:
Steven C. Simon, MD
Dept of Med Educ
MMHC-MetroWest Union Campus
115 Lincoln St
Framingham, MA 01701

668 383-1565

Length: 2 Year(s)  Total Positions: 16  (GY: 16)
Sponsoring Spec: GS, IM, OBS, FP
Program ID: 999-24-00-160

Malden

Malden Hospital/Boston University Program

Malden Hospital

Beverly Hospital

Boston University Medical Center/University Hospital

Program Director:
Lann R. Castle, MD
Malden Hospital

100 Hospital Rd
Malden, MA 02148-6501

617 397-6590

Length: 1 Year(s)  Total Positions: 7  (GY: 7)
Sponsoring Spec: FM, IM
Program ID: 999-24-00-161

Michigan

Ann Arbor

St. Joseph Mercy Hospital Program

St. Joseph Mercy Hospital (Catherine McAuley Health Systems)

Program Director:
Jack H. Carman, MD
St. Joseph Mercy Hospital

PO Box 965
Ann Arbor, MI 48106

734 777-5615

Length: 1 Year(s)  Total Positions: 10  (GY: 10)
Sponsoring Spec: IM, OB
Program ID: 999-25-00-056

Dearborn

Oakwood Hospital Program

Oakwood Hospital

Program Director:
Leo D. D'Vittoria, MD
Oakwood Hospital

1801 Oakwood Blvd PO Box 3560
Dearborn, MI 48123-2500

313 963-8480

Length: 1 Year(s)  Total Positions: 14  (GY: 14)
Sponsoring Spec: FM, IM
Program ID: 999-25-00-057

Detroit

Henry Ford Hospital Program

Henry Ford Hospital

Program Director:
David C. Lease, MD
Henry Ford Hospital

2790 W Grand Blvd
Detroit, MI 48202

313 876-7431

Length: 1 Year(s)  Total Positions: 20  (GY: 20)
Sponsoring Spec: D, MS, EM, GS, IM, OB, OB, OP, OP, PP, FP, FT, FY
Program ID: 999-25-00-058

St. John Hospital and Medical Center Program

St. John Hospital and Medical Center

Program Director:
John H. Burrows, MD
St. John Hospital and Medical Center

22101 Michigan Rd
Detroit, MI 48228

313 343-3875

Length: 1 Year(s)  Total Positions: 8  (GY: 8)
Sponsoring Spec: GS, IM
Program ID: 999-25-00-059

Wayne State University/Detroit Medical Center Program

Wayne State University School of Medicine

Program Director:
Kenneth I. Bergman, MD

Grace Hospital

6711 W Outer Dr
Detroit, MI 48235

313 866-5361

Length: 1 Year(s)  Total Positions: 12  (GY: 12)
Sponsoring Spec: EM, GS, IM
Program ID: 999-25-00-060

Flint

Hurley Medical Center/Michigan State University Program

Hurley Medical Center

Program Director:
Willy P. Mueller, MD
Hurley Medical Center

Ops Hurley Plaza
Flint, MI 48505-5883

810 750-9131

Length: 1 Year(s)  Total Positions: 10  (GY: 10)
Sponsoring Spec: IM, PD
Program ID: 999-25-00-062

Grand Rapids

Blodgett Memorial Medical Center Program

Blodgett Memorial Medical Center

Program Director:
Robert L. Tupper, MD
Blodgett Memorial Medical Center

1846 Wealthy St SE
Grand Rapids, MI 49506

616 774-7703

Length: 1 Year(s)  Total Positions: 8  (GY: 8)
Sponsoring Spec: GS, IM
Program ID: 999-25-00-063

Butterworth Hospital Program

Butterworth Hospital

Program Director:
Elizabeth A. Kozak, MD
Butterworth Hospital

100 Michigan SE
MC 41
Grand Rapids, MI 49503

616 778-1928

Length: 1 Year(s)  Total Positions: 6  (GY: 6)
Sponsoring Spec: EM, GS, IM, OB, OP, PF
Program ID: 999-25-00-190

St. Mary's Health Services Program

St. Mary's Health Services

Program Director:
Bruce H. Baker, MD
St. Mary's Hospital

200 Jefferson Ave SE
Grand Rapids, MI 49503

616 774-6045

Length: 1 Year(s)  Total Positions: 6  (GY: 6)
Sponsoring Spec: GS, IM
Program ID: 999-25-00-064

* Updated information not provided.

Graduate Medical Education Directory
Kalamazoo
Kalamazoo Center for Medical Studies/Michigan State University Program
Kalamazoo Center for Medical Studies
Bergen Medical Center
Bronson Methodist Hospital
Program Director:
Marlyn M.Terranova, MD
Michigan St Univ Kalamazoo for Med Studies
1000 Oakland Dr
Kalamazoo, MI 49008
616 337-6353
Length: 1 Year(s) Total Positions: 8 (GYI: 8)
Sponsoring Spec: FPIM
Program ID: 999-25-00-065

Lansing
Sparrow Hospital/Michigan State University Program*
Sparrow Hospital
Program Director:
Ralph E Watson, MD
Sparrow Hospital
Med Educ.
1215 E Michigan Ave
Lansing, MI 48911
517 487-3581
Length: 1 Year(s) Total Positions: 6 (GYI: 6)
Sponsoring Spec: EM,FPIM,OBG,FDP
Program ID: 999-25-00-066

Pontiac
St Joseph Mercy Hospital Program
St Joseph Mercy Community HealthCare System
Program Director:
Annamaria Church, MD
St Joseph Mercy Hospital
300 W Ingham Rd
Pontiac, MI 48306-2085
313 888-3230
Length: 1 Year(s) Total Positions: 4 (GYI: 4)
Sponsoring Spec: GSJIM
Program ID: 999-25-00-067

Royal Oak
William Beaumont Hospital Program
William Beaumont Hospital - Troy
Program Director:
Steven C. Winters, MD
William Beaumont Hospital
3601 W 13 Mile Rd
Royal Oak, MI 48073
810 551-0431
Length: 1 Year(s) Total Positions: 16 (GYI: 16)
Sponsoring Spec: EM,IM
Program ID: 999-25-00-178

Southfield
Providence Hospital Program
Providence Hospital
Program Director:
Jeffrey M. Zaks, MD
Providence Hospital
16001 W Nine Mile Rd PO Box 2043
Southfield, MI 48077
810 424-3161
Length: 1 Year(s) Total Positions: 4 (GYI: 4)
Sponsoring Spec: AN,DR,GSJIM,OBG,EPD
Program ID: 999-25-00-068

Minnesota

Minneapolis
Hennepin County Medical Center Program
Hennepin County Medical Center
Program Director:
Michael B. Belzer, MD
Hennepin County Medical Center
Med Admin 4697A
701 Park Ave S
Minneapolis, MN 55445-1625
612 347-2307
Length: 1 Year(s) Total Positions: 10 (GYI: 10)
Sponsoring Spec: EM,GSJIM,OBG,EPD
Program ID: 999-25-00-069

Rochester
Mayo Graduate School of Medicine (Jacksonville) Program
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Jacksonville)
St Luke's Hospital
Program Director:
Gary M Lee, MD
Mayo Clinic (Jacksonville)
4600 San Pablo Rd
Educ Serv Roger Main Sldg
Jacksonville, FL 32254
904 296-3266
Length: 1 Year(s) Total Positions: 6 (GYI: 6)
Sponsoring Spec: NJIM
Program ID: 999-1100-238

Mayo Graduate School of Medicine (Scottsdale) Program
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Scottsdale)
Scottsdale Memorial Hospital North
Program Director:
Paul L. Seitzler, MD
Mayo Clinic Scottsdale
13400 E Shea Blvd
Med Educ Office
Scottsdale, AZ 85259
480 305-7058
Length: 1 Year(s) Total Positions: 6 (GYI: 6)
Sponsoring Spec: OTO
Program ID: 999-03-00-225

Missouri

St Louis
Deaconess Hospital Program
Deaconess Hospital
Program Director:
M.R. Hill, MD
Deaconess Hospital
4156 Oakland Ave
St Louis, MO 63109-3297
314 768-3006
Length: 1 Year(s) Total Positions: 12 (GYI: 12)
Sponsoring Spec: FPIM,PHT
Program ID: 999-28-00-179

South John's Mercy Medical Center Program
South John's Mercy Medical Center
Program Director:
Christopher Verenasakis, MD
South John's Mercy Medical Center
Graduate Med Educ.
615 S New Ballas Rd
St Louis, MO 63141-3777
314 569-6600
Length: 1 Year(s) Total Positions: 10 (GYI: 10)
Sponsoring Spec: SM,OBG,PHT
Program ID: 999-35-00-071

New Jersey

Hackensack
Hackensack Medical Center Program
Hackensack Medical Center
Program Director:
William C. Black, MD
Hackensack Medical Center
Office of Med Educ.
30 Prospect Ave
Hackensack, NJ 07601
201 996-2116
Length: 1 Year(s) Total Positions: 5 (GYI: 5)
Sponsoring Spec: DB
Program ID: 999-33-00-072

Livingston
St Barnabas Medical Center Program
St Barnabas Medical Center
Program Director:
Arthur Maron, MD
St Barnabas Medical Center
Old Short Hills Rd
Livingston, NJ 07039
973 933-5777
Length: 1 Year(s) Total Positions: 12 (GYI: 12)
Sponsoring Spec: GSJIM,OBG
Program ID: 999-33-00-073

Neptune
Jersey Shore Medical Center Program
Jersey Shore Medical Center
Program Director:
Anthony P. Despino, MD
Jersey Shore Medical Center
1945 Rt 33
Neptune, NJ 07754
908 776-4179
Length: 1 Year(s) Total Positions: 6 (GYI: 6)
Sponsoring Spec: IM,PD
Program ID: 999-33-00-074

South Orange
Seton Hall University School of Graduate Medical Education (Newark) Program
Seton Hall University School of Graduate Medical Education
St Michael's Medical Center (Cathedral Health Services Inc)
Holy Name Hospital
Program Director:
John W. Semenovski, MD
Seton Hall University School of Graduate Medical Education
Saint Michael's Medical Center
282 King Blvd
Newark, NJ 07102
201 877-5487
Length: 1 Year(s) Total Positions: 10 (GYI: 10)
Sponsoring Spec: GSJIM,OBG
Program ID: 999-33-00-075

* Updated information not provided.
Accredited Programs in Transitional Year

Summit
Overlook Hospital Program
Overlook Hospital
Program Director:
Douglas Ratner, MD
Overlook Hospital
90 Beavoir Ave at Sylvan Rd
PO Box 220
Summit, NJ 07902-0500
908 522-0561
Length: 1 Year(s) Total Positions: 15 (GY: 15)
Sponsoring Spec: IM,PD
Program ID: 999-33-00477

New York
Binghamton
Wilson Memorial Regional Medical Center (United Health Services) Program
Wilson Memorial Regional Medical Center (United Health Servs)
Program Director:
Elmer J Zinner, MD
United Health Services Hospitals
Med Edc Dept
3357 Harriion St
Johnson City, NY 13790
607 724-0635
Length: 1 Year(s) Total Positions: 7 (GY: 7)
Sponsoring Spec: FP,IM
Program ID: 999-35-00-091

Brooklyn
Maimonides Medical Center Program
Maimonides Medical Center
Program Director:
Joseph N Cunningham, MD
Maimonides Medical Center
4822 Tenth Ave
Brooklyn, NY 11219
718 283-7067
Length: 1 Year(s) Total Positions: 15 (GY: 15)
Sponsoring Spec: AN,GS,IM
Program ID: 999-35-00-204

Cooperstown
Mary Imogene Bassett Hospital Program
BASSETT HEALTHCARE
Program Director:
Joseph M Hoffman, MD
Dept of Med Edc
The Mary Imogene Bassett Hosp
One Atwell Rd
Cooperstown, NY 13326-1084
607 562-4566
Length: 1 Year(s) Total Positions: 6 (GY: 6)
Sponsoring Spec: GS,IM
Program ID: 999-35-00-088

Flushing
Flushing Hospital Medical Center Program
Flushing Hospital Medical Center
Program Director:
Robert Golub, MD
Flushing Hospital and Medical Center
6500 Parsons Blvd
Flushing, NY 11354
718 670-3136
Length: 1 Year(s) Total Positions: 10 (GY: 10)
Sponsoring Spec: GS,IM,OBG
Program ID: 999-35-00-198

* Updated information not provided.

New York Hospital Medical Center of Queens Program*
New York Hospital Medical Center of Queens
Program Director:
Anthony Somogyi, MD
New York Hospital Medical Center of Queens
56-45 Main St
Flushing, NY 11355
718 670-0977
Length: 1 Year(s) Total Positions: 12 (GY: 12)
Sponsoring Spec: GS,IM
Program ID: 999-35-00-215

New Rochelle
New Rochelle Hospital Medical Center Program
New Rochelle Hospital Medical Center
Program Director:
Jeffrey M Bressler, MD
Dept of Medicine
New Rochelle Hospital Medical Ctr
16 Union Pl
New Rochelle, NY 10801-5500
914 637-1681
Length: 1 Year(s) Total Positions: 4 (GY: 4)
Sponsoring Spec: GS,IM
Program ID: 999-35-00-216

New York
Mount Sinai School of Medicine (Elmhurst) Program
Mount Sinai School of Medicine
Elmhurst Hospital Center-Mount Sinai Services
Program Director:
Frank A. Ross, MD
Mount Sinai Serv-Elmhurst Hosp Ctr
79-01 Broadway
Elmhurst, NY 11373
718 344-3444
Length: 1 Year(s) Total Positions: 13 (GY: 13)
Sponsoring Spec: EM,IM,N,OBG,PD
Program ID: 999-35-00-023

Syracuse
St. Joseph’s Hospital Health Center Program
St. Joseph’s Hospital Health Center
Program Director:
Ronnie Koreff-Wolf, MD
St. Joseph Hospital Health Center
301 Prospect Ave
Syracuse, NY 13239
315 448-6505
Length: 1 Year(s) Total Positions: 8 (GY: 8)
Sponsoring Spec: AN,FP
Program ID: 999-35-00-084

Valhalla
New York Medical College at St. Vincent’s Hospital and Medical Center of New York Program
New York Medical College
St. Vincent’s Hospital and Medical Center of New York
Program Director:
Eric C Kauk, MD
St Vincent's Hospital and Medical Center of New York
150 W 11th St
New York, NY 10011
212 604-8888
Length: 1 Year(s) Total Positions: 20 (GY: 20)
Sponsoring Spec: AN,DR,GS,IM,N,OBG,FP,PM,PTH
Program ID: 999-35-00-083

North Dakota
Grand Forks
University of North Dakota Program*
Univ of North Dakota School of Medicine
St Luke’s Hospitals
Program Director:
Richard J Oldason, MD
St Luke’s hospitals Fargo Clinic Mericard
700 Fourth St N
Fargo, ND 58122
701 224-5933
Length: 1 Year(s) Total Positions: 8 (GY: 8)
Sponsoring Spec: FP,GS
Program ID: 999-37-00-086

Ohio
Akron
Akron General Medical Center/NEUCOM Program
Akron General Medical Center/NEUCOM Program
Program Director:
Irene H Chenoweth, MD
Akron General Medical Center
400 Wabash Ave
Akron, OH 44307
216 384-5816
Length: 1 Year(s) Total Positions: 6 (GY: 6)
Sponsoring Spec: FP,GS,IM
Program ID: 999-35-00-088

Canton
Aultman Hospital/NEUCOM Program
Aultman Hospital
Program Director:
Frederick C Whitter, MD
Aultman Hospital
2600 Sixth St SW
Canton, OH 44710
216 435-7434
Length: 1 Year(s) Total Positions: 4 (GY: 4)
Sponsoring Spec: DR,FP,GS,OBG
Program ID: 999-35-00-191

Cleveland
Cleveland Clinic Foundation Program
Cleveland Clinic Foundation
Program Director:
Peter B O'Donovan, MD
Cleveland Clinic Foundation
Transitional Year Progs
9500 Euclid Ave TR12
Cleveland, OH 44195-5424
216 444-5960
Length: 1 Year(s) Total Positions: 8 (GY: 8)
Sponsoring Spec: GS,IM
Program ID: 999-35-00-090

Graduate Medical Education Directory
809
| Accredited Programs in Transitional Year |

### Mount Sinai Medical Center of Cleveland Program
- **Program Director:** Robert Harnie, MD PhD
- **Mount Sinai Medical Center of Cleveland**
  760 W State St
  Columbus, OH 43222
  614 226-2776

| Columbus |

| Mount Carmel Health Program |
- **Mount Carmel Medical Center**
  760 W State St
  Columbus, OH 43222
  614 226-2776

### Riverside Methodist Hospitals Program

| Riverside Methodist Hospitals Program |
- **Program Director:** James W Lewis, MD
- **Riverside Methodist Hospitals**
  Med Edc Dept
  5650 Olentangy River Rd
  Columbus, OH 43214
  614 666-6426

### Dayton (Kettering) Program

| Kettering Medical Center Program |
- **Children’s Medical Center**
- **Miami Valley Hospital**
  3565 Southern Blvd
  Kettering, OH 45429-2108
  513 365-7293

### Toledo Program

| Medical College of Ohio at Toledo |
- **Medical College of Ohio Hospital, St Vincent Medical Center**
- **Toledo Hospital**
  PO Box 10008
  Dept of Med
  Toledo, OH 43608-0008
  419 381-4244

### Mercy Hospital of Toledo Program
- **Mercy Hospital of Toledo**
  2238 Jefferson Ave
  Toledo, OH 43624
  419 255-1355

### Youngstown Program
- **St Elizabeth Hospital Medical Center/NEOUCOM Program**
- **Program Director:** Benjamin M Hayek, MD
- **St Elizabeth Hospital Medical Center**
  1044 Belmont Ave
  Youngstown, OH 44501-1799
  216 439-3329

### Western Reserve Care System/NEOUCOM Program
- **Program Director:** Gene A Butcher, MD

### Western Reserve Care System/NEOUCOM Program
- **Program Director:** John A Shreden, MD

### Oklahoma Program

| University of Oklahoma Health Sciences Center Program |
- **University of Oklahoma College of Medicine-Oklahoma City**
  Baptist Medical Center of Oklahoma
  Children’s Hospital of Oklahoma
  HCA Presbyterian Hospital
  St Anthony Hospital
  University Hospital and Clinics
  405 271-2385

### Oregon Program
- **Portland**
- **Emanuel Hospital and Health Center Program**
  2861 N Gardenview Ave
  Portland, OR 97227
  503 285-4692

### Pennsylvania Program

| Allentown |
- **Lehigh Valley Hospital/Pennsylvania State University Program**
  900 N Lehigh Ave
  Allentown, PA 18108-1556
  610 432-9000

| Bethlehem |
- **St Luke’s Hospital Program**
  801 Ostrum St
  Bethlehem, PA 18015
  610 844-4544

### Easton Program
- **Easton Hospital Program**
  500 S 21st St
  Easton, PA 18042
  215 255-4013

### Erie Program
- **Hamot Medical Center Program**
  201 State St
  Erie, PA 16505
  814 877-6318

* Updated information not provided.
Johnstown
Conemaugh Valley Memorial Hospital Program
Conemaugh Valley Memorial Hospital Program
Program Director: Dana S. Kelly, MD
Conemaugh Valley Memorial Hospital 1085 Franklin St Johnstown, PA 15905-4986 814-533-9397
Length: 1 Year(s) Total Positions: 7 (GYT: 7) Sponsoring Spec: PRIM, PTH Program ID: 999-41-00-108

Lancaster
Lancaster General Hospital Program
Lancaster General Hospital
Program Director: John H. Ebenezer Jr, MD
Lancaster General Hospital 500 N Duane St PO Box 3655 Lancaster, PA 17604-3655 717-998-4600
Length: 1 Year(s) Total Positions: 4 (GYT: 4) Sponsoring Spec: FP Program ID: 999-41-00-109

Philadelphia
Albert Einstein Medical Center Program
Albert Einstein Medical Center
Program Director: Lisa A. Walleen, MD
Transitional Year Residency Program Albert Einstein Medical Center 6401 Old York Rd Ste 363 Philadelphia, PA 19141-0625 215-456-6947
Length: 1 Year(s) Total Positions: 14 (GYT: 14) Sponsoring Spec: GI, IM, PD Program ID: 999-41-00-224

Chestnut Hill Hospital Program
Chestnut Hill Hospital
Program Director: Kenneth P. Patrick, MD
Chestnut Hill Hospital 8855 Germantown Ave Philadelphia, PA 19118-2767 215-248-8265
Length: 1 Year(s) Total Positions: 8 (GYT: 8) Sponsoring Spec: FP, PG Program ID: 999-41-00-111

MCPH/Medical College of Pennsylvania Hospital Program
Medical College of Pennsylvania Hospital
Program Director: Martin S. Weingardt, MD
Frankford Hospital 3737 Bacon St Philadelphia, PA 19125 215-532-5700
Length: 1 Year(s) Total Positions: 10 (GYT: 10) Sponsoring Spec: GI Program ID: 999-41-00-112

Mercy Catholic Medical Center Program
Mercy Catholic Medical Center
Program Director: Jerome Singer, MD
Mercy Medical Center 1300 N 30th St Philadelphia, PA 19104 215-966-5000
Length: 1 Year(s) Total Positions: 16 (GYT: 16) Sponsoring Spec: GI Program ID: 999-41-00-106

Presbyterian Medical Center of Philadelphia Program
Presbyterian Medical Center of Philadelphia
Program Director: John J. Muller, MD
Presbyterian Medical Center of Philadelphia 51 N 30th St MOB 149 Philadelphia, PA 19104 215-966-5000
Length: 1 Year(s) Total Positions: 14 (GYT: 14) Sponsoring Spec: GI Program ID: 999-41-00-113

Pittsburgh
Mercy Hospital of Pittsburgh Program
Mercy Hospital of Pittsburgh
Program Director: Kinzler H. Rahn, MD
Mercy Hospital of Pittsburgh Dept of Medicine 1400 Locust St Pittsburgh, PA 15219-5166 412-392-5000
Length: 1 Year(s) Total Positions: 16 (GYT: 16) Sponsoring Spec: AN, DI, GS, IM Program ID: 999-41-00-114

Shadyside Hospital Program
Shadyside Hospital
Program Director: Gary L. Joubas, MD
Shadyside Hospital 555 Centre Ave Pittsburgh, PA 15232 412-853-5476
Length: 1 Year(s) Total Positions: 6 (GYT: 6) Sponsoring Spec: PR Program ID: 999-41-00-117

St Francis Medical Center Program
St. Francis Medical Center
Program Director: Louis L. Laffey, MD
St. Francis Medical Center 406 Gravina St Pittsburgh, PA 15201 412-682-4442
Length: 1 Year(s) Total Positions: 10 (GYT: 10) Sponsoring Spec: PR Program ID: 999-41-00-116

University Health Center of Pittsburgh Program
University Health Center of Pittsburgh
Program Director: Edward J. Wing, MD
Hospitals of University Health Center of Pittsburgh 3551 Terrace St 1118 Stato Hill Pittsburgh, PA 15261 412-648-9642
Length: 1 Year(s) Total Positions: 6 (GYT: 6) Sponsoring Spec: AN, GS, OB/GYN, ORS, PPD Program ID: 999-41-00-115

Western Pennsylvania Hospital Program
Western Pennsylvania Hospital
Program Director: Stephen Gold, MD
Western Pennsylvania Hospital 8400 Plaza Dr Pittsburgh, PA 15234-1735 412-428-6739
Length: 1 Year(s) Total Positions: 6 (GYT: 6) Sponsoring Spec: AN, DI, GS, IM, OB Program ID: 999-41-00-234

Reading
Reading Hospital and Medical Center Program
Reading Hospital and Medical Center
Program Director: David J. George, MD
Reading Hospital and Medical Center 610 1st Ave Reading, PA 19612 610-378-4470
Length: 1 Year(s) Total Positions: 8 (GYT: 8) Sponsoring Spec: PR Program ID: 999-41-00-119

York
York Hospital Program
York Hospital
Program Director: Peter M. Hartmann, MD
York Hospital 1001 S George St York, PA 17405 717-851-2224
Length: 1 Year(s) Total Positions: 5 (GYT: 5) Sponsoring Spec: FP Program ID: 999-41-00-120

Puerto Rico
Bayamon
Universidad Central del Caribe Program
University Hospital Razon Ruiz Arnao
Program Director: Ramiro A. Suarez, MD
Razon Ruiz Arnao University Hospital 16-100000 Bayamon, PR 00990-0022 787-789-3303
Length: 1 Year(s) Total Positions: 10 (GYT: 10) Sponsoring Spec: PR Program ID: 999-41-00-121

*Updated information not provided.
Rhode Island

Providence
Brown University Program
Miriam Hospital Program Director: A. Garson Greenberg, MD PhD
Program Director: Joseph Valton, MD
Miriam Hospital
164 Summit Ave Providence, RI 02906
401 529-8600
Length: 1 Year(s) Total Positions: 4 (GY: 4)
Sponsoring Spec: IM,PD
Program ID: 999-42-00-126

South Carolina

Greenville
Greenville Hospital System Program
Greenville Hospital System Program Director: Donna J. MILLER, MD
Greenville Hospital System
701 Grove Rd Greenville, SC 29605-4296
864 455-7773
Length: 1 Year(s) Total Positions: 4 (GY: 4)
Sponsoring Spec: IM,PD
Program ID: 999-42-00-126

Spartanburg
Spartanburg Regional Medical Center Program
Spartanburg Regional Medical Center Program Director: Joseph Valton, MD
Spartanburg Regional Medical Center
101 E Wood St Spartanburg, SC 29303
864 560-6902
Length: 1 Year(s) Total Positions: 4 (GY: 4)
Sponsoring Spec: IM
Program ID: 999-42-00-182

South Dakota

Sioux Falls
University of South Dakota Program
University of South Dakota School of Medicine McElvanney Hospital Royal C Johnson Veterans Affairs Medical Center Sioux Valley Hospital Program Director: H Bruce Vogt, MD
University of South Dakota School of Medicine Office of the Dean
1400 W 22nd St Sioux Falls, SD 51106-1670
605 367-1300
Length: 1 Year(s) Total Positions: 12 (GY: 12)
Sponsoring Spec: PM,PTH
Program ID: 999-45-00-539

Tennessee

Chattanooga
University of Tennessee College of Medicine at Chattanooga Program University of Tennessee College of Medicine-Chattanooga Erlanger Medical Center Program Director: Barbara H. Roitlin, MD
Univ of Tennessee College of Medicine-Chattanooga Unit Transitional Year Program
975 E Third St Chattanooga, TN 37403
615 777-6972
Length: 1 Year(s) Total Positions: 8 (GY: 8)
Sponsoring Spec: IM,IM,OPH,OPH,OS,F,PD
Program ID: 999-47-00-125

Knoxville
University of Tennessee Medical Center at Knoxville Program
University of Tennessee Graduate School of Medicine University of Tennessee Memorial Hospital Program Director: Daniel S. Ely, MD
Graduate School of Medicine
1804 Alcoa Hwy Knoxville, TN 37930
615 456-5201
Length: 1 Year(s) Total Positions: 4 (GY: 4)
Sponsoring Spec: AN,DR,FR(G),IM,OBG
Program ID: 999-47-00-130

Memphis
Baptist Memorial Hospital Program
Baptist Memorial Hospital Program Director: Laura R. Spraberry, MD
Baptist Memorial Hospital 800 Madison Ave Memphis, TN 38141
901 227-5138
Length: 1 Year(s) Total Positions: 5 (GY: 5)
Sponsoring Spec: IM, IM, OB
Program ID: 999-47-00-130

Methodist Hospital-Central Unit Program
Methodist Hospital-Central Unit LeBonheur Children's Medical Center Program Director: Stephen T. Miller, MD
Methodist Hospital-Central Unit
1266 Union Ave Memphis, TN 38104-3415
901 726-3805
Length: 1 Year(s) Total Positions: 5 (GY: 5)
Sponsoring Spec: AN,DR,OPH,OS,F,OTO
Program ID: 999-47-00-131

* Updated information not provided.
Texas

Austin

Central Texas Medical Foundation Program
Central Texas Medical Foundation University Medical Center
Program Director:
Earl B. Matthew, MD
Central Texas Medical Foundation
601 E 14th St
Austin, TX 78701
512-469-1860
Length: 1 Year(s) Total Positions: 6 (GYI: 6)
Sponsoring Spec: TPIM, PD
Program ID: 999-48-00-133

Dallas

Baylor University Medical Center Program
Baylor University Medical Center
Program Director:
William L. Secker, MD
Baylor University Medical Center
3500 Gaston Ave
Dallas, TX 75246
214-830-2361
Length: 1 Year(s) Total Positions: 4 (GYI: 4)
Sponsoring Spec: GS,IM
Program ID: 999-48-00-135

University of Texas Southwestern Medical School Program
University of Texas Southwestern Medical School Dallas County Hospital/District-Parkland Memorial Hospital Veterans Affairs Medical Center (Dallas)
Zale-Lipton Medical University Hospital
Program Director:
Wilson W. Bresnahan, MD
Dept of Neurology
Univ of Texas S Western Med Schl
3323 Harry Hines Blvd
Dallas, TX 75336-9016
214-645-4775
Length: 1 Year(s) Total Positions: 3 (GYI: 3)
Sponsoring Spec: IM,N
Program ID: 999-48-00-235

El Paso

Texas Tech University (El Paso) Program
Texas Tech University Health Sciences Center at El Paso R E. Thomason General Hospital
Program Director:
Jose M de la Rosa, MD
Texas Tech University Health Sciences Center Regional Academic Center at El Paso
4800 Albert Ave
El Paso, TX 79905-1388
915-566-6500
Length: 1 Year(s) Total Positions: 6 (GYI: 6)
Sponsoring Spec: GS,IM
Program ID: 999-48-00-221

William Beaumont Army Medical Center Program
William Beaumont Army Medical Center
Program Director:
Martin G. Anderson, MD
William Beaumont Army Medical Center Office of Graduate Med Educ
El Paso, TX 79905-5001
915-566-2821
Length: 1 Year(s) Total Positions: 34 (GYI: 34)
Sponsoring Spec: GS,IM,OBG,OB,G,PD
Program ID: 999-48-00-137

Fort Sam Houston

Brooke Army Medical Center Program
Brooke Army Medical Center
Program Director:
Lt Col Daniel F Batafara, DO
Brooke Army Medical Center HŠSHE-ED/Bldg 1026
2410 Stanley Blvd
Fort Sam Houston, TX 78234-6300
210-316-2222
Length: 1 Year(s) Total Positions: 25 (GYI: 25)
Sponsoring Spec: GS,IM
Program ID: 999-48-00-138

Fort Worth

John Peter Smith Hospital (Tarrant County Hospital District) Program
John Peter Smith Hospital (Tarrant County Hospital District)
Program Director:
Donald K. Nolmes, MD
John Peter Smith Hospital
1500 S Main St
Fort Worth, TX 76104
817-977-1255
Length: 1 Year(s) Total Positions: 12 (GYI: 12)
Sponsoring Spec: FP,OB,G,OB
Program ID: 999-48-00-188

Houston

Baylor College of Medicine Program
Baylor College of Medicine
Houston County Hospital District-Ben Taub General Hospital
Lyndon B Johnson General Hospital
Methodist Hospital
St Luke's Episcopal Hospital
Veterans Affairs Medical Center (Houston)
Program Director:
Thomas A. Varela, MD
Baylor College of Medicine Graduate Medical Education One Baylor Plaza
Rm S102
Houston, TX 77030-3498
713-798-6566
Length: 1 Year(s) Total Positions: 19 (GYI: 19)
Sponsoring Spec: AN,DR,GS,IM,OB,G,OB,G,OB,OBS,OTO,FP,OB,G,OB
PM,PS,PITH
Program ID: 999-48-00-139

St Joseph Hospital Program
St Joseph Hospital
Program Director:
Ethan A. Nateson, MD
St Joseph Hospital of Houston
1919 La Branch
Houston, TX 77002
713-956-7505
Length: 1 Year(s) Total Positions: 12 (GYI: 12)
Sponsoring Spec: GS,IM
Program ID: 999-48-00-140

University of Texas at Houston Program
University of Texas School of Medicine at Houston Hermann Hospital
Lyndon B Johnson General Hospital
University of Texas M D Anderson Cancer Center
Program Director:
James D. Helfter, MD
University of Texas-Houston Medical School
Lyndon B Johnson General Hospital
5656 Kelley St
Houston, TX 77030
713-524-6446
Length: 1 Year(s) Total Positions: 16 (GYI: 16)
Sponsoring Spec: GS,IM,OB,G,PD
Program ID: 999-48-00-219

Lackland AFB

Wilford Hall USAF Medical Center Program
Wilford Hall USAF Medical Center (HQ)
Program Director:
Maj Michael F. Schulte, MD
59th Medical Wing/Pex
Wilford Hall Medical Center
2230 Betoriqui Dr Ste 1
Lackland AFB, TX 78236-6300
210-670-8016
Length: 1 Year(s) Total Positions: 6 (GYI: 6)
Sponsoring Spec: EM,GS,IM,OB,G,PD
Program ID: 999-48-00-192

Utah

Salt Lake City

LDS Hospital Program
LDS Hospital
Primary Children's Medical Center
Program Director:
James F. O'Leary, MD
LDS Hospital
355 Eighth Ave
Salt Lake City, UT 84143
801-281-3600
Length: 1 Year(s) Total Positions: 10 (GYI: 10)
Sponsoring Spec: GS,IM,OB,G,PD
Program ID: 999-48-00-142

Virginia

Newport News

Riverside Regional Medical Center Program
Riverside Regional Medical Center
Program Director:
T. Eugene Temple Jr, MD
Riverside Regional Medical Center
500 J Clyde Morris Blvd
Newport News, VA 23601-1976
804-564-2841
Length: 1 Year(s) Total Positions: 12 (GYI: 12)
Sponsoring Spec: FP,OB,G
Program ID: 999-51-06-170

Portsmouth

Naval Medical Center (Portsmouth) Program
Naval Medical Center (Portsmouth)
Program Director:
Joseph D. Kennedy MD
Naval Hospital Portsmouth
Portsmouth, VA 23708-5000
804-386-7218
Length: 1 Year(s) (GYI: 0)
Sponsoring Spec: GS,IM,OB,G,PD
Program ID: 999-51-06-219

* Updated information not provided.

Graduate Medical Education Directory 813
Roanoke
Carilion Health System Program
Carilion Health System
Community Hospital of Roanoke Valley
Roanoke Memorial Hospitals
Program Director:
William S Erwin Jr, MD
Carilion Health System-Roanoke Memorial Hospital
Med Educ Dept, PO Box 13307
Roanoke, VA 24013-3967
703 981-7776
Length: 1 Year(s) Total Positions: 10 (GYI: 10)
Sponsoring Spec: GS,IM
Program ID: 999-51-00-143

Washington
Seattle
Virginia Mason Medical Center Program
Virginia Mason Medical Center
Program Director:
Norman E Rosenberg, MD
Virginia Mason Medical Center
Office of Housestaff Affairs HT-ME
925 Seneca St
Seattle, WA 98101
206 583-6070
Length: 1 Year(s) Total Positions: 6 (GYI: 6)
Sponsoring Spec: GS,IM
Program ID: 999-54-00-144

Spokane
Deaconess Medical Center Program
Deaconess Medical Center
Program Director:
Judy Benson, MD
Deaconess Medical Center-Spokane
800 W Pich Ave
PO Box 248
Spokane, WA 99210-0248
509 456-7109
Length: 1 Year(s) Total Positions: 8 (GYI: 8)
Sponsoring Spec: FP,IM
Program ID: 999-54-00-149

Sacred Heart Medical Center Program
Sacred Heart Medical Center
Program Director:
Lawrence G Schrock, MD
Dept of Med Educ
Sacred Heart Medical Center
101 W Eighth Ave PO Box 2555
Spokane, WA 99220-2555
509 459-3020
Length: 1 Year(s) Total Positions: 12 (GYI: 12)
Sponsoring Spec: DR,FP,IM
Program ID: 999-54-00-145

Tacoma
Madigan Army Medical Center Program
Madigan Army Medical Center
Program Director:
Bruce A Cook, MD
Madigan Army Medical Center
Graduate Med Educ Office
Attn: HSHU-EMME
Tacoma, WA 98431-5000
254 966-0354
Length: 1 Year(s) Total Positions: 22 (GYI: 22)
Sponsoring Spec: EM,FP,OS,IM,OBG,OB,G,OTO,PD,U
Program ID: 999-54-00-146

West Virginia
Huntington
Marshall University School of Medicine Program
Marshall University School of Medicine
Cabell Huntington Hospital
St Mary's Hospital
Veterans Affairs Medical Center (Huntington)
Program Director:
Shirley M Nitch, MD
Marshall University School of Medicine
1801 Sixth Ave
Huntington, WV 25704-8410
304 869-7277
Length: 1 Year(s) Total Positions: 8 (GYI: 8)
Sponsoring Spec: IM,PD
Program ID: 999-55-00-194

Wisconsin
La Crosse
Gundersen Medical Foundation-La Crosse Lutheran Hospital Program
Gundersen Medical Foundation-La Crosse Lutheran Hospital
Program Director:
Thomas P Latropis, MD
Gundersen Medical Foundation
Lutheran Hosp-La Crosse
1339 South Ave
La Crosse, WI 54601-5429
608 781-6400
Length: 1 Year(s) Total Positions: 10 (GYI: 10)
Sponsoring Spec: GS,IM
Program ID: 999-56-00-147

Marshfield
Marshfield Clinic-St Joseph's Hospital Program
Marshfield Clinic-St Joseph's Hospital
Program Director:
Susan L Turney, MD
Marshfield Clinic
Dept Internal Medicine 3X5
1000 N Oak Ave
Marshfield, WI 54449
715 387-0260
Length: 1 Year(s) Total Positions: 6 (GYI: 6)
Sponsoring Spec: GS,IM,PD
Program ID: 999-56-00-183

Milwaukee
St Joseph's Hospital/Medical College of Wisconsin Program
St Joseph's Hospital
Program Director:
Keshav Kutty, MD
St Joseph's Hospital
5000 W Chambers St
Milwaukee, WI 53210
414 447-2247
Length: 1 Year(s) Total Positions: 12 (GYI: 12)
Sponsoring Spec: IM,OBG
Program ID: 999-56-00-184

*Updated information not provided.*
Urology

Alabama

Birmingham

University of Alabama Medical Center Program
University of Alabama Hospital
Children's Hospital of Alabama
St Vincent's Hospital
Veterans Affairs Medical Center (Birmingham)
Program Director:
Anton J. Bussenius, MD
University of Alabama at Birmingham
Dept of Surgery Div of Urology
1813 34th Ave S MEB605
Birmingham, AL 35294-3296
305-244-1462
Length: 4 Year(s) Total Positions: 6 (GYI: 6)
Program ID: 480-01-11014

Arizona

Tucson

University of Arizona Program
University of Arizona College of Medicine
Tucson Medical Center
University Medical Center
Veterans Affairs Medical Center (Tucson)
Program Director:
George W Orach, MD
Univ of Arizona Health Sciences Center
Section of Urology
1501 N Campbell Ave
Tucson, AZ 85724
602-526-6326
Length: 4 Year(s) Total Positions: 6 (GYI: 0)
Program ID: 480-03-21016

Arkansas

Little Rock

University of Arkansas for Medical Sciences Program
University of Arkansas College of Medicine
Arkansas Children's Hospital
John L McClellan Memorial Veterans Hospital
University Hospital of Arkansas
Program Director:
John P Rodman, MD
University of Arkansas for Medical Sciences
4021 W Markham St Slot 540
Little Rock, AR 72205-7199
501-556-3242
Length: 3 Year(s) Total Positions: 6 (GYI: 0)
Program ID: 480-04-21016

California

Loma Linda

Loma Linda University Program
Loma Linda University Medical Center
Jerry L Pettis Memorial Veterans Hospital
Riverside General Hospital-University Medical Center
San Bernardino County Medical Center
Program Director:
H Roger Hadley, MD
Loma Linda Univ Med Ctr
Div of Urology
11234 Anderson St. Rm A602
Loma Linda, CA 92564
909-824-4186
Length: 4 Year(s) Total Positions: 8 (GYI: 0)
Program ID: 480-06-21019

Los Angeles

UCLA Medical Center Program
UCLA School of Medicine
LAC-Olive View Medical Center
Los Angeles County- Harbor-UCLA Medical Center
UCLA Medical Center
Veterans Affairs Medical Center (West Los Angeles)
Program Director:
Jean B deKernion, MD
UCLA Medical Center
10833 Le Conte Ave
CNS 66-140
Los Angeles, CA 90095-1733
213-825-5088
Length: 4 Year(s) Total Positions: 18 (GYI: 3)
Program ID: 480-06-21023

University of Southern California Program
Los Angeles County-USC Medical Center
Kenneth Norris Jr Cancer Hospital and Research Institute
Program Director:
Donald G Slater, MD
Dept of Urology
1200 N State St
Room B001 G H
Los Angeles, CA 90033
213-232-7305
Length: 4 Year(s) Total Positions: 25 (GYI: 7)
Program ID: 480-06-21021

Oakland

Naval Hospital (Oakland) Program
Naval Hospital (Oakland)
University of California (San Francisco) Medical Center
Program Director:
Raymond R Leidich, MD
US Naval Hospital Oakland
Dept of Urology
8750 Mountain Blvd
Oakland, CA 94627-5009
415-855-5743
Length: 3 Year(s) Total Positions: 4 (GYI: 0)
Program ID: 480-04-21006

Orange

University of California (Irvine) Program
University of California (Irvine) Medical Center
Kaiser Foundation Hospital (Anaheim)
St Joseph Hospital
Veterans Affairs Medical Center (Long Beach)
Program Director:
Thomas E Allsberry, MD
University of California (Irvine) Medical Center
Dept of Surgery/Urology
101 City Dr Rm 81
Orange, CA 92868
714-456-5008
Length: 4 Year(s) Total Positions: 12 (GYI: 4)
Program ID: 480-06-21019

Pasadena

Southern California Kaiser Permanente Medical Care (Los Angeles) Program
Southern California Kaiser Permanente Medical Group
Kaiser Foundation Hospital (Los Angeles)
Program Director:
Gary E Leach, MD
Kaiser Permanente Medical Center
4000 Sunset Blvd
5th Fl
Los Angeles, CA 90027
213-667-6500
Length: 4 Year(s) Total Positions: 8 (GYI: 0)
Program ID: 480-06-21020

Sacramento

University of California (Davis) Program
University of California (Davis) Medical Center
Kaiser Foundation Hospital (Sacramento)
Program Director:
Ralph W DeVere White, MD
Dept of Urology
4301 X St Ste 210
Sacramento, CA 95817-3281
916-754-2329
Length: 4 Year(s) Total Positions: 8 (GYI: 0)
Program ID: 480-06-21017

San Diego

Naval Medical Center (San Diego) Program
Naval Medical Center (San Diego)
Program Director:
John F Sands Jr, MD
Dept of Urology
Code BHA
Naval Medical Center
San Diego, CA 92134-5000
619-535-7201
Length: 4 Year(s) Total Positions: 19 (GYI: 0)
Program ID: 480-06-11-009

University of California (San Diego) Program
University of California (San Diego) Medical Center
Children's Hospital and Health Center
Veterans Affairs Medical Center (San Diego)
Program Director:
Joseph D Schmidt, MD
UCSD Medical Center
Div of Urology (9897)
200 W Arbor Dr
San Diego, CA 92103-8897
619-543-5004
Length: 4 Year(s) Total Positions: 8 (GYI: 0)
Subspecialties: UP
Program ID: 480-06-21-024

* Updated information not provided.
San Francisco
University of California (San Francisco) Program
University of California (San Francisco) School of Medicine
San Francisco General Hospital Medical Center
University of California (San Francisco) Medical Center
Veterans Affairs Medical Center (San Francisco)
Program Director:
Emil A Tanagho, MD
Univ of California (San Francisco)
Dept of Urology 762 Box 0736
San Francisco, CA 94145
415 476-5467
Length: 4 Year(s)
Program ID: 480-05-21-025

Stanford
Stanford University Program
Stanford University Hospital
Lucile Packard Children’s Hospital at Stanford
Santa Clara Valley Medical Center
Veterans Affairs Medical Center (Palo Alto)
Program Director:
Linda M D Shortliffe, MD
Dept of Urology (3387)
Stanford Univ Sch of Med
Stanford, CA 94305-3118
415 725-5542
Length: 4 Year(s) Total Positions: 8 (GYT: 0)
Program ID: 480-05-31-026

Colorado
Aurora
Fitzsimons Army Medical Center Program
Fitzsimons Army Medical Center
Program Director:
Robert C Allen Jr, MD
Fitzsimons Army Medical Center
Urology Serv
Aurora, CO 80045-5001
303 268-8019
Length: 3 Year(s) Total Positions: 2 (GYT: 0)
Program ID: 480-07-11-003

Denver
University of Colorado Program
University of Colorado Health Sciences Center
Fitzsimons Army Medical Center
Veterans Affairs Medical Center (Denver)
Program Director:
E David Crawford, MD
University of Colorado Health Science Center
4200 E Ninth Ave
Mail Stop C-319
Denver, CO 80262-0319
303 270-7645
Length: 4 Year(s) Total Positions: 9 (GYT: 1)
Program ID: 480-07-21-027

Connecticut
Farmington
University of Connecticut Program
University of Connecticut School of Medicine
Hartford Hospital
Newington Children’s Hospital
St Francis Hospital and Medical Center
Univ of Connecticut Health Center/John Dempsey Hospital
Program Director:
Peter Albertone, MD
University of Connecticut
263 Farmington Ave MC 3665
Farmington, CT 06032-3665
203 679-3457
Length: 4 Year(s) Total Positions: 8 (GYT: 0)
Program ID: 480-08-21-029

New Haven
Yale-New Haven Medical Center Program
Yale-New Haven Hospital
Veterans Affairs Medical Center (West Haven)
Waterbury Hospital Health Center
Program Director:
Robert M Weiss, MD
Dept of Surgery Section of Urology
333 Cedar St YP6 #221
PO Box 3333
New Haven, CT 06510
203 788-5815
Length: 3 Year(s) Total Positions: 6 (GYT: 0)
Program ID: 480-08-11-023

Howard University Program
Howard University Hospital
District of Columbia General Hospital
Program Director:
Aaron G Jackson, MD
Howard University Hospital
2041 Georgia Ave NW
Washington, DC 20060
301 663-3314
Length: 4 Year(s) Total Positions: 1 (GYT: 0)
Program ID: 480-10-21-022

Walter Reed Army Medical Center Program
Walter Reed Army Medical Center
Program Director:
Col David G McLeod, MD
Urology Serv Dept of Surgery
Walter Reed Army Med Ctr
6825 16th St NW
Washington, DC 20017-5001
202 282-6106
Length: 4 Year(s) Total Positions: 4 (GYT: 0)
Program ID: 480-10-21-006

Washington Hospital Center Program
Washington Hospital Center
Program Director:
Mitchell Edson, MD
Washington Hospital Center
110 Irving St NW
Ste 3B-31
Washington, DC 20010
202 377-6022
Length: 4 Year(s) Total Positions: 4 (GYT: 0)
Program ID: 480-16-12-023

Florida
Gainesville
University of Florida Program
University of Florida College of Medicine
Shands Hospital at the University of Florida
Veterans Affairs Medical Center (Gainesville)
Program Director:
David M Dryl, MD
University of Florida College of Medicine
Div of Urology
Box 100247
Gainesville, FL 32610-0247
904 392-1561
Length: 3 Year(s) Total Positions: 6 (GYT: 0)
Program ID: 480-11-21-024

Miami
University of Miami-Miami Memorial Medical Center Program
University of Miami-Jackson Memorial Medical Center
Veterans Affairs Medical Center (Miami)
Program Director:
Mark S Soloway, MD
Jackson Memorial Hospital Dept of Urology
PO Box 016600 (MS14)
Miami, FL 33101
305 547-5096
Length: 4 Year(s) Total Positions: 12 (GYT: 0)
Program ID: 480-11-21-036

* Updated information not provided.
Tampa
University of South Florida Program
University of South Florida College of Medicine
H Lee Moffitt Cancer Center
James A Haley Veterans Hospital
Tampa General Healthcare
Veterans Affairs Medical Center (Bay Pines)
Program Director:
Jorge L Lockhart, MD
University of South Florida College of Medicine
12501 Bruce B Downs Blvd
Box 16
Tampa, FL 33612-4799
813 974-2411
Length: 4 Year(s)  Total Positions: 8  (GY: 0)
Program ID: 430-11-21-169

Georgia
Atlanta
Emory University Program*
Emory University School of Medicine
Emory University Hospital
Grady Memorial Hospital
Veterans Affairs Medical Center (Atlanta)
Program Director:
Sam D Graham Jr, MD
Emory Clinic Section of Urology
1380 Colden Rd NE
Atlanta, GA 30322
404 245-3847
Length: 4 Year(s)  Total Positions: 12  (GY: 5)
Program ID: 480-12-21-039

Augusta
Medical College of Georgia Program
Medical College of Georgia Hospital and Clinics
University Hospital
Veterans Affairs Medical Center (Augusta)
Program Director:
Roy Witherington, MD
Medical College of Georgia
Room BA-6408
1120 15th St
Augusta, GA 30912-4560
706 721-2546
Length: 3 Year(s)  Total Positions: 10  (GY: 2)
Program ID: 450-12-21-040

Hawaii
Tripler AMC
Tripler Army Medical Center Program
Tripler Army Medical Center
Program Director:
George D Deshon Jr, MD
Tripler Army Medical Center
HSHC-DHU
Urology Serv
Honolulu, HI 96859-5000
808 488-2572
Length: 3 Year(s)  Total Positions: 3  (GY: 0)
Program ID: 480-14-29-046

Illinois
Chicago
McGaw Medical Center of Northwestern University Program
Northwestern University Medical School
Children's Memorial Medical Center
Northwestern Memorial Hospital
Veterans Affairs Lakeside Medical Center (Chicago)
Program Director:
Anthony J Schaeffer, MD
Northwestern University Medical School
Department of Urology
Terry 17-715 333 E Chicago Ave
Chicago, IL 60611
312 926-8145
Length: 4 Year(s)  Total Positions: 12  (GY: 0)
Program ID: 480-16-21-045

Rush-Presbyterian-St Luke's Medical Center Program*
Rush-Presbyterian-St Luke’s Medical Center
Program Director:
Charles F McKeil Jr, MD
Dept of Urology
1653 W Congress Pkwy
Chicago, IL 60612-3844
312 926-8447
Length: 3 Year(s)  Total Positions: 5  (GY: 1)
Program ID: 480-14-21-046

University of Chicago Program
University of Chicago Hospitals
Louis A Weiss Memorial Hospital
Program Director:
Charles B Brendler, MD
University of Chicago Medical Center
5841 Maryland Ave MCB381
Chicago, IL 60637-1407
312 702-6105
Length: 4 Year(s)  Total Positions: 8  (GY: 0)
Program ID: 480-16-21-045

University of Illinois College of Medicine at Chicago Program
University of Illinois College of Medicine at Chicago
Cook County Hospital
Michael Reese Hospital and Medical Center
University of Illinois Hospital and Clinics
Veterans Affairs Westside Medical Center (Chicago)
Program Director:
Lawrence S Ross, MD
Univ of Illinois Coll of Med
820 S Wood St (MC 355K)
Chicago, IL 60612
312 996-2779
Length: 4 Year(s)  Total Positions: 23  (GY: 4)
Program ID: 480-16-21-174

Maywood
Loyola University Program
Foster G McGaw Hospital-Loyola University of Chicago
Edward J Hines Jr Veterans Affairs Hospital
Lutheran General Hospital
Program Director:
Robert C Planjan, MD
Foster G McGaw Hospital
2160 S First Ave
Bldg 54 Rm 237A
Maywood, IL 60153-5585
708 226-4076
Length: 4 Year(s)  Total Positions: 10  (GY: 3)
Program ID: 480-16-21-166

Springfield
Southern Illinois University Program
Southern Illinois University School of Medicine
Memorial Medical Center
St John's Hospital
Program Director:
John H Baxter Jr, MD
SIU School of Medicine Div of Urology
PO Box 10250
Springfield, IL 62799-0250
217 789-6890
Length: 3 Year(s)  Total Positions: 3  (GY: 0)
Program ID: 480-19-21-065

Indiana
Indianapolis
Indiana University Medical Center Program
Indiana University Medical Center
Methodist Hospital of Indiana
Richard L Raney Veterans Affairs Medical Center
William N Wishard Memorial Hospital
Program Director:
John P Donohue, MD
Indiana University Hospital
550 N University Blvd Ste 1725
Indianapolis, IN 46202-5256
317 274-6398
Length: 4 Year(s)  Total Positions: 12  (GY: 0)
Program ID: 480-17-21-061

Iowa
Iowa City
University of Iowa Hospitals and Clinics Program
University of Iowa Hospitals and Clinics
Veterans Affairs Medical Center (Iowa City)
Program Director:
Richard D Williams, MD
University of Iowa Hospitals and Clinics
Dept of Urology
Iowa City, IA 52242-1069
319 356-5760
Length: 4 Year(s)  Total Positions: 18  (GY: 3)
Program ID: 480-18-21-092

Kansas
Kansas City
University of Kansas Medical Center Program
University of Kansas School of Medicine
University of Kansas Medical Center
Veterans Affairs Medical Center (Kansas City)
Program Director:
Winston K Membus, MD
University of Kansas Medical Center
3901 Basehor Blvd
Kansas City, KS 66109-7380
913 588-6165
Length: 3 Year(s)  Total Positions: 15  (GY: 3)
Program ID: 480-19-21-065

*Updated information not provided.
Kentucky

Lexington

University of Kentucky Medical Center Program
University Hospital Albert B Chandler Medical Center
St Joseph Hospital
Veterans Affairs Medical Center (Lexington)
Program Director:
J William McRoberts, MD
Univ of Kentucky School of Medicine Div of Urology
800 Rose St MS 275
Lexington, KY 40536-0864
606 532-6677
Length: 3 Year(s) Total Positions: 10 (GY1: 2)
Program ID: 480-20-21-054

Louisville

University of Louisville Program
University of Louisville School of Medicine
Jewish Hospital
Kosair Children’s Hospital (Alliant Health System)
 Norton Hospital (Alliant Health System)
University of Louisville Hospital
Veterans Affairs Medical Center (Louisville)
Program Director:
Mohammad Amin, MD
Dept of Surgery Div of Urology
University of Louisville
School of Medicine
Louisville, KY 40292
502 852-5447
Length: 3 Year(s) Total Positions: 6 (GY1: 0)
Program ID: 480-20-21-066

Louisiana

New Orleans

Louisiana State University/Alton Ochsner Medical Foundation Program
Alton Ochsner Medical Foundation
Childrens Hospital
Meadowcresc Hospital
Medical Center of Louisiana at New Orleans
Program Director:
Harold A Pasieki Jr, MD
Ochsner Medical Foundation
Dept of Graduate Med Educ
1560 Jefferson Hwy
New Orleans, LA 70121
504 842-4883
Length: 4 Year(s) Total Positions: 8 (GY1: 0)
Program ID: 480-20-21-176

Tulane University Program
Tulane University School of Medicine
Medical Center of Louisiana at New Orleans-Tulane Division
Tulane University Hospital and Clinics
Veterans Affairs Medical Center-Tulane Service (New Orleans)
Program Director:
O Joseph Dean Jr, MD
Tulane University School of Medicine Dept of Urology
1430 Tulane Ave
New Orleans, LA 70112
504 584-3796
Length: 4 Year(s) Total Positions: 12 (GY1: 3)
Program ID: 480-20-21-068

Shreveport

Louisiana State University (Shreveport) Program
Louisiana State University Medical Center-Shreveport
Overtone Brooks Veterans Affairs Medical Center
Schumpert Medical Center
Program Director:
Dennis O Venable, MD
Louisiana State University Medical Center Urology Dept
1001 Kings Hwy
PO Box 33002
Shreveport, LA 71139-3022
318 675-5690
Length: 3 Year(s) Total Positions: 10 (GY1: 2)
Program ID: 480-21-21-059

Maryland

Baltimore

Johns Hopkins University Program
Johns Hopkins University School of Medicine
Johns Hopkins Bayview Medical Center
Johns Hopkins Hospital
Program Director:
Patrick C Walsh, MD
Dept of Urology
Johns Hopkins Hospital
Baltimore, MD 21205-1481
410 955-6760
Length: 4 Year(s) Total Positions: 8 (GY1: 0)
Program ID: 480-23-21-060

University of Maryland Program
University of Maryland Medical System
Johns Hopkins Hospital
Sina Hospital of Baltimore
St Agnes Hospital of the City of Baltimore
Veterans Affairs Medical Center (Baltimore)
Program Director:
Stephen C Jacobs, MD
University of Maryland Medical System
Div of Urology
22 S Greene St RM 6D618
Baltimore, MD 21201
410 955-5544
Length: 4 Year(s) Total Positions: 12 (GY1: 2)
Program ID: 480-23-21-062

Bethesda

National Naval Medical Center (Bethesda) Program
National Naval Medical Center (Bethesda)
Program Director:
Capt Kevin J O’Connor, MD
National Naval Medical Center
Div of Urology
6841 Wisconsin Ave
Bethesda, MD 20889-5600
202 245-4280
Length: 3 Year(s) Total Positions: 5 (GY1: 2)
Program ID: 480-23-21-010

Massachusetts

Boston

Boston University Program
Boston University Medical Center-University Hospital
Boston City Hospital
Children’s Hospital
Veterans Affairs Medical Center (Boston)
Program Director:
Robert J Krame, MD
Boston University Medical Center
720 Harrison Ave #606
Boston, MA 02118-3260
617 638-8885
Length: 4 Year(s) Total Positions: 8 (GY1: 0)
Program ID: 480-24-21-063

Harvard Medical School Program*
Brigham and Women’s Hospital
Beth Israel Hospital
Brookline-West Roxbury Veterans Affairs Medical Center
Children’s Hospital
Program Director:
Jerome P Richie, MD
Brigham and Women’s Hospital
45 Francis St
Boston, MA 02115
617 732-6225
Length: 4 Year(s) Total Positions: 14 (GY1: 3)
Subspecialties: Uro
Program ID: 480-24-21-044

Massachusetts General Hospital/Harvard Medical School Program
Massachusetts General Hospital
Children’s Hospital
Program Director:
W Scott McDougall, MD
Massachusetts General Hospital
Dept of Urology GRB1102
32 Fruit St
Boston, MA 02114
617 726-3010
Length: 3 Year(s) Total Positions: 8 (GY1: 0)
Program ID: 480-24-11-161

Tufts University Program
New England Medical Center Hospitals
St Elizabeth’s Medical Center of Boston
Program Director:
Edwin M Mean Jr, MD
New England Medical Center Hospitals Inc
770 Washington St
Boston, MA 02111
617 956-5423
Length: 4 Year(s) Total Positions: 4 (GY1: 0)
Program ID: 480-24-21-162

Burlington

Lahey Clinic Program
Lahey Clinic
Children’s Hospital
New England Deaconess Hospital
Program Director:
John A Libertino, MD
Lahey Clinic Foundation
Dept of Urology
41 Mall Rd
Burlington, MA 01805
617 273-8439
Length: 4 Year(s) Total Positions: 12 (GY1: 0)
Program ID: 480-24-22-065

* Updated information not provided.
Worcester

University of Massachusetts Medical Center Program*
University of Massachusetts Medical Center
Medical Center of Central Massachusetts
St Vincent Hospital
Veterans Affairs Medical Center (Togus)
Program Director:
David A Diamond, MD
Univ of Massachusetts Med Ctr
55 Lake Ave N
Worcester, MA 01655
508 855-5604
Length: 3 Year(s) Total Positions: 6 (GYI: 0)
Program ID: 480-24-21-187

Michigan

Ann Arbor

University of Michigan Program
University of Michigan Hospitals
Veterans Affairs Medical Center (Ann Arbor)
Program Director:
Joseph Quaetfling, MD
University of Michigan Hospital
1500 E Medical Ctr Dr PO Box 0330
Ann Arbor, MI 48109-0330
734 936-5775
Length: 3 Year(s) Total Positions: 15 (GYI: 3)
Subspecialties: UP
Program ID: 480-25-21-066

Detroit

Henry Ford Hospital Program
Henry Ford Hospital
Program Director:
Joseph C Cerny, MD
Henry Ford Hospital
2790 W Grand Blvd
Detroit, MI 48202
313 876-2777
Length: 4 Year(s) Total Positions: 8 (GYI: 0)
Program ID: 480-25-21-067

Wayne State University/Detroit Medical Center Program
Wayne State University School of Medicine
Children's Hospital of Michigan
Harper Hospital
Veterans Affairs Medical Center (Allen Park)
Program Director:
J Edison Postea, MD
Harper Hospital Dept of Urology
1017 Harper Ref Bldg 410 John R
Detroit, MI 48201
313 745-7381
Length: 4 Year(s) Total Positions: 9 (GYI: 0)
Subspecialties: UP
Program ID: 480-25-31-069

Royal Oak

William Beaumont Hospital Program
William Beaumont Hospital
Program Director:
Aristizan C Diokno, MD
William Beaumont Hospital
3801 W 13 Mile Rd
Royal Oak, MI 48073-8769
810 561-4012
Length: 4 Year(s) Total Positions: 8 (GYI: 0)
Program ID: 480-25-12-071

Minnesota

Minneapolis

University of Minnesota Program*
University of Minnesota Medical School
St Paul-Ramsey Medical Center
University of Minnesota Hospital and Clinic
Veterans Affairs Medical Center (Minneapolis)
Program Director:
Pratap K Reddy, MD
Paul Gleich, MD
University of Minnesota Hospital and Clinics
420 Delaware St S SE
Box 844 Mayo Memorial Bldg
Minneapolis, MN 55455
612 626-5863
Length: 4 Year(s) Total Positions: 20 (GYI: 3)
Program ID: 480-26-21-072

Rochester

Mayo Graduate School of Medicine Program
Mayo Graduate School of Medicine
Mayo Clinic (Rochester)
Rochester Methodist Hospital
St Mary's Hospital of Rochester
Program Director:
David M Barrett, MD
MOSM Application Processing Center
Mayo Graduate School of Medicine
200 First St SW
Rochester, MN 55905
507 284-1383
Length: 4 Year(s) Total Positions: 26 (GYI: 6)
Subspecialties: UP
Program ID: 480-26-21-073

Mississippi

Jackson

University of Mississippi Medical Center Program
University of Mississippi School of Medicine
University Hospital
Veterans Affairs Medical Center (Jackson)
Program Director:
Jackson E Fowler Jr, MD
University of Mississippi Medical Center
Dept of Urology
2500 N State St
Jackson, MS 39216-4005
601 984-4186
Length: 4 Year(s) Total Positions: 10 (GYI: 1)
Program ID: 480-27-21-076

Missouri

Columbia

University of Missouri-Columbia Program
University of Missouri-Columbia School of Medicine
Harry S Truman Memorial Veterans Hospital
University of Children's Hospital
Program Director:
Gilbert Ross Jr, MD
University Hospital & Clinics
Div of Urology
One Hospital Dr Room NS10
Columbia, MO 65212
314 882-1181
Length: 4 Year(s) Total Positions: 9 (GYI: 0)
Program ID: 480-35-21-078

St Louis

St Louis University Group of Hospitals Program
St Louis University School of Medicine
Cardinal Glennon Children's Hospital
St John's Mercy Medical Center
St Louis University Hospital
St Mary's Health Center
Veterans Affairs Medical Center (St Louis)
Program Director:
Raul G Parra, MD
St Louis University School of Medicine
3335 Vista Ave at Grand Blvd
PO Box 85260
St Louis, MO 63110-0250
314 977-8790
Length: 4 Year(s) Total Positions: 12 (GYI: 6)
Program ID: 480-25-21-079

Washington University Program
Barnes Hospital
Veterans Affairs Medical Center (St Louis)
Program Director:
William J Catalona, MD
Barnes Hospital
4900 Children's Pl
St Louis, MO 63110
314 962-8206
Length: 4 Year(s) Total Positions: 12 (GYI: 3)
Program ID: 480-25-21-079

Nebraska

Omaha

University of Nebraska Program
University of Nebraska Medical Center
Methodist Hospital
Veterans Affairs Medical Center (Omaha)
Program Director:
Rodney J Taylor, MD
Univ of Nebraska Coll of Med Sect of Urology
Hospital Bldg #6418
600 S 42nd St
Omaha, NE 68198-2900
402 559-4292
Length: 4 Year(s) Total Positions: 7 (GYI: 2)
Program ID: 480-30-21-081

* Updated Information not provided.
New Hampshire

Lebanon
Dartmouth-Hitchcock Medical Center Program
Mary Hitchcock Memorial Hospital
Veterans Affairs Medical Center (White River Junction)
Program Director:
John A. Hennesy, MD
Dartmouth-Hitchcock Medical Center Section of Urology
One Medical Center Dr
Lebanon, NH 03756
603 653-6100
Length: 4 Year(s) Total Positions: 4 (GYI: 0)
Program ID: 480-32-21-082

New York

Albany
Albany Medical Center Program*
Albany Medical Center Hospital
Veterans Affairs Medical Center (Albany)
Program Director:
Ronald P. Kaufman, MD
Albany Medical Center
Div of Urological Surgery A-108
43 New Scotland Ave
Albany, NY 12206-5478
518 262-5407
Length: 3 Year(s) Total Positions: 10 (GYI: 0)
Program ID: 480-35-21-085

Bronx
Albert Einstein College of Medicine Program
Albert Einstein College of Medicine of Yeshiva University
Bronx Municipal Hospital Center
Montefiore Medical Center-Henry and Lucy Moses Division
Montefiore Medical Center-Weiler Hospital
North Central Bronx Hospital
Program Director:
Arnold Melman, MD
Montefiore Medical Center
Dept of Urology E 3
111 E 210th St
Bronx, NY 10467
718 926-7666
Length: 4 Year(s) Total Positions: 19 (GYI: 2)
Program ID: 480-35-21-089

Brooklyn
Brookdale Hospital Medical Center Program
Brookdale Hospital Medical Center
SUNY HSC at Brooklyn College of Medicine
Program Director:
Hong Kim, MD
Brookdale Hospital Medical Center
Dept of Urology
Linden Blvd at Brookdale Plaza
Brooklyn, NY 11212
718 249-5223
Length: 4 Year(s) Total Positions: 4 (GYI: 0)
Program ID: 480-35-21-491

Maimonides Medical Center Program
Maimonides Medical Center
Coney Island Hospital
Program Director:
Gilbert J. Wise, MD
Maimonides Medical Center
4802 8th Ave
Brooklyn, NY 11219
718 438-3475
Length: 4 Year(s) Total Positions: 8 (GYI: 0)
Program ID: 480-35-21-099

New Jersey

Newark
UMDNJ-New Jersey Medical School Program
UMDNJ-New Jersey Medical School
Dept of Veterans Affairs Medical Center (East Orange)
Hackensack Medical Center
UMDNJ-New Jersey Medical School Program Director:
Robert J. Irwin Jr, MD
UMDNJ-New Jersey Med Sch Sect of Urology (G-536)
185 S Orange Ave
Newark, NJ 07103-2767
201 888-4488
Length: 4 Year(s) Total Positions: 7 (GYI: 0)
Program ID: 480-33-21-083

Piscataway
UMDNJ-Robert Wood Johnson Medical School Program
UMDNJ-Robert Wood Johnson Medical School
Cooper Hospital University Medical Center
Medical Center at Princeton
Robert Wood Johnson University Hospital Program Director:
Kenneth B. Cummings, MD
UMDNJ-Robert Wood Johnson Medical School-CN/19
One Robert Wood Johnson PI
Div of Urology Rm 588
New Brunswick, NJ 08903-0919
908 235-7775
Length: 4 Year(s) Total Positions: 7 (GYI: 0)
Program ID: 480-33-21-173

New Mexico

Albuquerque
University of New Mexico Program
University of New Mexico School of Medicine
Lovelace Medical Center
University Hospital
Veterans Affairs Medical Center (Albuquerque)
Program Director:
Thomas A. Borden, MD
School of Medicine
Dept of Surgery/Div of Urology
2211 Lomas Blvd NE
Albuquerque, NM 87131-5541
505 272-5505
Length: 4 Year(s) Total Positions: 10 (GYI: 2)
Program ID: 480-34-21-084

* Updated information not provided.

SUNY Health Science Center at Brooklyn Program
SUNY HSC at Brooklyn College of Medicine
Kings County Hospital Center
Long Island College Hospital
University Hospital-SUNY Health Science Center at Brooklyn
Veterans Affairs Medical Center (Brooklyn)
Program Director:
Richard J. Macchia, MD
SUNY Health Science Center
445 Lenox Rd Box 72
Brooklyn, NY 11203-2086
718 270-5554
Length: 4 Year(s) Total Positions: 12 (GYI: 0)
Program ID: 480-35-21-107

Buffalo
SUNY at Buffalo Graduate Medical-Dental Education Consortium Program
SUNY at Buffalo Grad Medical-Dental Education Consortium
Buffalo General Hospital
Children's Hospital of Buffalo
Millard Fillmore Hospitals
Veterans Affairs Medical Center (Buffalo)
Program Director:
Gerald Steffen, MD
Erie County Medical Center
462 Grider St
Buffalo, NY 14215
716 898-5469
Length: 4 Year(s) Total Positions: 12 (GYI: 0)
Program ID: 480-36-21-087

New Hyde Park
Albert Einstein College of Medicine at Long Island Jewish Medical Center Program
Long Island Jewish Medical Center
Winthrop-University Hospital Program Director:
Arthur D. Smith, MD
Long Island Jewish Medical Center
Dept of Urology
270-05 76th Ave
New Hyde Park, NY 11040-1496
718 470-7221
Length: 4 Year(s) Total Positions: 8 (GYI: 0)
Program ID: 480-35-21-098

New York

Albert Einstein College of Medicine at Beth Israel Medical Center Program
Beth Israel Medical Center
LaGuardia Hospital Program Director:
Harri M. Nagler, MD
Dept of Urology
Beth Israel Medical Center
First Ave at 16th St
New York, NY 10003
212 420-4200
Length: 3 Year(s) Total Positions: 6 (GYI: 0)
Program ID: 480-35-11-090
Lenox Hill Hospital Program
Lenox Hill Hospital
Program Director:
John A. Pracchia, MD
Lenox Hill Hospital
Section of Urology
100 E 77th St
New York, NY 10021-1883
212 634-2130
Length: 4 Year(s) Total Positions: 4 (GY: 0)
Program ID: 490-35-11086

Mount Sinai School of Medicine Program
Mount Sinai School of Medicine
Elmhurst Hospital Center-Mount Sinai Services
Mount Sinai Medical Center
Veterans Affairs Medical Center (Bronx)
Program Director:
Michael J. Druliner, MD
Mount Sinai Med Ctr Dept of Urology
One Gustave L Levy Pl
Box 1272
New York, NY 10029-6574
212 341-8711
Length: 4 Year(s) Total Positions: 8 (GY: 0)
Program ID: 490-35-21102

New York Hospital/Cornell Medical Center Program
New York Hospital
Memorial Sloan-Kettering Cancer Center
Program Director:
E. Darracott Vaughan Jr, MD
New York Hospital
525 E 68th St Box 84
New York, NY 10021
212 746-5400
Length: 4 Year(s) Total Positions: 14 (GY: 0)
Program ID: 490-35-21093

New York University Medical Center Program
New York University Medical Center
Bellevue Hospital Center
Cabini Medical Center
Veterans Affairs Medical Center (Manhattan)
Program Director:
Herbert Lepor, MD
New York University Medical Center
560 First Ave
New York, NY 10016
212 390-6071
Length: 4 Year(s) Total Positions: 12 (GY: 0)
Program ID: 490-35-21104

Presbyterian Hospital in the City of New York Program
Presbyterian Hospital in the City of New York
Program Director:
Carl A. Olsson, MD
Columbia Presbyterian Medical Center
620 W 166th St
New York, NY 10032
212 932-4189
Length: 4 Year(s) Total Positions: 12 (GY: 0)
Program ID: 490-35-21100

St Luke's-Roosevelt Hospital Center Program
St Luke's-Roosevelt Hospital Center
St Luke's-Roosevelt Hospital Center-Roosevelt Division
St Luke's-Roosevelt Hospital Center-St Luke's Division
Program Director:
Nicholas A. Rauen, MD
St Luke's-Roosevelt Hospital Center
Dept of Urology
1000 Thruh Ave Ste 6C-01
New York, NY 10069
212 593-7700
Length: 4 Year(s) Total Positions: 4 (GY: 0)
Program ID: 490-35-21-108

Rochester University of Rochester Program
Strong Memorial Hospital of the University of Rochester
Geneseo Hospital
Rochester General Hospital
Program Director:
Abraham T. Cockett, MD
Strong Memorial Hospital of the University of Rochester
601 Elmwood Ave Box 656
Rochester, NY 14642
716 275-7053
Length: 4 Year(s) Total Positions: 8 (GY: 0)
Program ID: 490-35-21-108

Stony Brook SUNY at Stony Brook Program
University Hospital-SUNY at Stony Brook
Veterans Affairs Medical Center (Northport)
Program Director:
Wayne C. Walter, MD
Dept of Urology
SUNY Stony Brook School of Medicine
HSC-T9-160
Stony Brook, NY 11794-8099
516 444-3642
Length: 4 Year(s) Total Positions: 4 (GY: 0)
Program ID: 490-35-21-115

Syracuse SUNY Health Science Center at Syracuse Program
University Hospital-SUNY Health Science Center at Syracuse
Veterans Affairs Medical Center (Syracuse)
Program Director:
Zahi N. Mattahi, MD
SUNY Hlth Sc Ctr at Syracuse
Dept of Urology
750 E Adams St
Syracuse, NY 13210
315 445-4473
Length: 4 Year(s) Total Positions: 5 (GY: 0)
Program ID: 490-35-21-109

Valhalla New York Medical College at Westchester County Medical Center Program
New York Medical College
Lincoln Medical and Mental Health Center
Metropolitan Hospital Center
Our Lady of Mercy Medical Center
Westchester County Medical Center
Program Director:
Camille Malhous, MD
New York Medical College
Dept of Urology
Munger Pavilion Rm 600
Valhalla, NY 10595
914 995-4300
Length: 4 Year(s) Total Positions: 12 (GY: 0)
Program ID: 490-35-21-103

North Carolina Chapel Hill University of North Carolina Hospitals Program
University of North Carolina Hospitals
Durham Regional Medical Center
Wake Medical Center
Program Director:
Catey C. Carson III, MD
UNC School of Medicine
Div of Urology CB 7235
428 Burnett-Wenack Bldg 229-H
Chapel Hill, NC 27599-7235
919 966-2527
Length: 3 Year(s) Total Positions: 4 (GY: 0)
Program ID: 490-35-21-110

Durham Duke University Program
Duke University Medical Center
Veterans Affairs Medical Center (Auburn)
Veterans Affairs Medical Center (Durham)
Program Director:
David P. Paulson, MD
Duke University Medical Center
PO Box 3707
Durham, NC 27710
919 684-2033
Length: 4 Year(s) Total Positions: 16 (GY: 0)
Program ID: 490-35-21-112

Winston-Salem Bowman Gray School of Medicine Program
North Carolina Baptist Hospital
 Forsyth Memorial Hospital
Program Director:
David L. McCullough, MD
Dept of Urology
Bowman Gray School of Medicine
Medical Center Blvd
Winston-Salem, NC 27167-1084
910 718-1431
Length: 3 Year(s) Total Positions: 2 (GY: 2)
Program ID: 490-35-21-113

* Updated information not provided.
Accredited Programs in Urology

Ohio

Akron

Akron General Medical Center; NEOU COM Program
Akron General Medical Center
Akron City Hospital (Summa Health System)
Children's Hospital Medical Center of Akron

Program Director:
L. Doyle Arbuckle, Jr, MD
Akron General Medical Center
400 Kubash Ave
Akron, OH 44307
216-394-6051

Length: 3 Year(s) Total Positions: 10 (GYT: 2)
Program ID: 480-38-21-164

Cincinnati

University of Cincinnati Hospital Group Program
University of Cincinnati Hospital
Children's Hospital Medical Center
Christ Hospital
Veterans Affairs Medical Center (Cincinnati)

Program Director:
Nina S Davis, MD
University of Cincinnati Medical Center
Div of Urology
231 Bethesda Ave ML 599
Cincinnati, OH 45267-0859
513-558-4398

Length: 4 Year(s) Total Positions: 15 (GYT: 3)
Program ID: 480-38-21-117

Cleveland

Case Western Reserve University Program
University Hospitals of Cleveland
MetroHealth Medical Center
Veterans Affairs Medical Center (Cleveland)

Program Director:
Martin E Resnick, MD
Case Western Reserve University
11100 Euclid Ave LKB 7112
Cleveland, OH 44106-6966
216-952-8000

Length: 4 Year(s) Total Positions: 21 (GYT: 3)
Program ID: 480-38-21-118

Cleveland Clinic Foundation Program
Cleveland Clinic Foundation

Program Director:
Drogo K Montague, MD
Cleveland Clinic Foundation
9550 Euclid Ave TT32
Dept of Urology
Cleveland, OH 44195-5345
216-444-6900

Length: 4 Year(s) Total Positions: 18 (GYT: 3)
Program ID: 480-38-29-119

Columbus

Ohio State University Program
Ohio State University Medical Center
Children's Hospital
Riverside Methodist Hospitals

Program Director:
Robert A Badalament, MD
The Ohio State University
4529 UHC
455 W Twelfth Ave
Columbus, OH 43210-1228
614-293-8105

Length: 3 Year(s) Total Positions: 10 (GYT: 2)
Program ID: 480-38-21-120

Toledo

Medical College of Ohio at Toledo Program
Medical College of Ohio Hospital
St Vincent Medical Center
Toledo Hospital

Program Director:
Kenneth A Kropp, MD
Medical College of Ohio Dept of Urology
CS #10008
Toledo, OH 43699
419-381-3861

Length: 4 Year(s) Total Positions: 12 (GYT: 2)
Program ID: 480-38-21-122

Oklahoma

Oklahoma City

University of Oklahoma Health Sciences Center Program
University of Oklahoma College of Medicine-Oklahoma City
Children's Hospital of Oklahoma
University Hospital and Clinics
Veterans Affairs Medical Center (Oklahoma City)

Program Director:
Daniel J Couklin, MD
Univ of Oklahoma Coll of Med Dept of Urology
920 Stanton L Young Blvd MS2330
PO Box 2500
Oklahoma City, OK 73190
405-271-6900

Length: 3 Year(s) Total Positions: 9 (GYT: 3)
Program ID: 480-38-21-123

Oregon

Portland

Oregon Health Sciences University Program
Oregon Health Sciences University Hospital
Kaiser Permanente-NW Region
Veterans Affairs Medical Center (Portland)

Program Director:
John M Barry, MD
Oregon Health Sciences University
3181 SW Sam Jackson Park Rd
Portland, OR 97201-3000
503-494-9470

Length: 4 Year(s) Total Positions: 12 (GYT: 2)
Program ID: 480-40-21-124

Pennsylvania

Danville

Geisinger Medical Center Program
Geisinger Medical Center

Program Director:
Joseph J Mowad, MD
Geisinger Medical Center
Dept of Urology
Danville, PA 17822
717-371-0767

Length: 4 Year(s) Total Positions: 6 (GYT: 1)
Program ID: 480-41-11-125

Hershey

Milton S Hershey Medical Center of Pennsylvania State University Program
Penn State University Hospital Milton S Hershey Med Ctr
Lancaster General Hospital
Veterans Affairs Medical Center (Lebanon)

Program Director:
Thomas J Rothner Jr, MD
Div of Urology
University Hospital
PO Box 660
Hershey, PA 17033
717-531-9849

Length: 4 Year(s) Total Positions: 12 (GYT: 2)
Program ID: 480-41-21-127

Philadelphia

Temple University Program
Temple University Hospital
Abington Memorial Hospital
Fox Chase Cancer Center
St Christopher's Hospital for Children

Program Director:
Philip M Hanno, MD
3 Parkinson Pavilion
Temple University Hospital
Broad & Tioga Sts
Philadelphia, PA 19140
215-707-4446

Length: 4 Year(s) Total Positions: 8 (GYT: 0)
Program ID: 480-41-21-132

Thomas Jefferson University Program
Thomas Jefferson University Hospital
Alfred I Dupont Institute of the Nemours Foundation
Bryn Mawr Hospital
Veterans Affairs Medical Center (Wilmington)

Program Director:
S Grant Mulholland, MD
Thomas Jefferson University Hospital Dept of Urology
1315 Walnut St 1113 College Bldg
Philadelphia, PA 19107
215-955-6961

Length: 4 Year(s) Total Positions: 4 (GYT: 0)
Program ID: 480-41-21-133

University of Pennsylvania Program
University of the Pennsylvania Hospital
Children's Hospital of Philadelphia
Pennsylvania Hospital
Veterans Affairs Medical Center (Philadelphia)

Program Director:
Alan J Wein, MD
Hospital of the University Pennsylvania
Div of Urology
3400 Spruce St St Silverstein
Philadelphia, PA 19104
215-662-3991

Length: 4 Year(s) Total Positions: 12 (GYT: 0)
Subspecialties: UP
Program ID: 480-41-21-134

* Updated information not provided.
Pittsburgh
University Health Center of Pittsburgh
Program
University Health Center of Pittsburgh
Allegheny General Hospital
Children's Hospital of Pittsburgh
Methodist University Hospital (UPMC)
Presbyterian University Hospital/UPMC
Veterans Affairs Medical Center (Pittsburgh)
Program Director:
Thomas R. Rabie, MD
University of Pittsburgh Dept of Urology
Ste #700
3471 Fifth Ave
Pittsburgh, PA 15213
412 692-4892
Length: 4 Year(s)
Total Positions: 8 (GYI: 0)
Program ID: 480-41-21-135

Puerto Rico
San Juan
University of Puerto Rico Program
University of Puerto Rico School of Medicine
University Hospital
Veterans Affairs Medical Center (San Juan)
Program Director:
Antonio Parra-Dacar, MD
Universidad De Puerto Rico Apartado 5067
Recinto de Ciencias Medicas
San Juan, PR 00936
389 788-2325
Length: 3 Year(s)
Program ID: 490-42-31-138

Rhode Island
Providence
Brown University Program
Rhode Island Hospital
Roger Williams Medical Center
Veterans Affairs Medical Center (Providence)
Program Director:
Anthony A Caldamone, MD
Rhode Island Hospital
593 Eddy St
Providence, RI 02903
401 444-5785
Length: 2 Year(s)
Total Positions: 8 (GYI: 0)
Program ID: 490-45-31-139

South Carolina
Charleston
Medical University of South Carolina
Program
Medical University of South Carolina College of Medicine
Charleston Memorial Hospital
MUSC Medical Center
Veterans Affairs Medical Center (Charleston)
Program Director:
William R Turner Jr, MD
Medical University of South Carolina
171 Ashley Ave
Charleston, SC 29425
803 792-4531
Length: 3 Year(s)
Total Positions: 10 (GYI: 2)
Program ID: 480-45-21-140

Tennessee
Memphis
University of Tennessee Program
University of Tennessee College of Medicine
LeBonheur Children's Medical Center
Regional Medical Center at Memphis
University of Tennessee Medical Center
Veterans Affairs Medical Center (Memphis)
Program Director:
Clay E Cox, MD
University of Tennessee Medical Center
Dept of Urology
955 Court Ave RM 2115
Memphis, TN 38163
901 528-5868
Length: 4 Year(s)
Total Positions: 20 (GYI: 3)
Subspecialties: UP
Program ID: 480-47-21-141

Nashville
Vanderbilt University Program
Vanderbilt University Medical Center
Baptist Hospital
Veterans Affairs Medical Center (Nashville)
Program Director:
Fred K Kirchner Jr, MD
Vanderbilt University Medical Center
Dept of Urology
M4024
21st & Garland Ave
Nashville, TN 37232-2755
615 322-2142
Length: 4 Year(s)
Total Positions: 8 (GYI: 0)
Program ID: 490-47-21-142

Texas
Dallas
University of Texas Southwestern Medical School Program
University of Texas Southwestern Medical School
Baylor University Medical Center
Children's Medical Center of Dallas
Dallas County Hospital District-Parkland Hospital
Veterans Affairs Medical Center (Dallas)
Program Director:
John D McConnell, MD
University of Texas Southwestern Medical School
5323 Harry Hines Blvd
Dallas, TX 75235-8110
214 648-2545
Length: 4 Year(s)
Total Positions: 16 (GYI: 0)
Program ID: 480-48-31-143

Galveston
University of Texas Medical Branch Hospitals Program
University of Texas Medical Branch Hospitals
Program Director:
Michael M Warren, MD
Div of Urology 6.310 Old John Sealy Hospital
University of Texas Medical Branch
Galveston, TX 77555-6040
409 772-2691
Length: 4 Year(s)
Total Positions: 6 (GYI: 0)
Program ID: 480-48-11-144

Houston
Baylor College of Medicine Program
Baylor College of Medicine
Harris County Hospital District-Ben Taub General Hospital
Methodist Hospital
St Luke's Episcopal Hospital
Texas Children's Hospital
Veterans Affairs Medical Center (Houston)
Program Director:
Peter T Scardino, MD
Baylor College of Medicine
Dept of Urology
6550 Fannin Ste 1015
Houston, TX 77030
713 798-6153
Length: 4 Year(s)
Total Positions: 16 (GYI: 0)
Subspecialties: UP
Program ID: 480-48-21-145

University of Texas at Houston Program
University of Texas Medical School at Houston
Hermann Hospital
Lyndon B Johnson General Hospital
St Joseph Hospital
University of Texas M D Anderson Cancer Center
Program Director:
Edward J McBride, MD
University of Texas Medical School at Houston
6433 Fannin Ste 6018
Houston, TX 77030
713 787-5640
Length: 4 Year(s)
Total Positions: 16 (GYI: 0)
Program ID: 480-48-21-146

Lackland AFB
Joint Military Medical Centers-San Antonio Program
Wilford Hall USAF Medical Center (SG)
Brooke Army Medical Center
Program Director:
Maj Samuel Jay Peretzman, MD
Wilford Hall Medical Center/PSSU
2000 Bergquist Dr Ste 1
Lackland AFB
San Antonio, TX 78236-5800
210 637-7658
Length: 4 Year(s)
Total Positions: 15 (GYI: 0)
Program ID: 480-48-21-170

San Antonio
University of Texas Health Science Center at San Antonio Program
University of Texas Medical School at San Antonio
Audie L Murphy Memorial Veterans Hospital (San Antonio)
San Antonio Regional Hospital
Santa Rosa Health Care Corporation
University Hospital-South Texas Medical Center
Program Director:
Michael P Sarzowy, MD
University of Texas Health Science Center
Div of Urology
7703 Floyd Curl Dr
San Antonio, TX 78284-7845
210 567-5540
Length: 4 Year(s)
Total Positions: 10 (GYI: 0)
Program ID: 480-48-21-147
Accredited Programs in Urology

Temple
Texas A&M College of Medicine-Scott and White Program
Scott and White Memorial Hospital
Olin E Teague Veterans Center
Program Director:
Richard G Kilgo, MD
Texas A&M-Scott and White
Graduate Med Educ
2401 S 31st St
Temple, TX 76508-0001
800 290-4463
Length: 4 Year(s) Total Positions: 6 (GYT: 1)
Program ID: 480-48-21-148

Norfolk
Eastern Virginia Graduate School of Medicine Program
Eastern Virginia Graduate School of Medicine
Children's Hospital of the King's Daughters
Sentara Norfolk General Hospital
Program Director:
Paul F Schellhammer, MD
Eastern Virginia Graduate School of Medicine
Dep't of Urology
600 Granby St Ste 203
Norfolk, VA 23507
804 688-3671
Length: 3 Year(s) Total Positions: 4 (GYT: 0)
Program ID: 480-51-21-153

Utah
Salt Lake City
University of Utah Program
University of Utah Medical Center
LDS Hospital
Primary Children's Medical Center
Veterans Affairs Medical Center (Salt Lake City)
Program Director:
Richard G Middleton, MD
University of Utah Medical Center
Urology Div
55 N Medical Dr
Salt Lake City, UT 84132
801 581-4793
Length: 3 Year(s) Total Positions: 8 (GYT: 2)
Program ID: 480-49-51-149

Vermont
Burlington
Medical Center Hospital of Vermont Program
Medical Center Hospital of Vermont
Panny Allen Hospital
Program Director:
Samuel J Trotter, MD
Urology Associates Inc
371 Pearl St
Burlington, VT 05401
802 863-2504
Length: 2 Year(s) Total Positions: 3 (GYT: 0)
Program ID: 480-52-21-150

Virginia
Charlottesville
University of Virginia Program
University of Virginia Medical Center
Veterans Affairs Medical Center (Salem)
Program Director:
Jag V Gillenwater, MD
University of Virginia School of Medicine
Dep't of Urology Box 422
Charlottesville, VA 22908
804 924-2224
Length: 3 Year(s) Total Positions: 14 (GYT: 5)
Program ID: 480-51-21-151

Richmond
Medical College of Virginia/Virginia Commonwealth University Program
Medical College of Virginia/Virginia Commonwealth University
Hunter Holmes McGuire VA Medical Center (Richmond)
Medical College of Virginia Hospital
Program Director:
C M Karloch Nelson, MD
MCV/Virginia Commonwealth Univ
PO Box 980118
Richmond, VA 23298-0118
804 357-1618
Length: 2 Year(s) Total Positions: 10 (GYT: 2)
Program ID: 480-52-21-154

Washington
Seattle
University of Washington Program
University of Washington School of Medicine
Children's Hospital and Medical Center
Harborview Medical Center
University of Washington Medical Center
Veterans Affairs Medical Center (Seattle)
Virginia Mason Medical Center
Program Director:
Michael P Mayo, MD
University of Washington
Dept of Urology Box 359927
1988 NE Pacific St
Seattle, WA 98195
206 543-4886
Length: 4 Year(s) Total Positions: 12 (GYT: 2)
Program ID: 480-54-21-155

Wisconsin
Madison
University of Wisconsin Program
University of Wisconsin Hospital and Clinics
Morrison Hospital
St Mary's Hospital Medical Center
William S Middleton Veterans Hospital
Program Director:
David T Ullinger, MD
University of Wisconsin Hospital and Clinics
600 Highland Ave E Rm 605
Madison, WI 53792
608 255-1358
Length: 3 Year(s) Total Positions: 10 (GYT: 2)
Program ID: 480-54-21-156

Milwaukee
Medical College of Wisconsin Program
Medical College of Wisconsin Affiliated Hospitals Inc
Children's Hospital of Wisconsin
Clement J Zablocki Veteran Affairs Medical Center
 Froedtert Memorial Lutheran Hospital
John J Doyne Hospital
Program Director:
Russell K Lawson, MD
Froedtert Hospital and Cancer Center
5200 W Wisconsin Ave
Milwaukee, WI 53226
414 258-2705
Length: 3 Year(s) Total Positions: 10 (GYT: 2)
Program ID: 480-54-21-159

Tacoma
Madigan Army Medical Center Program
Madigan Army Medical Center
Program Director:
Col John N Wetlauffer, MD
Commander
Madigan Army Medical Center
Attn: HSHTSU
Tacoma, WA 98431-5000
256 969-5000
Length: 3 Year(s) Total Positions: 4 (GYT: 0)
Program ID: 480-54-21-157

West Virginia
Morgantown
West Virginia University Program*
West Virginia University Hospitals
Louis A Johnson Veteran Affairs Medical Center
Ohio Valley Medical Center
Program Director:
Stanley J Kandzari, MD
Robert C Byrd Health Sciences Center of West Virginia Univ
Dept of Urology
PO Box 9251
Morgantown, WV 26506-9251
304 293-2705
Length: 4 Year(s) Total Positions: 8 (GYT: 0)
Program ID: 480-55-21-157

* Updated information not provided.

824 Graduate Medical Education Directory
Vascular and Interventional Radiology (Radiology-Diagnostic)

Alabama

Birmingham

University of Alabama Medical Center Program
University of Alabama Hospital Veterans Affairs Medical Center (Birmingham)
Program Director:
S粨heil Sadekri, MD
University of Alabama Medical Center
619 11th St. N., Ste. 553
Birmingham, AL 35233
205-975-4850
Length: 1 Year(s)
Total Positions: 2
Program ID: 427-01-21-054

Arkansas

Little Rock

University of Arkansas for Medical Sciences Program*
University of Arkansas College of Medicine
John L McClellan Memorial Veterans Hospital
University Hospital of Arkansas
Program Director:
David R. McFarland, MD
Dept of Radiology Ste 656
4301 W Markham St.
Little Rock, AR 72205
501-556-6961
Length: 1 Year(s)
Program ID: 427-06-21-007

California

Loma Linda

Loma Linda University Program
Loma Linda University Medical Center
Program Director:
Douglas C. Smith, MD
Dept of Radiology Loma Linda University Medical Center
11258 Anderson St.
Loma Linda, CA 92354
909-824-4370
Length: 1 Year(s)
Program ID: 427-05-21-026

Connecticut

New Haven

Yale-New Haven Medical Center Program
Yale-New Haven Hospital Veterans Affairs Medical Center (West Haven)
Program Director:
Jeffrey B. Pollak, MD
Dept of Radiology Yale-New Haven Hospital
30 York St.
New Haven, CT 06514
203-784-4746
Length: 1 Year(s)
Total Positions: 3
Program ID: 427-08-21-032

Florida

Gainesville

University of Florida Program*
University of Florida College of Medicine
Shands Hospital at the University of Florida
Veterans Affairs Medical Center (Gainesville)
Program Director:
Irvin F. Hawkins Jr., MD
Dept of Radiology
Box 100374, JHMHC
Gainesville, FL 32610-0374
904-365-0281
Length: 1 Year(s)
Program ID: 427-11-21-033

Miami

University of Miami Program*
Baptist Hospital of Miami
University of Miami-Jackson Memorial Medical Center
Program Director:
Gary J. Becker, MD
Dept of Radiology
1101 9th St., 7th Floor
Miami, FL 33136
305-358-5888
Length: 1 Year(s)
Program ID: 427-01-21-035

University of Miami-Jackson Memorial Medical Center Program
University of Miami-Jackson Memorial Medical Center
Program Director:
Jose M. Trani, MD
Dept of Radiology
1101 9th St., 7th Floor
Miami, FL 33136
305-358-5888
Length: 1 Year(s)
Total Positions: 3
Program ID: 427-11-31-028

Georgia

Atlanta

Emory University Program
Emory University School of Medicine
Emory University Hospital<br>Grady Memorial Hospital
Program Director:
Stephen L. Kaufman, MD<br>Emory University Hospital Dept of Radiology<br>Emory University Hospital<br>1364 Clifton Rd NE<br>Atlanta, GA 30322
404-777-7034
Length: 1 Year(s)
Total Positions: 4
Program ID: 427-12-21-032

* Updated information not provided.
Illinois

Chicago
McGaw Medical Center of Northwestern University Program
Northwestern University Medical School
Northwestern Memorial Hospital
Veterans Affairs Lakeside Medical Center (Chicago)
Program Director:
Robert D. Wexler, MD
Radiology Olson Pavilion
710 N Fairbanks Ct
Chicago, IL 60611
312-995-2112
Length: 1 Year(s) Total Positions: 3 (GYI: 3)
Program ID: 427-19-01-064

Rush-Presbyterian-St Luke's Medical Center Program*
Rush-Presbyterian-St Luke's Medical Center
Program Director:
Terence A S Matalon, MD
Rush-Presbyterian-St Luke's Medical Center
1650 W Congress Pwky
Chicago, IL 60612
312-942-5761
Length: 1 Year(s) Total Positions: 1
Program ID: 427-18-21-028

Indiana

Indianapolis
Indiana University Medical Center Program
Indiana University Medical Center
Program Director:
Veronica J Harris, MD
Dept of Radiology UI 0379
Indiana University Hospitals
550 N University Blvd
Indianapolis, IN 46202-5253
317-274-1840
Length: 1 Year(s) Total Positions: 3
Program ID: 427-17-21-010

Methodist Hospital of Indiana Program
Methodist Hospital of Indiana
Program Director:
Karen Ehrman, MD
Methodist Hospital of Indiana
Dept of Radiology 1-65 at 21st St PO Box 1387
Indianapolis, IN 46206-1387
317-928-3877
Length: 1 Year(s) Total Positions: 1
Program ID: 427-17-21-087

Maryland

Baltimore
Johns Hopkins University Program
Johns Hopkins University School of Medicine
Johns Hopkins Hospital
Program Director:
Floyd A 9eorman, MD
Scott J Savader, MD
The Johns Hopkins Hospital
600 N Wolfe St
Bldg 545
Baltimore, MD 21287-3191
410-955-9877
Length: 1 Year(s) Total Positions: 8
Program ID: 427-23-21-011

University of Maryland Program*
University of Maryland Medical System
Veterans Affairs Medical Center (Baltimore)
Program Director:
S Ghelt Pau, MD
University of Maryland Medical System
22 S Greene St
Baltimore, MD 21201
410-288-3142
Length: 1 Year(s)
Program ID: 427-23-21-068

Massachusetts

Boston
Beth Israel Hospital/Harvard Medical School Program
Beth Israel Hospital
Program Director:
Dack Kim, MD
Dir of Radiology
Beth Israel Hospital
339 Brookline Ave
Boston, MA 02215
617-732-2101
Length: 1 Year(s) Total Positions: 1
Program ID: 427-23-21-046

Boston University Program
Boston City Hospital
Program Director:
E Kent Yocule, MD
Dept of Radiology
Boston University Medical Center
88 E Newton St
Boston, MA 02118-3869
617-638-6035
Length: 1 Year(s) Total Positions: 1
Program ID: 427-23-21-060

Brigham and Women's Hospital/Harvard Medical School Program*
Brigham and Women's Hospital
Program Director:
Krishna Kandarpa, MD
Michael F Meyerowitz, MD
Dept of Radiology
Brigham and Women's Hospital
75 Francis St
Boston, MA 02115
617-722-7221
Length: 1 Year(s)
Program ID: 427-24-21-005

New England Deaconess Hospital/Harvard Medical School Program*
New England Deaconess Hospital
Dana-Farber Cancer Institute
Program Director:
Kenneth Bokas, MD
New England Deaconess Hospital
Dept of Vascular/Interventional Radiol
165 Pilgrim Rd
Boston, MA 02215
617-722-8460
Length: 1 Year(s)
Program ID: 427-24-21-062

Worcester

University of Massachusetts Medical Center Program*
University of Massachusetts Medical Center
Program Director:
David A Phillips, MD
University of Massachusetts Medical Center
55 Lake Ave N
Worcester, MA 01655
508-856-1512
Length: 1 Year(s)
Program ID: 427-24-31-052

Michigan

Ann Arbor
University of Michigan Program
University of Michigan Hospitals
Veterans Affairs Medical Center (Ann Arbor)
Program Director:
Kyoung J Cho, MD
University of Michigan Hospitals
Dept of Radiology B1-D350
Ann Arbor, MI 48109-0060
313-936-4481
Length: 1 Year(s) Total Positions: 3
Program ID: 427-25-21-035

Minnesota

Minneapolis
University of Minnesota Program*
University of Minnesota Medical School
Hennepin County Medical Center
University of Minnesota Hospital and Clinic
Veterans Affairs Medical Center (Minneapolis)
Program Director:
David W Hunter, MD
Dept of Radiology Box 292 UMHC
Univ of Minnesota Hosp and Clinics
420 Delaware St NE
Minneapolis, MN 55455
Length: 1 Year(s)
Program ID: 427-24-21-008

* Updated information not provided.
Missouri

St Louis

Washington University Program
Washington University School of Medicine
Barnes Hospital
Mallinckrodt Institute of Radiology
St Louis Children's Hospital
Program Director:
Daniel Picus, MD
Mallinckrodt Institute of Radiology
510 S Kingshighway Blvd
St Louis, MO 63110
314-362-2800
Length: 1 Year(s) Total Positions: 5
Program ID: 427-39-21-001

Nebraska

Omaha

University of Nebraska Program
University of Nebraska Medical Center
Program Director:
Timothy C McCowan, MD
Dept of Radiology
University of Nebraska Med Center
600 S 42nd St
Omaha, NE 68137-0243
402-559-6800
Length: 1 Year(s) Total Positions: 1
Program ID: 427-39-21-014

New York

Bronx

Albert Einstein College of Medicine Program*
Albert Einstein College of Medicine of Yeshiva University Montefiore Medical Center Henry and Lucy Moses Division
Program Director:
Seymour Sprayregen, MD
Curtis W Baks, MD
Albert Einstein College of Medicine (W Campus)
Dept of Radiology
111 E 210th St
Bronx, NY 10467
718-997-4200
Length: 1 Year(s)
Program ID: 427-39-33-027

New Hyde Park

Albert Einstein College of Medicine at Long Island Jewish Medical Center Program
Long Island Jewish Medical Center
Program Director:
Jon J Lee, MD
George Pillapai, MD
Long Island Jewish Medical Center
Dept of Radiology
270-05 76th Ave
New Hyde Park, NY 11040
718-470-7175
Length: 1 Year(s) Total Positions: 1
Program ID: 427-39-31-024

New York

Mount Sinai School of Medicine Program**
Mount Sinai School of Medicine
Program Director:
Harold A Mitsui, MD
Dept of Radiology
Mount Sinai Hospital
One Gustave L Levy Pl
New York, NY 10029
212-241-7417
Length: 1 Year(s)
Program ID: 427-39-21-049

New York Hospital/Cornell Medical Center Program
New York Hospital
Memorial Sloan Kettering Cancer Center
Program Director:
Thomas A Suen, MD
The New York Hospital-Cornell Center Rm L-515
525 E 65th St
New York, NY 10021
212-746-2500
Length: 1 Year(s) Total Positions: 4 (GY: 0)
Program ID: 427-39-21-039

Presbyterian Hospital in the City of New York Program*
Presbyterian Hospital in the City of New York
Program Director:
Eric C Martin, MD
Columbia-Presbyterian Medical Center PHL3W
Vascular/Interventional Radiology
622 W 168th St
New York, NY 10032
212-305-6070
Length: 1 Year(s)
Program ID: 427-39-21-021

Rochester

University of Rochester Program*
Strong Memorial Hospital of the University of Rochester
Program Director:
Oscar H Gutierrez, MD
601 Elmwood Ave
Rochester, NY 14642-8649
716-275-4002
Length: 1 Year(s)
Program ID: 427-39-21-051

North Carolina

Chapel Hill

University of North Carolina Hospitals Program
University of North Carolina Hospitals
Program Director:
Paul F Jaques, MD
Vascular/Interventional Radiology Section
University of North Carolina Hospitals
701 S. LEE ST
Chapel Hill, NC 27599-7610
919-843-2197
Length: 1 Year(s)
Program ID: 427-39-21-049

Winston-Salem

Bowman Gray School of Medicine Program
North Carolina Baptist Hospital
Program Director:
William Douglas Reuth, MD
Bowman Gray School of Medicine
Medical Center Blvd
Winston-Salem, NC 27157-1888
919-716-4435
Length: 1 Year(s) Total Positions: 1
Program ID: 427-39-21-015

Ohio

Cleveland

Case Western Reserve University Program
University Hospitals of Cleveland
Program Director:
Peter R Sachs, MD
Dept of Radiology
University Hospitals of Cleveland
11100 Euclid Ave
Cleveland, OH 44106-5900
216-844-3113
Length: 1 Year(s) Total Positions: 1
Program ID: 427-39-21-012

Cleveland Clinic Foundation Program
Cleveland Clinic Foundation
Program Director:
Michael A Geisinger, MD
Cleveland Clinic Foundation
6500 Royal Ave HHS
Cleveland, OH 44195
216-444-6664
Length: 1 Year(s) Total Positions: 2
Program ID: 427-39-21-002

Oklahoma

Oklahoma City

University of Oklahoma Health Sciences Center Program
University of Oklahoma College of Medicine-Oklahoma City
Children's Hospital of Oklahoma
University Hospital and Clinics
Veterans Affairs Medical Center (Oklahoma City)
Program Director:
Tim Tye, MD
Dept of Radiological Sciences
PO Box 2800
Oklahoma City, OK 73190-3020
405-271-6125
Length: 1 Year(s) Total Positions: 1 (GY: 1)
Program ID: 427-39-31-030

* Updated information not provided.
Pennsylvania

Hershey

Milton S Hershey Medical Center of Pennsylvania State University Program*
Penn State University Hospital-Milton S Hershey Med Ctr
Program Director: John P Cardella, MD
Milton S Hershey Medical Center
PO Box 659
Hershey, PA 17033
717 531-5415
Length: 1 Year(s) Total Positions: 1
Program ID: 427-41-004

Philadelphia

Thomas Jefferson University Program*
Thomas Jefferson University Hospital
Program Director: Geoffrey A Gardner Jr, MD
Thomas Jefferson University Hospital
111 S 11th St Ste 5300 Gibbon
Philadelphia, PA 19107
215 898-5182
Length: 1 Year(s)
Program ID: 427-41-040

University of Pennsylvania Program
Hospital of the University of Pennsylvania
Veterans Affairs Medical Center (Philadelphia)
Program Director: Michael J Pentecost, MD
University of Pennsylvania Medical Center
Dept of Radiology
3400 Spruce St
Philadelphia, PA 19104
215 662-3962
Length: 1 Year(s) Total Positions: 4
Program ID: 427-41-016

Pittsburgh

Western Pennsylvania Hospital Program
Western Pennsylvania Hospital
Program Director: Gordon K McLean, MD
Western Pennsylvania Hospital
Dept of Radiology
4800 Friendship Ave
Pittsburgh, PA 15224
412 578-1767
Length: 1 Year(s) Total Positions: 2 (GYI: 0)
Program ID: 427-41-044

South Carolina

Charleston

Medical University of South Carolina Program*
Medical University of South Carolina College of Medicine
MUSC Medical Center
Program Director: Ivan Vujic, MD
Medical University of South Carolina
171 Ashley Ave
Charleston, SC 29425-8737
803 792-5387
Length: 1 Year(s)
Program ID: 427-45-066

Tennessee

Memphis

University of Tennessee Program
University of Tennessee College of Medicine
Regional Medical Center at Memphis
University of Tennessee Medical Center
Program Director: Morris L Gavant, MD
Robert E Gold, MD
Univ of Tennessee Memphis
Dept of Radiology
800 Madison Ave Rm P150C Chandler
Memphis, TN 38163
901 448-5248
Length: 1 Year(s) Total Positions: 2
Program ID: 427-47-019

Texas

Dallas

Baylor University Medical Center Program
Baylor University Medical Center
Program Director: Frank Rivera, MD
Dept of Vascular/Interventional Radiology
3500 Gaston Ave
Dallas, TX 75246
214 893-5206
Length: 1 Year(s) Total Positions: 1
Program ID: 427-48-043

University of Texas Southwestern Medical School Program
University of Texas Southwestern Medical School
Dallas County Hospital District-Parkland Memorial Hospital
Zale-Lipshy University Hospital
Program Director: George L Miller III, MD
Dept of Radiology
University of Texas Southwestern
5333 Harry Hines Blvd
Dallas, TX 75235-8816
214 648-6102
Length: 1 Year(s) Total Positions: 1
Program ID: 427-48-003

Lackland AFB

Wilford Hall USAF Medical Center Program
Wilford Hall USAF Medical Center (SG)
Program Director: John R Leyendecker, MD
Wilford Hall Medical Center
WHIMC/PSKD
2200 Bergquist Dr Ste 1
Lackland AFB, TX 78236-5300
210 690-5056
Length: 1 Year(s) Total Positions: 1
Program ID: 427-49-006

San Antonio

University of Texas Health Science Center at San Antonio Program
University of Texas Medical School at San Antonio
Audie L Murphy Memorial Veteran's Hospital (San Antonio)
University Hospital-South Texas Medical Center
Program Director: Julio C Palma, MD
The University of Texas Health Science Center
Radiology-Vascular & Interventional
7700 Floyd Curl Dr
San Antonio, TX 78284-7890
210 567-5941
Length: 1 Year(s) Total Positions: 2
Program ID: 427-48-031

Utah

Salt Lake City

University of Utah Program
University of Utah Medical Center
Veterans Affairs Medical Center (Salt Lake City)
Program Director: Franklin J Miller Jr, MD
University of Utah School of Medicine
50 N Medical Dr
Salt Lake City, UT 84122
801 581-7553
Length: 1 Year(s) Total Positions: 2 (GYI: 2)
Program ID: 427-49-044

Virginia

Alexandria

George Washington University Program
Alexandria Hospital
Program Director: Arina van Breda, MD
Alexandria Hospital
4500 Seminary Rd
Alexandria, VA 22304
703 504-3102
Length: 1 Year(s) Total Positions: 2
Program ID: 427-51-024

Washington

Seattle

University of Washington Program
University of Washington School of Medicine
Harborview Medical Center
University of Washington Medical Center
Veterans Affairs Medical Center (Seattle)
Program Director: Douglas M Coldwell, MD
Dept of Radiology SB-05
University of Washington
1600 NE Pacific St
Seattle, WA 98195
206 543-3035
Length: 1 Year(s)
Program ID: 427-54-047

* Updated information not provided.
Vascular Surgery (Surgery-General)

Arizona

Tucson

University of Arizona Program
University of Arizona College of Medicine
Program Director:
Joseph L. Mills, MD
University of Arizona Health Sciences Center
Section of Vascular Surgery
1591 N Campbell Ave Rm 5406
Tucson, AZ 85724
602-626-9670
Length: 1 Year(s)  Total Positions: 2
Program ID: 450-03-21-082

Arkansas

Little Rock

University of Arkansas for Medical Sciences Program
University of Arkansas College of Medicine
John L. McClellan Memorial Veterans Hospital
University Hospital of Arkansas
Program Director:
John F. Eich, MD
University of Arkansas for Medical Sciences
4301 W Markham St Slot 8530
Little Rock, AR 72205
501-686-6045
Length: 1 Year(s)  Total Positions: 2
Program ID: 450-04-21-066

California

Loma Linda

Loma Linda University Program
Loma Linda University Medical Center
Program Director:
T J Bunt, MD
Loma Linda University Medical Center
11294 Anderson Rd 2573
Loma Linda, CA 92354
909-824-4385
Length: 1 Year(s)  Total Positions: 1
Program ID: 450-05-21-010

Los Angeles

UCLA Medical Center Program*
UCLA School of Medicine
UCLA Medical Center
Program Director:
Wesley S. Moore, MD
UCLA Ctr for the Hlth Sci
UCLA School of Medicine
Dept of Surgery
Los Angeles, CA 90024-1749
213-825-9641
Length: 1 Year(s)  Total Positions: 1
Program ID: 450-05-21-011

San Francisco

University of California (San Francisco) Program
University of California (San Francisco) School of Medicine
University of California (San Francisco) Medical Center
Program Director:
Jerry Goldstone, MD
Box 0222 M-488
Univ of California (San Francisco)
565 Parnassus Ave
San Francisco, CA 94143-0222
415-778-2881
Length: 1 Year(s)  Total Positions: 2
Program ID: 450-05-21-089

Stanford

Stanford University Program
Stanford University Hospital
Program Director:
Christopher K. Wiznia, MD
Stanford University Medical Center
Div of Vascular Surgery
300 Pasteur Dr Dr 1400
Stanford, CA 94305-0450
415-723-7830
Length: 1 Year(s)  Total Positions: 2
Program ID: 450-05-21-021

Torrance

Los Angeles County-Harbor-UCLA Medical Center Program
Los Angeles County-Harbor-UCLA Medical Center
St Mary Medical Center
Program Director:
Rodney A. White, MD
Harbor-UCLA Medical Center
Box 11
1000 W Carson St
Torrance, CA 90509
310-223-2704
Length: 1 Year(s)  Total Positions: 1
Program ID: 450-05-21-067

Connecticut

Farmington

University of Connecticut Program
University of Connecticut School of Medicine
Hartford Hospital
Univ of Connecticut Health Center/John Dempsey Hospital
Program Director:
David A Dreuzen, MD FHM
Hartford Hospital
Dept of Surgery
PO Box 857
Hartford, CT 06192-5937
860-973-2840
Length: 1 Year(s)  Total Positions: 1
Program ID: 450-06-21-070

* Updated information not provided.
District of Columbia

Washington

Walter Reed Army Medical Center Program*
Walter Reed Army Medical Center
Program Director:
Lc Edward R Gomez, MD
Dept of Vascular Surgery Serv
Walter Reed Army Medical Center
6855 14th St NW
Washington, DC 20007-5901
202 576-2357
Length: 1 Year(s) Total Positions: 2
Program ID: 450-10-11-922

Florida

Gainesville

University of Florida Program
University of Florida College of Medicine
Shands Hospital at the University of Florida
Veterans Affairs Medical Center (Gainesville)
Program Director:
James M Seeger, MD
University of Florida
Dept of Surgery
Box 102965
Gainesville, FL 32610-0286
305 396-0630
Length: 1 Year(s) Total Positions: 2
Program ID: 450-11-21-044

Tampa

University of South Florida Program
University of South Florida College of Medicine
Tampa General Healthcare
Program Director:
Dennis Bandyk, MD
University of South Florida College of Medicine
Hebrewside Med Tower #700
4 Columbus Dr
Tampa, FL 33606
813 259-8031
Length: 1 Year(s) Total Positions: 2
Program ID: 450-11-21-091

Illinois

Chicago

McGaw Medical Center of Northwestern University Program
Northwestern University Medical School
Northwestern Memorial Hospital
Veterans Affairs Lakeside Medical Center (Chicago)
Program Director:
James S Y Yee, MD
Northwestern University Medical School
251 E Chicago
Ste 528
Chicago, IL 60611
312 996-2714
Length: 1 Year(s) Total Positions: 2
Program ID: 450-16-21-001

Rush-Presbyterian-St Luke's Medical Center Program
Rush-Presbyterian-St Luke's Medical Center
Program Director:
Hassan Nabi, MD
Rush-Presbyterian-St Luke's Medical Center
1653 W Congress Pl # 201 Jelke
Chicago, IL 60612-3804
312 942-6973
Total Positions: 1
Program ID: 450-16-21-067

University of Chicago Program
University of Chicago Hospitals
Program Director:
Bruce I Gewertz, MD
University of Chicago Medical Center
5841 S Maryland Ave MC 0028
Chicago, IL 60637-1470
312 702-0996
Length: 1 Year(s) Total Positions: 1
Program ID: 450-16-11-023

Maywood

Loyola University Program
Foster G McGaw Hospital-Loyola University of Chicago
Edward J Hines Jr Veterans Affairs Hospital
Program Director:
William R Baker, MD
Foster G McGaw Hospital
2160 S First Ave
Maywood, IL 60153
708 216-0187
Length: 1 Year(s) Total Positions: 1
Program ID: 450-16-21-002

Springfield

Southern Illinois University Program
Southern Illinois University School of Medicine
Memorial Medical Center
St John's Hospital
Program Director:
David S Summer, MD
Southern Illinois University School of Medicine
Memorial Medical Center
800 N Rutledge St 3rd Fl
Springfield, IL 62781
217 782-7804
Length: 1 Year(s) Total Positions: 2
Program ID: 450-16-21-094

Iowa

Iowa City

University of Iowa Hospitals and Clinics Program
University of Iowa Hospitals and Clinics
Program Director:
John D Corson, MB ChB
Dept of Surgery ISGT ACP
University of Iowa Hospitals
209 Hawkins Dr
Iowa City, IA 52242-1086
319 356-1639
Length: 1 Year(s) Total Positions: 2
Program ID: 450-18-21-048

Kansas

Kansas City

University of Kansas Medical Center Program
University of Kansas School of Medicine
University of Kansas Medical Center
Program Director:
James H Thomas, MD
University of Kansas College of Health Sciences and Hospital
9001 Rainbow Blvd
Kansas City, KS 66160-7385
913 588-6115
Length: 1 Year(s) Total Positions: 1
Program ID: 450-19-21-060

Kentucky

Lexington

University of Kentucky Medical Center Program
University Hospital Albert B Chandler Medical Center
Veterans Affairs Medical Center (Lexington)
Program Director:
Gordon L Hyde, MD
University Kentucky Medical Center
Div of General Surgery
Lexington, KY 40536-0084
606 332-8340
Length: 1 Year(s) Total Positions: 2
Program ID: 450-20-21-062

Louisiana

New Orleans

Alton Ochsner Medical Foundation Program
Alton Ochsner Medical Foundation
Program Director:
John C Bowen, MD
Alton Ochsner Med Pd
Dept of Graduate Med Educ
1516 Jefferson Hwy
New Orleans, LA 70121
504 842-4072
Length: 1 Year(s) Total Positions: 2
Program ID: 450-21-22-024

* Updated information not provided.

830 Graduate Medical Education Directory
Massachusetts

**Boston**

**Boston University Program**
Boston University Medical Center-University Hospital
Program Director:
James O. Menzoian, MD
Boston University Medical Center Hospital
88 E Newton St D-106
Boston, MA 02118
617 584-8451
Length: 1 Year(s) Total Positions: 1
Program ID: 460-24-21-093

**Brigham and Women’s Hospital Program**
Brigham and Women’s Hospital
Program Director:
Anthony D. Whitehouse, MD
Brigham and Women’s Hospital
75 Francis St
Boston, MA 02115
617 732-6816
Length: 1 Year(s) Total Positions: 1
Program ID: 460-24-21-093

**Massachusetts General Hospital Program**
Massachusetts General Hospital
Program Director:
William M. Abbott, MD
Massachusetts General Hospital
15 Parkman St WAC 458
Boston, MA 02114
617 726-8250
Length: 1 Year(s) Total Positions: 2
Program ID: 460-24-21-094

**New England Deaconess Hospital/Harvard Medical School Program**
New England Deaconess Hospital
Mount Auburn Hospital
Program Director:
Frank W. LoGerfo, MD
Harvard Surgical Service Deaconess Hospital
116 Francis St
Boston, MA 02215
617 632-9665
Length: 1 Year(s) Total Positions: 2
Program ID: 460-24-21-094

**New England Medical Center Hospitals Program**
New England Medical Center Hospitals
Program Director:
Thomas H. O’Donnell, Jr, MD
Box 260
New England Medical Center
350 Washington St
Boston, MA 02111
617 955-6660
Length: 1 Year(s) Total Positions: 2
Program ID: 460-24-21-096

Worcester

**University of Massachusetts Medical Center Program**
University of Massachusetts Medical Center
Program Director:
Bruce S Cutler, MD
Univ of Massachusetts Medical Center
155 Lake Ave N
Worcester, MA 01655
508 856-2319
Length: 1 Year(s) Total Positions: 2
Program ID: 460-35-21-013

Michigan

Ann Arbor

**University of Michigan Program**
University of Michigan Hospitals
Veterans Affairs Medical Center (Ann Arbor)
Program Director:
James C. Stanley, MD
University of Michigan Hospitals
1501 E Medical Center Dr
Ann Arbor, MI 48109-0293
313 936-3786
Length: 1 Year(s) Total Positions: 2
Program ID: 460-23-21-093

**Detroit**

**Henry Ford Hospital Program**
Henry Ford Hospital
Program Director:
Calvin B. Ernst, MD
Dept of Surgery-Vascular
Henry Ford Hospital
2790 W Grand Blvd
Detroit, MI 48202
313 871-1777
Length: 1 Year(s) Total Positions: 2
Program ID: 460-23-21-014

**Wayne State University/Detroit Medical Center Program**
Wayne State University School of Medicine
Harper Hospital
Program Director:
Ramon J. Rogen, MD
Wayne State University Div of Vascular Surgery
Harper Hospital
3900 John R
Detroit, MI 48201
313 745-9637
Length: 1 Year(s) Total Positions: 2
Program ID: 460-23-21-086

Minnesota

**Rochester**

**Mayo Graduate School of Medicine Program**
Mayo Graduate School of Medicine-Mayo Foundation
Mayo Clinic (Rochester)
Rochester Methodist Hospital
St Mary’s Hospital of Rochester
Program Director:
John W. Balint Jr, MD
MCG Application Processing Center
Mayo Graduate School of Medicine
200 First St SW
Rochester, MN 55905
507 284-8545
Length: 1 Year(s) Total Positions: 3
Program ID: 460-26-21-019

Missouri

**Columbia**

**University of Missouri-Columbia Program**
University of Missouri-Columbia School of Medicine
University and Children’s Hospital
Program Director:
Donald Silver, MD
University of Missouri-Columbia
M500 Univ Med Ctr
Columbia, MO 65212
314 882-8178
Length: 1 Year(s)
Program ID: 460-26-21-004

St Louis

**St Louis University Group of Hospitals Program**
St Louis University School of Medicine
St John’s Mercy Medical Center
St Louis University Hospital
Program Director:
Gary J Spear, MD
St Louis University School of Medicine
3636 Vista Ave at Grand Blvd
PO Box 15250
St Louis, MO 63110-0250
314 577-8310
Length: 1 Year(s) Total Positions: 1
Program ID: 460-26-21-027

**Washington University Program**
Barnes Hospital
Program Director:
Gregorio A. Ricard, MD
Vascular Surgery Ste 5103
One Barnes Hospital Plaza
St Louis, MO 63110
314 362-7941
Length: 1 Year(s) Total Positions: 2
Program ID: 460-26-21-050

* Updated information not provided.
### New Hampshire

#### Lebanon

**Dartmouth-Hitchcock Medical Center Program**
- **Program Director:** Jack L Cronenwett, MD
- **Program Director:** Mary Hitchcock Memorial Hospital, Veterans Affairs Medical Center (White River Junction)
- **Program Director:** Lebanon, NH 03756-001
  - 603-650-8190
- **Length:** 1 Year(s)  Total Positions: 2
- **Program ID:** 400-02-21-809

### New Jersey

#### Newark

**UMDNJ-New Jersey Medical School Program**
- **Program Director:** Robert W Hobson II, MD
- **Program Director:** UMDNJ-New Jersey Medical School
  - 185 S Orange Ave G-532
    - Newark, NJ 07103-2757
  - 201-982-6633
- **Length:** 1 Year(s)  Total Positions: 2
- **Program ID:** 400-02-21-809

#### Piscataway

**UMDNJ-Robert Wood Johnson Medical School Program**
- **Program Director:** Alan M Graham, MD
- **Program Director:** UMDNJ-Robert Wood Johnson Medical School
  - One Robert Wood Johnson Pl CN-10
    - New Brunswick, NJ 08903-0018
    - 908-235-7816
- **Length:** 1 Year(s)  Total Positions: 2
- **Program ID:** 400-02-21-809

### New York

#### Albany

**Albany Medical Center Program**
- **Program Director:** Dhiraj M Shah, MD
  - Albany Medical Center Hospital A-61
    - Dept of Surgery-Vascular
    - 41 New Scotland Ave
      - Albany, NY 12208-3578
    - 518-465-8900
- **Length:** 1 Year(s)  Total Positions: 2
- **Program ID:** 400-02-21-809

#### Bronx

**Albert Einstein College of Medicine Program**
- **Program Director:** Frank J Velith, MD
  - Montefiore Medical Center Albert Einstein Coll of Med
    - 111 E 210th St
      - Bronx, NY 10467
    - 718-200-6108
- **Length:** 1 Year(s)  Total Positions: 1
- **Program ID:** 400-35-21-815

#### Brooklyn

**Maimonides Medical Center Program**
- **Program Director:** Enrico Aser, MD
  - Maimonides Medical Center
    - Div of Vascular Surgery
    - 4802 Teft Ave
      - Brooklyn, NY 11219
    - 718-283-9687
- **Length:** 1 Year(s)  Total Positions: 1
- **Program ID:** 400-35-21-807

#### Buffalo

**SUNY at Buffalo Graduate Medical-Dental Education Consortium Program**
- **Program Director:** John J Ricotta, MD
  - SUNY at Buffalo Grad Medical-Dental Education Consortium
    - Buffalo General Hospital
      - Millard Fillmore Hospitals
        - Veterans Affairs Medical Center (Buffalo)
      - 3 Gates Circle
        - Buffalo, NY 14209
    - 716-887-5119
- **Length:** 1 Year(s)  Total Positions: 2
- **Program ID:** 400-35-21-809

#### New Hyde Park

**Albert Einstein College of Medicine at Long Island Jewish Medical Center Program**
- **Program Director:** Jon R Cohen, MD
  - Long Island Jewish Medical Center
    - Dept of Surgery
    - New Hyde Park, NY 11042
    - 718-470-7377
- **Length:** 1 Year(s)  Total Positions: 1
- **Program ID:** 400-35-21-864

### New York

#### New York

**Mount Sinai School of Medicine Program**
- **Program Director:** Julius H Jacobsen II, MD
  - Mount Sinai School of Medicine
    - One Gustave L Levy Pk
      - Box 1270
        - New York, NY 10029
    - 212-840-1007
    - **Length:** 1 Year(s)  Total Positions: 1
- **Program ID:** 400-35-21-805

#### New York University Medical Center Program**
- **Program Director:** Thomas S Riles, MD
  - New York University Medical Center
    - 550 First Ave
      - New York, NY 10016
    - 212-285-8312
    - **Length:** 1 Year(s)  Total Positions: 1
- **Program ID:** 400-35-21-045

#### Rochester

**University of Rochester Program**
- **Program Director:** Richard M Green, MD
  - Vascular Surgery
    - Univ of Rochester Medical Center
      - 601 Elmwood Ave
        - Rochester, NY 14642-8410
      - 716-275-8772
    - **Length:** 1 Year(s)  Total Positions: 1
- **Program ID:** 400-35-21-066

#### Stony Brook

**SUNY at Stony Brook Program**
- **Program Director:** Pablo Gilot, MD
  - SUNY at Stony Brook Div of Vascular Surgery
    - Hlth Sci Ctr T19
      - Stony Brook, NY 11794-5191
      - 516-444-2040
    - **Length:** 1 Year(s)  Total Positions: 1
- **Program ID:** 400-35-21-061

### North Carolina

#### Chapel Hill

**University of North Carolina Hospitals Program**
- **Program Director:** Blair A Reasy, MD
  - George Johnson Jr, MD
    - University of North Carolina School of Medicine
      - Dept of Vascular Surgery
        - CB# 7210 210 Burnett-Womack Bldg
          - Chapel Hill, NC 27599-7210
        - 919-966-3200
    - **Length:** 1 Year(s)  Total Positions: 2
- **Program ID:** 400-36-21-007

*Updated information not provided.*
Accredited Programs in Vascular Surgery (Surgery-General)

Charlotte
Carolinas Medical Center Program
Carolinas Medical Center
Program Director:
Francis Robbieta, MD
Dept of Cardiothoracic & Vascular Surgery
Carolinas Medical Center
PO Box 32861
Charlotte, NC 28222-2981
704 335-4905
Length: 1 Year(s) Total Positions: 2
Program ID: 450-39-21-008

Winston-Salem
Bowman Gray School of Medicine Program
North Carolina Baptist Hospital
Program Director:
Richard H Dean, MD
Bowman Gray School of Medicine
Dept of General Surgery
Medical Center Blvd
Winston-Salem, NC 27157
919 716-4443
Length: 1 Year(s) Total Positions: 2
Program ID: 404-36-21-073

Ohio

Cincinnati
Good Samaritan Hospital Program
Good Samaritan Hospital
Program Director:
Richard E Welting, MD
Good Samaritan Hospital
375 Dimmick Ave Srd Fl
Cincinnati, OH 45229-2499
513 872-3220
Length: 1 Year(s) Total Positions: 2
Program ID: 404-38-31-043

Cleveland
Case Western Reserve University Program
University Hospitals of Cleveland Metrolide Medical Center
Program Director:
Linda M Graham, MD
11100 Euclid Ave
Cleveland, OH 44106
216 844-9090
Length: 1 Year(s) Total Positions: 2
Program ID: 404-38-21-071

Cleveland Clinic Foundation Program
Cleveland Clinic Foundation
Program Director:
Leonard P Bajek, MD
Cleveland Clinic Foundation
8500 Euclid Ave TT32
Cleveland, OH 44195-5242
216 444-6990
Length: 1 Year(s) Total Positions: 3
Program ID: 404-38-22-045

Columbus
Ohio State University Program
Ohio State University Medical Center
Program Director:
William L Sneed, MD
Ohio State University
5170 Ohio Mall
Columbus, OH 43210-1228
614 293-6566
Length: 1 Year(s) Total Positions: 1
Program ID: 404-38-21-056

Oregon

Portland
Oregon Health Sciences University Program
Oregon Health Sciences University Hospital
Program Director:
John M Fordyce, MD
Oregon Health Science University
3181 SW Sam Jackson Park Rd OFFICE 11
Portland, OR 97201-3088
503 494-7483
Length: 1 Year(s) Total Positions: 1
Program ID: 404-40-21-009

Pennsylvania

Danville
Geisinger Medical Center Program
Geisinger Medical Center
Program Director:
Jerome B Yousko, MD
Geisinger Medical Center
North Academy Dr
Danville, PA 17822
717 271-8587
Length: 1 Year(s) Total Positions: 2
Program ID: 404-41-21-072

Hershey
Milton S Hershey Medical Center of Pennsylvania State University Program
Penn State University Hospital/Milton S Hershey Med Ctr
Program Director:
Robert G Aitip, MD
Dept of Surgery
Milton S Hershey Medical Center
PO Box 950
Hershey, PA 17033
717 531-5888
Length: 1 Year(s) Total Positions: 2
Program ID: 404-41-21-066

Philadelphia
MCPH/UHahnemann University Hospital Program
Hahnemann University Hospital
Crozer-Chester Medical Center
Program Director:
Tetsu Marumo, MD PhD
Hahnemann University Hospital
Broad & Vine St
MS 466
Philadelphia, PA 19102-1192
215 762-8181
Length: 1 Year(s) Total Positions: 2
Program ID: 404-41-21-063

Pennsylvania Hospital Program
Pennsylvania Hospital
Program Director:
Keith Calligraphy, MD
Pennsylvania Hospital
Section of Vascular Surgery
700 Spruce St Ste 101
Philadelphia, PA 19106-4014
215 829-5900
Length: 1 Year(s) Total Positions: 1
Program ID: 404-41-21-074

Temple University Program
Temple University Hospital
Program Director:
Anthony J Cenni, MD
Temple University
3401 N Broad St
Philadelphia, PA 19140
215 707-3222
Length: 1 Year(s) Total Positions: 1
Program ID: 404-41-21-054

University of Pennsylvania Program
University of Pennsylvania Hospital
Program Director:
Cynthia P Barker, MD
Hospital of the University of Pennsylvania
4 Silverstein
3400 Spruce St
Philadelphia, PA 19104-4283
215 662-6156
Length: 1 Year(s) Total Positions: 1
Program ID: 404-41-21-052

Tennessee

Knoxville
University of Tennessee Medical Center at Knoxville Program
University of Tennessee Graduate School of Medicine University of Tennessee Memorial Hospital
Program Director:
Mitchell H Goldman, MD
The University of Tennessee Medical Center
Dept of Surgery
1924 Alcoa Hwy
Knoxville, TN 37920
865 544-0204
Length: 1 Year(s) Total Positions: 2
Program ID: 404-47-21-075

Memphis
University of Tennessee Program*
University of Tennessee College of Medicine Baptist Memorial Hospital Veterans Affairs Medical Center (Memphis)
Program Director:
H Edward Garrett Jr, MD
Univ of Tennessee Ctr for the Hhsc Sci Div of Vascular Surgery
555 Court Ave Rm 2202
Memphis, TN 38163
901 577-4541
Length: 1 Year(s) Total Positions: 2
Program ID: 404-47-21-141

* Updated information not provided.
Accredited Programs in Vascular Surgery (Surgery-General)

Nashville

Vanderbilt University Program
Vanderbilt University Medical Center
St Thomas Hospital
Program Director:
William H. Edwards, Sr, MD
Vanderbilt University Hospital
Div of Vascular Surgery
2100 Pierce Ave #200 MCS
Nashville, TN 37232-3735
615-936-0160
Length: 1 Year(s)  Total Positions: 1
Program ID: 450-47-21-047

Texas

Dallas

Baylor University Medical Center Program
Baylor University Medical Center
Program Director:
C M “Mack” Talkington, MD
712 N Washington Ave
Ste 509
Dallas, TX 75246
214-632-7280
Length: 1 Year(s)  Total Positions: 2
Program ID: 450-48-21-028

University of Texas Southwestern Medical School Program
University of Texas Southwestern Medical School
Dallas County Hospital District-Parkland Memorial Hospital
Veterans Affairs Medical Center-Dallas
Zale-Lipshy University Hospital
Program Director:
G Patrick Chagast, MD
University of Texas Southwestern Medical School
5323 Harry Hines Blvd.
Dallas, TX 75235-8801
214-648-5516
Length: 1 Year(s)  Total Positions: 1
Program ID: 450-48-21-029

Houston

Baylor College of Medicine Program
Baylor College of Medicine
Methodist Hospital
Program Director:
Jimmy P Howell, MD
Baylor College of Medicine
One Baylor Plaza
Dept of Surgery 402D
Houston, TX 77030
713-798-6078
Length: 1 Year(s)  Total Positions: 6
Program ID: 450-48-21-016

Virginia

Norfolk

Eastern Virginia Graduate School of Medicine Program
Eastern Virginia Graduate School of Medicine
Sentara Norfolk General Hospital
Program Director:
Roger T Gregory, MD RVT
Ste 101 Brambleton Medical Center
250 W Brambleton Ave
Norfolk, VA 23510
804-622-5549
Length: 1 Year(s)  Total Positions: 2
Program ID: 450-51-21-018

Richmond

Medical College of Virginia/Virginia Commonwealth University Program
Medical College of Virginia/Virginia Commonwealth University
Hunter Holmes McGuire VA Medical Center (Richmond)
Medical College of Virginia Hospitals
Program Director:
H M Lee, MD
MCU/Virginia Commonwealth Univ
PO Box 960057
Richmond, VA 23298-4057
804-828-6313
Length: 1 Year(s)  Total Positions: 1
Program ID: 450-51-21-039

Washington

Seattle

University of Washington Program
University of Washington School of Medicine
University of Washington Medical Center
Veterans Affairs Medical Center (Seattle)
Program Director:
D Eugene Strandum, MD
University of Washington School of Medicine
Div of Vascular Surgery R25
Seattle, WA 98195
206-543-3653
Length: 1 Year(s)  Total Positions: 2
Program ID: 450-54-21-019

Wisconsin

Milwaukee

Medical College of Wisconsin Program
Medical College of Wisconsin Affiliated Hospitals Inc
John D. Oye Hospital
Program Director:
Jonathan B Towne, MD
Medical College of Wisconsin
8700 W Wisconsin Ave
Milwaukee, WI 53226
414-257-5616
Length: 1 Year(s)  Total Positions: 2
Program ID: 450-06-21-020

* Updated information not provided.
Section IV

Graduate Medical Education Teaching Institutions

Section IV lists hospitals and organizations that sponsor graduate medical education (GME) programs, serve as primary clinical sites, or participate in GME. Sponsoring institutions (formerly parent institutions) assume final responsibility for a GME program. Most GME programs are sponsored by specific clinical departments within a hospital, another health care institution such as a medical school, or an educational consortium. Primary clinical sites exist when the location of the primary teaching institution differs from that of the sponsoring institution. Participating institutions (formerly affiliated institutions) include hospitals or other sites recognized by at least one residency review committee as providing a major portion of required GME.

Separate listings for sponsoring institutions, primary clinical sites, and participating institutions are provided in alphabetical order by state and city. Each listing includes the institution name, address, and identification code. Also provided are codes of medical schools affiliated with each institution (where applicable) and abbreviations for the specialty and subspecialty programs sponsored by the institution. (A key for specialty and subspecialty abbreviation codes is provided in Appendix F.)

Candidates seeking a residency should refer to the list of programs in Section III. Applications for a residency position should be addressed to the program director rather than to an institution.

Relationships Between Hospitals and Medical Schools (Medical School Affiliation)

Hospitals that sponsor an accredited program are not required to have a formal relationship with a medical school. Where such a relationship exists, the affiliation is identified by the dean of the medical school as M (major), G (graduate only), or L (limited). The medical school associated with the code number in this listing is identified in Appendix F.

Major affiliation (M) signifies that an institution is an important part of the teaching program of the medical school and is a major unit in the clinical clerkship program. Major teaching institutions provide clerkship experience in two or more of the major specialties: internal medicine, surgery, pediatrics, and obstetrics-gynecology. An institution responsible for most of the teaching in a single specialty, such as psychiatry or pediatrics, may also be considered a major affiliation. In a major teaching institution, medical students serve clinical clerkships regularly on inpatient services, under the direct supervision of medical school faculty. A major teaching institution may or may not be used for medical school residencies.

Graduate affiliation (G) indicates that the institution is affiliated with the medical school only for its graduate programs and that one or more of the following arrangements is in effect:

1. House staff of the GME programs are selected by officials of a medical school department or by a joint committee of the institution teaching staff and medical school faculty.
2. Medical school faculty (other than the institution's attending staff) are regularly scheduled to participate in the teaching programs of the institution. No graduate affiliation is indicated if medical school faculty participation at the institution is limited to an occasional lecture or consultation visit, or if the institution's residents attend medical school teaching conferences only as visitors.
3. A contractual arrangement (with or without financial commitment) specifies the medical school participation in the organization and supervision of the GME program in the institution.
4. There is some degree of exchange of residents between this institution and the principal teaching institution of the medical school. Limited affiliation (L) signifies that the institution is affiliated with the medical school's teaching program only for brief and/or unique rotations of students or residents.
Sponsoring Institutions

Alabama

Birmingham

American Sports Medicine Institute
PO Box 500039
1313 13th St S
Birmingham, AL 35225-0039
Specialty: OSM
Institution ID: 01-8005

Birmingham Baptist Medical Centers Inc.
3500 Blue Lake Dr
PO Box 83665
Birmingham, AL 35203-0005
Specialty: DR, GS, IM, MDF, PTH, TY
Institution ID: 01-9519

Carraway Methodist Medical Center
1600 Carraway Blvd
Birmingham, AL 35234
Med Sch Affil: M-00102
Specialty: FP, GS, IM, OB/G, TY
Institution ID: 01-9182

Medical Center East
56 Medical Park East Dr
Birmingham, AL 35229-3499
Med Sch Affil: G-00102
Specialty: FP
Institution ID: 01-9510

University of Alabama Hospital
610 19th St S
Birmingham, AL 35233-6805
Med Sch Affil: M-00102
Specialty: AI, AN, BRR, CCM, CCP, CD, CHN, D, DMP, DR, END, FP, FM, FS, GS, HSO, ID, IM, IMM, N, NEP, NM, NP, NPSM, NS, OB/G, OM, OPH, ORS, ORS, OT, P, PCE, PD, PDB, PDB, PDS, PHO, PM, FS, PTH, PUD, RRU, RRQ, RO, TS, U, VIB
Institution ID: 01-9498

University of Alabama School of Medicine
MEB 301
CAB Station
Birmingham, AL 35294-3303
Med Sch Affil: M-00102
Specialty: FP
Institution ID: 01-9527

Huntsville

University of Alabama School of Medicine in Huntsville
100 Governors Dr SW
Huntsville, AL 35801
Specialty: FP
Institution ID: 01-9501

Mobile

Alabama Department of Forensic Sciences
PO Box 7925 Crichton Station
Mobile, AL 36697
Specialty: FODS
Institution ID: 01-9502

University of South Alabama Medical Center
3451 Fillingim St
Mobile, AL 36617-2293
Med Sch Affil: M-00106, L-0221
Specialty: AN, CD, CHN, CHP, DR, FP, GB, GS, HO, ID, IM, MDF, N, OB/G, ORS, P, PD, PDB, PDU, PTH
Institution ID: 01-9400

Selma

Four Rivers Medical Center
1015 Medical Center Pkwy
Selma, AL 36701
Med Sch Affil: G-00102
Specialty: FP
Institution ID: 01-9514

Tuscaloosa

University of Alabama College of Community Health Sciences
PO Box 780132
Tuscaloosa, AL 35487-0126
Med Sch Affil: M-00102
Specialty: FP
Institution ID: 01-9523

Arizona

Phoenix

Barrow Neurological Institute of St Joseph's Hosp & Med Ctr
260 W Thomas Rd
PO Box 2071
Phoenix, AZ 85001-2071
Specialty: CHN, N, NS
Institution ID: 09-9249

Good Samaritan Regional Medical Center
1111 E McDowell Rd
PO Box 52714
Phoenix, AZ 85062-2174
Med Sch Affil: M-00101
Specialty: CD, END, FP, GS, IM, MDF, OB/G, OB/G, P, PUD, TY
Institution ID: 03-9345

Maricopa Medical Center
2601 E Roosevelt
Phoenix, AZ 85008
Med Sch Affil: M-00101, L-02512
Specialty: EM, GS, HSO, IM, MDF, OB/G, OB/G, ORS, ORS, P, TY
Institution ID: 03-9253

Phoenix Baptist Hospital and Medical Center
Family Medicine Center
PO Box 11489
Phoenix, AZ 85063
Med Sch Affil: L-00001
Specialty: FP
Institution ID: 03-9317

Phoenix Children's Hospital
1800 N 12th St Ste 404
Phoenix, AZ 85006
Institution ID: 03-9415

St Joseph's Hospital and Medical Center
500 W Thomas Rd
PO Box 2071
Phoenix, AZ 85001-2071
Med Sch Affil: M-00101, L-04835
Specialty: DR, FP, IM, PDU, PTH, RNR
Institution ID: 03-9316

Scottsdale

Scottsdale Memorial Hospital
7400 E Osborn Rd
Scottsdale, AZ 85251-5772
Med Sch Affil: M-00106
Specialty: FP
Institution ID: 03-9412

Tucson

Tucson Hospitals Medical Education Program Inc
501 E Grant Rd
Box 42145
Tucson, AZ 85726
Specialty: IM, TY
Institution ID: 03-9417

University of Arizona College of Medicine
1501 N Campbell Ave
Tucson, AZ 85724-1111
Med Sch Affil: M-00301
Specialty: AN, CCA, CCP, CD, CHP, D, DR, EM, END, FP, FGF, GE, GPM, GS, HO, ID, IM, N, NER, NM, NNP, NR, OB/G, OM, OPH, ORS, P, POC, POC, PD, POC, PTH, PTH, RNR, RO, RS, S, U, VS
Institution ID: 03-9400

Arkansas

Little Rock

University of Arkansas
4301 W Markham St
Little Rock, AR 72205
Specialty: FP
Institution ID: 94-9018

University of Arkansas College of Medicine
4301 W Markham St
Little Rock, AR 72205-7199
Med Sch Affil: M-00401
Specialty: MPO
Institution ID: 09-9205

University of Arkansas School of Medicine
4301 W Markham St
Little Rock, AR 72205-7199
Med Sch Affil: M-00401
Specialty: AN, CCA, CCP, CD, CHP, D, DR, EM, END, FP, FGF, GE, GPM, GS, HO, ID, IM, N, NER, NM, NNP, NR, OB/G, OM, OPH, ORS, P, POC, POC, PD, POC, PTH, PTH, RNR, RO, RS, S, U, VS
Institution ID: 03-9400

California

Bakersfield

Bakersfield Medical Center
1800 Flower St
Bakersfield, CA 93305-4197
Med Sch Affil: L-00101, G-00518, G-00014
Specialty: EM, FP, GS, IM, OB/G, TY
Institution ID: 05-0120

Graduate Medical Education Directory
Berkeley
University of California School of Public Health
140 East Warren Hall
Berkeley, CA 94720-7360
Med Sch Afil: L-00302
Specialty: GIM
Institution ID: 05-0376

Camp Pendleton
Naval Hospital (Camp Pendleton)
Commanding Officer
Naval Hosp Attc: Dir of Med Servic
Box 555191
Camp Pendleton, CA 92055-5191
Med Sch Afil: L-02312, L-00518
Specialty: FP
Institution ID: 05-0320

Cerritos
FHP Southern California Region
18000 Studebaker Rd
Cerritos, CA 90701
Specialty: FP
Institution ID: 05-9877

Davis
University of California (Davis) School of Medicine
Health Sciences Dr
Davis, CA 95616
Med Sch Afil: M-00618, L-03212
Specialty: OM
Institution ID: 05-9602

Downey
LAC-Rancho Los Amigos Medical Center
7601 E Imperial Hwy
Downey, CA 90242
Med Sch Afil: M-00606, G-01401, G-00015
Specialty: OP
Institution ID: 05-0504

Duarte
City of Hope National Medical Center
1500 E Duarte Rd
Duarte, CA 91010-0269
Med Sch Afil: L-00615, L-00606, G-00518
Specialty: NMP
Institution ID: 05-0233

Fresno
UCSF-Fresno Medical Education Program
2615 E Clinton Ave
Fresno, CA 93703
Specialty: CD, DR, EM, FP, GS, IM, OB/G, P, PD, TY
Institution ID: 05-8501

Glendale
Glendale Adventist Medical Center
1509 Wilson Terrace
Glendale, CA 91206
Med Sch Afil: L-00512
Specialty: FP, OB/G
Institution ID: 05-0118

Inglewood
Kerlan-Jobe Orthopaedic Clinic
501 E Harvy St Ste 420
Inglewood, CA 90301
Specialty: OSM
Institution ID: 05-8067

Irvine
University of California (Irvine) College of Medicine
Irvine Hall 4A6g
Irvine, CA 92617-0689
Med Sch Afil: M-00615, L-03212
Specialty: OM
Institution ID: 05-0741

La Jolla
Scrivs Clinic and Research Foundation
Dept of Grad Med Educ 403C
10665 N Torrey Pines Rd
La Jolla, CA 92037-1030
Med Sch Afil: M-00618, G-00519
Specialty: AL, CD, EN, GE, EM, HMP, IM, ON, RHU
Institution ID: 06-0223

Loma Linda
Loma Linda University Community Hospital
23200 Burton Rd
Loma Linda, CA 92354
Med Sch Afil: M-00812
Specialty: FP
Institution ID: 05-8044

Loma Linda University Medical Center
11234 Anderson St
Loma Linda, CA 92354
Med Sch Afil: M-00812, L-03212
Specialty: AN, APM, CCP, CD, CHN, D, DR, EM, GE, GPM, GS, HSO, IM, MDA, N, NER, NPM, NS, OB/G, OPH
ORS, OTO, P, PD, PDE, FM, PN, FS, PTH, PUB, RBU, RDN, RS, T, U, V, VR
Institution ID: 05-0238

Long Beach
Long Beach Memorial Medical Center
2801 Atlantic Ave
PO Box 1423
Long Beach, CA 90801-1428
Med Sch Afil: M-00615, L-00514
Specialty: BBK, FP, OSM, PDP
Institution ID: 05-0195

St Mary Medical Center
1160 Linden Ave
Long Beach, CA 90813
Med Sch Afil: L-00514
Specialty: IM
Institution ID: 05-0267

Veterans Affairs Medical Center (Long Beach)
Long Beach Veterans Medical Center
5101 E 70th St
Long Beach, CA 90802
Med Sch Afil: M-00615
Specialty: NM
Institution ID: 05-0186

Los Angeles
California Medical Center (Los Angeles)
1401 S Grand Ave
Los Angeles, CA 90015-0001
Med Sch Afil: G-00564
Specialty: FP
Institution ID: 05-0231

Cedars-Sinai Medical Center
7600 Beverly Blvd
Los Angeles, CA 90048-1888
Med Sch Afil: M-00514, G-04518
Specialty: BBK, CCM, CD, CHF, DR, END, GS, HMP, HO, ID, IM, MFP, NER, NM, NPM, OB/G, P, PCC, PD, PN, PTH, PUB, RHU
Institution ID: 05-0645

Charles R Drew University of Medicine and Science
12821 S Wilshire Ave
Los Angeles, CA 90036
Med Sch Afil: M-00502
Specialty: AN, CD, DR, EM, FF, GS, IM, OB/G, OPH
ORS, OTO, P, PD, PUB
Institution ID: 05-0280

Childrens Hospital of Los Angeles
4650 Sunset Blvd
Los Angeles, CA 90027
Med Sch Afil: M-00806, G-00515, G-00511, G-00812
Specialty: AL, CCE, NPM, PD, PDE, PDE, PDP, PDR, PDS, PHO, PN, SP
Institution ID: 05-0344

County of Los Angeles-Department of Coroner
1104 N Mission Rd
Los Angeles, CA 90033
Specialty: PDP
Institution ID: 05-0553

Los Angeles County-USC Medical Center
1200 N State St
PO Box 540
Los Angeles, CA 90033-1084
Med Sch Afil: M-00606, G-01401
Specialty: AI, AND, BKB, CD, CHN, CHP, CRS, BS, D, DR, EM, END, GE, GS, HMP, HSO, ID, IM, MFP, NER, NM, OL, NPM, OPH, ORS, OTO, P, PCC, PD, PHO, PS, PTH, PUB, RBU, RNR, RO, TS, U, V, VIR
Institution ID: 05-0257

UCLA School of Medicine
10833 Le Conte Ave
Los Angeles, CA 90024
Med Sch Afil: L-00312
Specialty: AI, DR, EM, EN, F, GS, HMP, HSO, ID, IM, MFP, NER, NM, OL, NPM, OPH, ORS, OTO, P, PCC, PD, PHO, PS, PTH, PUB, RBU, RNR, RO, TS, U, V, VIR
Institution ID: 05-0257

UCLA School of Public Health
Dean's Office
15-053 CHS
10833 Le Conte Ave
Los Angeles, CA 90024-1772
Specialty: HMP
Institution ID: 05-0514

University of Southern California School of Medicine
1757 Zonal Ave KAM 500
Los Angeles, CA 90033
Med Sch Afil: M-00506
Specialty: UM
Institution ID: 05-0753
Veterans Affairs Medical Center (West Los Angeles)
11301 Wilshire Blvd
Los Angeles, CA 90073
Med Sch Affil: M-00514
Specialty: AI, CD, END, IM, N, NM, PM, PTH, FUD
Institution ID: 05-0255

White Memorial Medical Center
1720 E Carmen Ave
Los Angeles, CA 90033
Med Sch Affil: M-00513
Specialty: FP, IM, OBG, OPB, RD
Institution ID: 05-0383

Los Angeles (Sepulveda)
Veterans Affairs Medical Center (Sepulveda)
1611 Plummer St
Los Angeles (Sepulveda), CA 91343
Med Sch Affil: G-00619
Specialty: FP
Institution ID: 05-0271

Martinez
Merrick Memorial Hospital and Clinics
2500 Alhambra Ave
Martinez, CA 94553
Med Sch Affil: G-00590
Specialty: FP
Institution ID: 05-0194

Merced
Merced Community Medical Center
301 E 19th St
PO Box 231
Merced, CA 95340-0231
Med Sch Affil: G-00519
Specialty: FP
Institution ID: 05-0718

Modesto
Stanislaus Medical Center
830 Scenic Dr
Modesto, CA 95353
Med Sch Affil: G-00619
Specialty: FP
Institution ID: 05-0330

Napa
Napa State Hospital
2100 Napa Valley Hwy
Napa, CA 94558-0293
Specialty: CHP, P
Institution ID: 05-0205

Northridge
Northridge Hospital Medical Center
18300 Reseda Blvd
Northridge, CA 91328
Med Sch Affil: L-00514
Specialty: FP
Institution ID: 05-0726

Oakland
Children's Hospital Medical Center of Northern California
747 53rd St.
Oakland, CA 94609
Med Sch Affil: M-00502, G-00519
Specialty: PD, PHO
Institution ID: 05-0110

Highland General Hospital
1411 E 31st St.
Oakland, CA 94603-10612
Med Sch Affil: L-00502, G-00519
Specialty: FM, IM, N, TTY
Institution ID: 05-0413

Kaiser Permanente Medical Center (Oakland)
280 W MacArthur Blvd
Oakland, CA 94611-6600
Med Sch Affil: M-00511
Specialty: GS
Institution ID: 05-0296

Kaiser Permanente Medical Group (Northern California)
1800 Sheridan St 21st Fl
Oakland, CA 94612
Specialty: IM, OBG, OTO, P, RD
Institution ID: 05-0500

Naval Hospital (Oakland)
8750 Mountain Blvd
Oakland, CA 94627-5000
Med Sch Affil: M-00512, M-00502, G-00519
Specialty: OVS, V, U
Institution ID: 05-0194

Orange
Children's Hospital of Orange County
45 S Main St.
Orange, CA 92868
Med Sch Affil: G-00515
Specialty: PD, PHO
Institution ID: 05-0547

University of California (Irvine) Medical Center
111 The City Dr
Orange, CA 92660
Med Sch Affil: M-00515
Specialty: AI, AL, AN, AP, CCA, CCS, CD, CHN, CIH, D, DMP, DR, EM, END, FF, GE, GS, HEM, IM, IMG, N, NEM, NS, OBG, OPB, ORS, OTO, P, PCC, FD, PM, PS, PTH, RHO, RGO, U
Institution ID: 05-0564

Pasadena
Huntington Memorial Hospital
100 W California Blvd
P O Box 1011
Pasadena, CA 91106-7013
Med Sch Affil: M-00505, L-00212
Specialty: GS, IM
Institution ID: 05-0474

Southern California Kaiser Permanente Medical Group
300 S Walnut St.
Pasadena, CA 91108
Specialty: AI, CD, CR, FP, FRG, GE, GS, HSP, IL, IM, N, NEM, OBG, PD, RG, U
Institution ID: 05-0672

Redding
Mercy Medical Center
Chairom Heights
PO Box 40008
Redding, CA 96009-6609
Med Sch Affil: G-00519
Specialty: FP
Institution ID: 05-0745

San Bernardino
San Bernardino County Coroner's Office
175 S Lena Rd
San Bernardino, CA 92415-6096
Specialty: POP
Institution ID: 05-0473

San Bernardino County Medical Center
790 E Gilbert St.
San Bernardino, CA 92415-0026
Med Sch Affil: M-00515, L-00212, G-00519
Specialty: FP, TY
Institution ID: 05-0207

San Diego
Mercy Hospital and Medical Center
4077 Fifth Ave
San Diego, CA 92103-2100
Med Sch Affil: M-00518
Specialty: CD, IM, TY
Institution ID: 05-0397
Naval Medical Center (San Diego)
34800 Bob Wilson Dr
San Diego, CA 92134-1000
Med Sch Aff: M-06512, M-00615
Specialty: AN, CCM, CD, DMP, DR, EM, GE, GS, HO, HSO, ID, IM, OBG, OPH, ORS, OTG, P, PCC, PD, PHT, TY, U
Institution ID: 05-0984

San Diego County Medical Examiner
5550 Overland Ave Bldg 14
San Diego, CA 92123
Specialty: POP
Institution ID: 05-0861

Sharp HealthCare
3212 Berger Ave
San Diego, CA 92123
Specialty: FP
Institution ID: 05-0876

University of California (San Diego) Medical Center
200 W Arbor Dr
San Diego, CA 92103-8070
Med Sch Aff: M-00518, L-02312
Specialty: Al, AN, AP, CCP, CD, CHN, CHP, D, DR, EM, END, FP, GE, GPM, GS, HO, HSO, ID, IM, IMG, MD, N, NEN, NM, NP, NPM, NS, OB, OPH, ORS, OTO, P, PCG, PD, PCC, PDE, PN, PS, PHT, RHO, RNR, RS, S, U, UP
Institution ID: 05-0434

San Francisco
California Pacific Medical Center
PO Box 7999
San Francisco, CA 94120
Specialty: C, GE, HSO, IM, NPM, OP, P, PD, PUD
Institution ID: 05-0882

Irwin Memorial Blood Centers
270 Munson Ave
Sacramento, CA 94118-4445
Specialty: R&K
Institution ID: 05-0767

St Francis Memorial Hospital
900 Hyde St
San Francisco, CA 94109
Specialty: PS
Institution ID: 05-0162

St Mary's Hospital and Medical Center
450 Staton St
San Francisco, CA 94117-1079
Med Sch Aff: L-00502
Specialty: CD, IM, ORS, R9
Institution ID: 05-0169

University of California (San Francisco) School of Medicine
San Francisco, CA 94143-0410
Med Sch Aff: M-00602, L-02312
Specialty: AI, AN, AP, CCP, CD, CHN, CHP, D, DMP, DR, END, FP, GE, GS, HEM, HMP, HSO, HSP, ID, IM, IMG, N, NEN, NM, NP, NPM, NS, OB, OPH, ORS, ORS, OTG, P, PCG, PD, PCC, PDE, PN, PS, PHT, RHO, RNR, RS, S, U, VR, VS
Institution ID: 05-0737

Santa Clara Valley Medical Center
Robert Sillen
Health System Administration
2500 Merced Ave
San Jose, CA 95129-2999
Med Sch Aff: M-00511
Specialty: DR, IM, OBG, PHT, RHO, RNR
Institution ID: 05-0449

San Mateo
San Mateo County General Hospital
Psychiatric Residency Program
222 W 38th Ave
San Mateo, CA 94403-2222
Specialty: P
Institution ID: 05-0686

Santa Barbara
Santa Barbara Cottage Hospital
PO Box 688
Santa Barbara, CA 93102
Med Sch Aff: L-00514, L-00506
Specialty: DR, GE, IM
Institution ID: 05-0381

Santa Monica
Santa Monica Hospital Medical Center
1365 15th St
Santa Monica, CA 90404
Med Sch Aff: L-00514
Specialty: FP
Institution ID: 05-0439

Santa Rosa
Community Hospital
3355 Chumash Rd
Santa Rosa, CA 95404-1707
Med Sch Aff: M-00602
Specialty: FP
Institution ID: 05-0152

Stanford
Stanford University Hospital
300 Pasteur Dr
Stanford, CA 94305
Med Sch Aff: M-00511
Specialty: AI, AN, AP, CCP, CD, CHN, CHP, D, DMP, DR, EM, END, GE, GS, HEM, HSO, ID, IM, IMG, N, NEN, NM, NP, NPM, NS, OB, OB, OPH, ORS, OTG, P, PCG, PD, PCC, PDE, PD, FDR, FG, PHO, PN, PS, PHT, RHO, RNR, RS, S, U, VR, VS
Institution ID: 05-0129

Stockton
San Joaquin General Hospital
PO Box 1029
Stockton, CA 95201-1020
Med Sch Aff: G-00510
Specialty: FP, GS, IM, PTV
Institution ID: 05-0281

Torrance
Los Angeles County-Harbor-UCLA Medical Center
1006 W Carson St
Torrance, CA 9009-2910
Med Sch Aff: M-00614, L-02312
Specialty: AI, AN, CCM, CCP, CD, CHN, CHP, D, DR, EM, END, FP, GE, GS, HEM, ID, IM, N, NEF, NPM, OB, ON, ORS, P, PD, REU, RHO, RNR, RS, S, U, VR, VS
Institution ID: 05-0486

Travis AFB
David Grant Medical Center
5010 Medical Group
Travis AFB, CA 94535-1800
Med Sch Aff: M-02312, M-00519
Specialty: DR, FP, GE, IM, OBG, PD, TY
Institution ID: 05-0449

Van Nuys
Southern California Orthopedic Institute
6815 Noble Ave
Van Nuys, CA 91405-8641
Specialty: ORS
Institution ID: 05-0870

Ventura
Ventura County Medical Center
2331 Loma Vista Rd
Ventura, CA 93003
Specialty: FP
Institution ID: 05-0334

Whittier
Presbyterian Intercommunity Hospital
1245 E Washington Blvd
Whittier, CA 90602
Med Sch Aff: G-00506
Specialty: FP, PPG
Institution ID: 05-0782

Colorado
Aurora
Fitzsimons Army Medical Center
Graduate Medical Educational Office
Attn: MGMRZ-22A-E (Ms.note)
Aurora, CO 80045-3000
Med Sch Aff: M-0012, M-00702
Specialty: AI, CD, DR, GE, IM, M, OB, ORS, PS, TY, U
Institution ID: 07-0461

Colorado Springs
Penrose-St Francis Healthcare System
2215 N Cascade Ave
Colorado Springs, CO 80909
Med Sch Aff: L-00702
Specialty: PTH
Institution ID: 07-0327
Colorado

Denver
Children's Hospital
1056 E 19th Ave
Medical Education Box 108
Denver, CO 80210-1086
Med Sch Affil: M-00702
Specialty: SP
Institution ID: 07-0378

Denver Health and Hospitals
777 Bannock St
Denver, CO 80204-4507
Med Sch Affil: M-00102
Specialty: EM, FOP
Institution ID: 07-0280

Presbyterian-St Luke's Medical Center
1718 E 18th Ave
Denver, CO 80218
Specialty: ER, IM, TY
Institution ID: 07-0277

Provenant Mercy Hospital
1650 Fillmore St
Denver, CO 80206-5500
Med Sch Affil: L-00702
Specialty: FP
Institution ID: 07-0213

St Joseph Hospital
1935 Franklin St
Denver, CO 80218-4969
Specialty: FP, GH, IM, OBG
Institution ID: 07-0451

University of Colorado Health Sciences Center
Graduate Medical Education
4200 E 9th Ave PO Box C-383
Denver, CO 80262
Med Sch Affil: M-00702, L-00312
Specialty: AJ, AL, AN, CCM, CCP, CD, CHN, CHP, D, DMP, DR, END, FP, GE, GFM, GS, HEM, ID, IM, IMG, N, NFP, NM, NPM, NS, OB, OM, ON, OPH, OBS, OSM, OTO, P, PD, PEC, PDE, PED, PES, PFO, FHO, PM, PMP, PN, PS, PT, PUD, RHI, RNR, RT, U, V, VIR
Institution ID: 07-0313

Fort Collins
Poudre Valley Hospital
1024 Lemay Ave
Fort Collins, CO 80524-3968
Specialty: FP
Institution ID: 07-0705

Grand Junction
St Mary's Hospital and Medical Center
P O Box 1628
Grand Junction, CO 81502
Specialty: FP
Institution ID: 07-0713

Greeley
North Colorado Medical Center
1801 16th St
Greeley, CO 80631-5109
Specialty: FP
Institution ID: 07-0348

Pueblo
St Mary-Corwin Hospital Regional Medical and Health Center
Southern Colorado Family Medicine
1068 Minnesota Ave
Pueblo, CO 81004-2798
Specialty: FP
Institution ID: 07-0360

Vail
Steadman Hawkins Clinic
181 W Meadow Dr Ste 400
Vail, CO 81657
Specialty: OSM
Institution ID: 07-0015

Connecticut

Bridgeport
Bridgeport Hospital
267 Grand St
Bridgeport, CT 06610-2370
Med Sch Affil: M-00601
Specialty: CD, DR, GE, GS, IM, MDP, OB, PD, PUD
Institution ID: 08-0359

St Vincent's Medical Center
3800 Main St
Bridgeport, CT 06605
Med Sch Affil: M-00601, L-00509
Specialty: IM, IM, TX
Institution ID: 08-0341

Danbury
Danbury Hospital
24 Hospital Ave
Danbury, CT 06810-3086
Med Sch Affil: M-00801, L-00350, G-00002
Specialty: IM, OB, PTH
Institution ID: 08-0363

Derby
Griffin Hospital
130 Division St
Derby, CT 06418
Med Sch Affil: M-00601
Specialty: GE, IM
Institution ID: 08-0172

Farmington
University of Connecticut School of Medicine
University of Connecticut School of Medicine
263 Farmington Ave
Farmington, CT 06030
Med Sch Affil: M-00602
Specialty: AN, BRR, CD, CHP, DR, END, FP, GE, GS, HO, HSO, ID, IM, IMG, N, NFP, NM, NPM, NS, OB, OM, ON, OPH, OBS, OSM, OTO, P, PD, POM, PED, PDE, PFO, FHO, FM, PMP, PN, PS, PT, PUD, HU, RNR, RO, RS, T, U, VIR
Institution ID: 08-0443

Greenwich
Greenwich Hospital
Dep of Medical Education Fm 46N
Perrybridge Rd
Greenwich, CT 06830
Med Sch Affil: M-00601
Specialty: IM
Institution ID: 08-0257

Hartford
Hartford Hospital
80 Seymour St
Hartford, CT 06115-0720
Med Sch Affil: M-03002, L-03001
Specialty: AN, AP, AM, CCA, CCM, DR, HMP, MM, OB, OBG, PCH, PTH
Institution ID: 08-0275

Mount Sinai Hospital
500 Blue Hills Ave
Hartford, CT 06110-2396
Med Sch Affil: M-00602
Specialty: OBG
Institution ID: 08-0316

St Francis Hospital and Medical Center
114 Woodland St
Hartford, CT 06105-1299
Med Sch Affil: M-00602
Specialty: CBO, OB, G
Institution ID: 08-0459

Middletown
Connecticut Valley Hospital
PO Box 351 Silver St
Middletown, CT 06457-7024
Med Sch Affil: M-00601
Specialty: P
Institution ID: 08-0214

Middlesex Hospital
28 Crescent St
Middletown, CT 06457-0650
Med Sch Affil: M-00602
Specialty: TP
Institution ID: 08-0135

New Haven
Hospital of St Raphael
1400 Chapel St
New Haven, CT 06511-4440
Med Sch Affil: M-00601
Specialty: CD, DR, GE, GS, IM, NFP, TY
Institution ID: 08-0244

Yale-New Haven Hospital
1063 Civic Blvd
20 York St
New Haven, CT 06504-1111
Med Sch Affil: M-00601
Specialty: AJ, AN, BRR, CCM, CCP, CCA, CD, CHP, D, DMP, DR, END, GE, GS, HEM, ID, IM, IMG, N, NFP, NM, NPM, NR, NS, CCG, OM, ON, OPH, OBS, OSM, OTO, P, PD, POM, PED, FDE, FDO, FPE, RHI, U, VIR
Institution ID: 08-0433

Norwalk
Norwalk Hospital
Maple St
Norwalk, CT 06855-5600
Med Sch Affil: M-00601, L-01642
Specialty: CD, DR, GE, IM, PUD
Institution ID: 08-0296

Norwich
Norwich Hospital
PO Box 259
Norwich, CT 06360
Specialty: P
Institution ID: 08-0395

Graduate Medical Education Directory
Connecticut

Stamford
St Joseph Medical Center
St Joseph Medical Center
PO Box 1222
128 Sutter Hill Ave
Stamford, CT 06904-1222
Specialty: FP
Institution ID: 08-0692

Waterbury
St Mary's Hospital
56 Franklin St
Waterbury, CT 06706
Med Sch Affil: M-00802, M-00801
Specialty: GS
Institution ID: 08-0458

Waterbury Hospital Health Center
64 Robbins St
Waterbury, CT 06721
Med Sch Affil: M-00801, L-00301
Specialty: GS, PD
Institution ID: 08-0131

Delaware

New Castle
Delaware State Hospital
1901 N DuPont Hwy
New Castle, DE 19720
Specialty: P
Institution ID: 09-0287

Wilmington
Alfred I DuPont Institute of the Nemours Foundation
1600 Rockland Rd
PO Box 260
Wilmington, DE 19899-0260
Med Sch Affil: M-04102, G-04113
Specialty: OP
Institution ID: 09-0349

St Francis Hospital
Seventh And Clayton Sts
Wilmington, DE 19805-6500
Med Sch Affil: M-04413
Specialty: FP
Institution ID: 09-0790

The Medical Center of Delaware
601 W 14th St
PO Box 1628
Wilmington, DE 19899
Med Sch Affil: M-04412, G-04119
Specialty: DR, EM, FP, GS, IM, MFM, MOP, OB/GYN, PT
Institution ID: 09-0247

District of Columbia

Washington
Armed Forces Institute of Pathology
6825 14th St NW
Washington, DC 20007-6006
Med Sch Affil: L-04107, L-00312, L-00543, L-01001, G-00212, G-01003
Specialty: DMP, FOP, NP
Institution ID: 10-0392

Children's National Medical Center
111 Michigan Ave NW
Washington, DC 20010
Med Sch Affil: M-01001, L-00312, L-01002, G-01003
Specialty: AI, CHP, PHS, PG
Institution ID: 10-0441

DC Commission on Mental Health Services-St Elizabeth Campus
A Blok Bm 105
2700 Martin Luther King Ave SE
Washington, DC 20032
Med Sch Affil: L-00312, L-00543, L-01001
Specialty: P
Institution ID: 10-0471

District of Columbia General Hospital
19th St and Massachusetts Ave SE
Washington, DC 20050
Med Sch Affil: M-01001, M-01002
Specialty: IM, TV
Institution ID: 10-0185

George Washington University School of Medicine
2800 Eye St SW
Washington, DC 20007
Specialty: AN, A, CAA, CCM, CCP, CD, CHN, D, DMP, DR, EM, END, FP, GE, GS, HEM, ID, IM, IMG, N, NEP, NM, NPM, NRS, OB/GYN, OM, ON, OX, OPH, ORS, P, PCP, PD, PCO, PDR, PHC, PNG, PS, PTH, PU, R, RHU, RNR, RO, TS, U
Institution ID: 10-0591

Georgetown University Hospital
1st Pl Gorman
3800 Reservoir Rd NW
Washington, DC 20007
Med Sch Affil: M-01002, L-00312, G-00201, G-01001
Specialty: AN, A, APM, BHR, CCP, CD, CHP, JR, END, GE, GS, HEM, ID, IM, N, NEP, NM, NPM, NRS, OB/GYN, OM, OPH, ORS, OTO, P, PCP, PD, PCO, PDR, PHC, PNG, PS, PTH, PU, R, RHU, RNR, RO, TS, U
Institution ID: 10-0470

Georgetown University School of Medicine
3900 Reservoir Rd NW
Washington, DC 20007
Specialty: FPG, TV
Institution ID: 10-0482

Howard University Hospital
2041 Georgia Ave, NW
Washington, DC 20000
Med Sch Affil: M-01001, L-00312, G-01002
Specialty: AI, AN, APM, CD, D, DR, END, FP, GE, GS, HEM, IM, IM, N, NEP, OB/GYN, OM, OPH, ORS, P, PTH, PU, R, RNR, RO, TV, U
Institution ID: 10-0475

National Rehabilitation Hospital
102 Irving St NW
Washington, DC 20010
Med Sch Affil: M-01001, L-00312
Specialty: PM
Institution ID: 10-0730

Office of the Chief Medical Examiner
19th and Massachusetts Ave SE
Washington, DC 20003
Specialty: FM
Institution ID: 10-0496

Providence Hospital
1150 Vernon St NW
Washington, DC 20017
Med Sch Affil: M-00312, L-01001, G-01003, G-01002
Specialty: FP, FM
Institution ID: 10-0412

Florida

Daytona Beach
Halifax Medical Center
300 N Clyde Morris Blvd
PO Box 2890
Daytona Beach, FL 32115-2890
Med Sch Affil: L-01104
Specialty: FP
Institution ID: 11-0165

Eglin AFB
Headquarters Air Force Development Test Center (AFMC)
307 Boatee Rd Ste 114
Eglin AFB, FL 32542-1282
Med Sch Affil: L-00312
Specialty: PP
Institution ID: 11-0722

Fort Lauderdale
Broward County Medical Examiner's Office
5801 SW 31st Ave
Fort Lauderdale, FL 33312-6169
Med Sch Affil: M-31102, M-31102
Specialty: FOP
Institution ID: 11-0654

Veterans Affairs Medical Center (Washington, DC)
50 Irving St NW
Washington, DC 20422-0001
Med Sch Affil: M-01001, M-01002, M-01001, L-02312
Specialty: IM
Institution ID: 10-0291

Walter Reed Army Institute of Research
Medical Research Fellowship
Walter Reed Army Institute of Research
Washington, DC 20070-6100
Med Sch Affil: L-02312
Specialty: GPM
Institution ID: 10-0485

Walter Reed Army Medical Center
Blg 2 Bn 2354
6025 16th St NW
Washington, DC 20007-5001
Med Sch Affil: M-01002, M-01003, L-01001
Specialty: AI, ALI, AN, CCA, CCM, CD, CHN, CHP, D, DR, END, GE, GS, HEM, ID, IM, N, NEP, NM, NRS, OB/GYN, OM, ORS, OTO, P, PCP, PD, PCO, PDR, PHC, PNG, PS, PTH, PU, R, RHU, RNR, RO, TS, U
Institution ID: 10-0242

Washington Hospital Center
111 Irving St NW
Washington, DC 20010-2875
Med Sch Affil: L-00312, L-00101, M-01001, M-01002
Specialty: CD, D, GE, GS, HO, ID, IM, NEP, OB/GYN, OPH, PTH, RHU, U
Institution ID: 15-0377
Gainesville
University of Florida College of Medicine
PO Box 100215
Gainesville, FL 32610-0215
Med Sch Attr: M-01103
Specialties: AN, APDM, CCA, CCP, CD, CHP, D, DR, END, EP, GE, GS, HEM, HMP, HSO, ID, IM, IMG, MDP, N, NEP, NM, NAP, OB/GY, ON, OPH, OR, ORS, ORS, OS, OT, PCG, PCP, PD, PDC, PDC, PII, PIM, PMS, PTH, RER, RN, RO, RS, T, US, U, V, VS
Institution ID: 11-0501

Jacksonville
Naval Hospital (Jacksonville)
2080 Child St
Jacksonville, FL 32214-5227
Med Sch Attr: L-02912, L-01109
Specialty: FP
Institution ID: 11-0256

Nemours Children's Clinic (UFHC/J)
807 Nira St
Jacksonville, FL 32207
Med Sch Attr: L-01109
Specialty: OT
Institution ID: 11-0478

St Vincent's Medical Center
1800 Bartr St
Jacksonville, FL 32204
Med Sch Attr: G-01100
Specialty: FP
Institution ID: 11-0418

University Medical Center (UFHC/J)
650 W Eighth St
Jacksonville, FL 32209-0017
Med Sch Attr: L-02912
Specialties: CCP, CD, DR, END, EP, GE, GS, ID, IM, OB/GY, ON, ORS, PCP, PD, PTH, RNR
Institution ID: 11-0456

Miami
Baptist Hospital of Miami
9800 N Kendall Dr
Miami, FL 33176
Specialty: VIB
Institution ID: 11-0511

Metropolitan Dade County Office of Medical Examiner
Number One on Bob Hope Rd
Miami, FL 33136-1135
Specialty: MVP
Institution ID: 11-0496

Miami Children’s Hospital
3100 S W 62 Ave
Miami, FL 33155-3068
Med Sch Attr: L-01102
Specialties: CCP, PD, PR
Institution ID: 11-0311

University of Miami-Jackson Memorial Medical Center
1611 NW 12th Ave
Miami, FL 33136
Med Sch Attr: L-01100, L-02912
Specialties: AN, APDM, CCA, CCP, CD, CHP, D, DR, END, EP, GE, GS, HEM, HMP, HSO, ID, IM, IMG, MDP, N, NEP, NM, NAP, OB/GY, ON, OPH, OR, ORS, ORS, OS, OT, PCG, PCP, PD, PDC, PDC, PII, PIM, PMS, PTH, RER, RN, RO, RS, T, US, U, V, VS
Institution ID: 11-0314

Miami Beach
Mount Sinai Medical Center of Greater Miami
4300 Alton Rd
Miami Beach, FL 33140
Med Sch Attr: L-01102
Specialties: CD, DR, GI, IM, PTH
Institution ID: 11-0101

Orlando
Arnold Palmer Hospital for Children and Women
Med Ed Administration MP #7
95 W Miller St
Orlando, FL 32806
Specialty: PD
Institution ID: 11-0005

Florida Hospital
601 E Rollins St
Orlando, FL 32803-1273
Med Sch Attr: L-01104, L-00512
Specialty: FP
Institution ID: 11-0413

Orlando Regional Healthcare System-ORMC Division
Office of the Medical Examiner District #8
1401 Lucerne Terrace
Orlando, FL 32806
Specialty: OPM
Institution ID: 11-08018

Orlando Regional Medical Center
Medical Education Admin MP #7
1414 Kahl Ave
Orlando, FL 32806-2093
Med Sch Attr: L-01103
Specialties: OB/GY, OR, ORS, OB/GY, ORS, PTH
Institution ID: 11-0258

Pensacola
Naval Aerospace and Operational Medical Institute
220 Honey Rd
Pensacola, FL 32508-1947
Med Sch Attr: L-01112
Specialty: AM
Institution ID: 11-0108

Naval Hospital (Pensacola)
6000 W Hwy 98
Pensacola, FL 32512-0003
Med Sch Attr: L-02512
Specialty: FP
Institution ID: 11-0159

Sacred Heart Hospital of Pensacola
5149 N Ninth Ave Ste 306
Pensacola, FL 32504
Med Sch Attr: G-01100
Specialty: PD
Institution ID: 11-0396

St Petersburg
Bayfront Medical Center
701 6th St S
St Petersburg, FL 33701-4891
Med Sch Attr: L-01104
Specialty: FP, OB/GY
Institution ID: 11-04440

Tallahassee
Tallahassee Memorial Regional Medical Center
2502 W Magnolia Dr and Miccosukee Rd
Tallahassee, FL 32308
Specialty: FP
Institution ID: 11-0522

Tampa
Florida Blood Services
3609 Spectrum Blvd
Tampa, FL 33612
Med Sch Attr: L-01104
Specialty: BBK
Institution ID: 11-0801

Hillsborough County Medical Examiner Department
401 S Morgan St
Tampa, FL 33602
Specialty: TPO
Institution ID: 11-0804

Shriners Hospital for Crippled Children (Tampa)
13502 N Pine Dr
Tampa, FL 33612-8496
Med Sch Attr: L-01104, G-00510, G-02101
Specialty: OP
Institution ID: 11-0802

Tampa General Healthcare
PO Box 1289
Tampa, FL 33601-1289
Med Sch Attr: M-01104
Specialty: HSO
Institution ID: 11-0726

University of South Florida College of Medicine
12001 Bruce B Downs Blvd PO Box 66
Tampa, FL 33624-4799
Med Sch Attr: M-01104
Specialties: A, ALI, AN, APDM, CCA, CCP, CD, CHP, D, DMP, DR, END, EP, GE, GS, HEM, HMP, ID, IM, IMG, MD, N, NEP, NM, NAP, OB/GY, ON, OPH, OR, ORS, ORS, OS, ORS, PCG, PCP, PD, PDC, PDC, PII, PIM, PMS, PTH, RER, RN, RO, RS, T, US, V, VS
Institution ID: 11-0184

West Palm Beach
Palm Beach County Public Health Unit
PO Box 26
West Palm Beach, FL 33402
Specialty: VH
Institution ID: 11-9729

Albany
Phoebe Putney Memorial Hospital
417 Third Ave
PO Box 1828
Albany, GA 31702-1828
Med Sch Attr: L-01102
Specialty: FP
Institution ID: 12-0315
| Location | Institution Name | Address | City | State | Zip Code | Phone Number | Specialties | Institutions ID |
|----------|-----------------|---------|------|-------|----------|--------------|-------------|---------------|----------------|
| Atlanta | Centers for Disease Control and Prevention | 1600 Clinion Rd Mail Stop C-48 | Atlanta, GA | 30333 | 30333 | 404-639-3016 | M-012 | M-01201 |
| Atlanta | Emory University School of Medicine | 319 WSBACB | Atlanta, GA | 30322 | 30322 | 404-727-2222 | M-0105 | M-01201 |
| Atlanta | Emory University School of Public Health | 1590 Clifton Rd NE | Atlanta, GA | 30322 | 30322 | 404-727-3000 | M-005 | M-01201 |
| Atlanta | Morehouse School of Medicine | 720 Westview Dr SW | Atlanta, GA | 30310 | 30310 | 404-815-1000 | M-01201 | M-01201 |
| Atlanta | Scottish Rite Children's Medical Center | 1001 Johnson Ferry Rd NE | Atlanta, GA | 30308 | 30308 | 404-639-6000 | M-01201 | M-01201 |
| Augusta | Medical College of Georgia Hospital and Clinics | 1100 15th St | Augusta, GA | 30901 | 30901 | 404-639-5000 | M-01201 | M-01201 |
| Columbus | Hugheston Sports Medicine Foundation | PO Box 9657 | Columbus, GA | 31909 | 31909 | 404-639-8517 | M-01201 | M-01201 |
| Columbus | The Medical Center Inc | 710 Center St | Columbus, GA | 31902 | 31902 | 404-639-2222 | M-01201 | M-01201 |
| Fort Benning | Martin Army Community Hospital | US Army Medical Dept Activity | Fort Benning, GA | 31905 | 31905 | 404-639-2312 | M-01201 | M-01201 |
| Fort Gordon | Dwight David Eisenhower Army Medical Center | Graduate Medical Education | Fort Gordon, GA | 30905 | 30905 | 404-639-3000 | M-01201 | M-01201 |
| Fort Gordon | Medical Center of Central Georgia | PO Box 6000 | Macon, GA | 31208 | 31208 | 404-639-6000 | M-01201 | M-01201 |
| Fort Gordon | Memorial Hospital | Turner McCall Rd | Rome, GA | 30162 | 30162 | 404-639-6233 | M-01201 | M-01201 |
| Fort Gordon | Savannah Medical Center | PO Box 148 | Savannah, GA | 31403 | 31403 | 404-639-6200 | M-01201 | M-01201 |
| Hawaii | University of Hawaii at Manoa School of Public Health | 1960 East-West Rd | Honolulu, HI | 96822 | 96822 | 404-639-2319 | M-01201 | M-01201 |
| Hawaii | University of Hawaii John A Burns School of Medicine | 1960 East-West Rd | Honolulu, HI | 96822 | 96822 | 404-639-6200 | M-01201 | M-01201 |
| Idaho | Boise | Family Practice Residency of Idaho | 777 N Raymond | Boise, ID | 83704 | 404-639-6200 | M-01201 | M-01201 |
| Idaho | Veterans Affairs Medical Center (Boise) | 1000 W Fort St | Boise, ID | 83702 | 83702 | 404-639-6200 | M-01201 | M-01201 |
| Idaho | Idaho State University | Campus Box 3807 | Pocatello, ID | 83201 | 83201 | 404-639-6200 | M-01201 | M-01201 |
| Illinois | Berwyn | MacNeal Memorial Hospital | 2240 S Oak Park Ave | Berwyn, IL | 60402 | 404-639-6200 | M-01201 | M-01201 |
| Illinois | Chicago | Columbus Hospital | 2520 N Lakeview Ave | Chicago, IL | 60614 | 60614 | 404-639-6200 | M-01201 | M-01201 |
| Illinois | Chicago | Cook County Hospital | 1835 W Harrison St | Chicago, IL | 60612 | 60612 | 404-639-6200 | M-01201 | M-01201 |
| Illinois | Edgewater Medical Center | 3700 W Aspinwall | Chicago, IL | 60659 | 60659 | 404-639-6200 | M-01201 | M-01201 |
Illinois Masonic Medical Center  
836 W Wellington Ave  
Chicago, IL 60657-5103  
Med Sch Affil: M-0161, M-0162, L-01642, G-01643  
Specialty: AN, CD, DR, IM, OBG, TY  
Institution ID: 16-0111

Jackson Park Hospital  
7531 S Stony Island Ave  
Chicago, IL 60649-3013  
Specialty: FP  
Institution ID: 16-0254

Louise A Weis Memorial Hospital  
4646 N Marine Dr  
Chicago, IL 60640  
Med Sch Affil: M-01602  
Specialty: IM, TY  
Institution ID: 16-0123

Mercy Hospital and Medical Center  
Stevenson Expressway at King Dr  
Chicago, IL 60612-6977  
Med Sch Affil: M-00143, M-01611, L-01602, G-01606  
Specialty: IM, OBG  
Institution ID: 16-0320

Mount Sinai Hospital Medical Center of Chicago  
California Ave at 15th St  
Chicago, IL 60606-1707  
Med Sch Affil: M-01642, G-01602  
Specialty: OBG, PM  
Institution ID: 16-0399

Northwestern University Medical School  
303 E Chicago Ave  
Chicago, IL 60611-3008  
Med Sch Affil: M-01606, L-02312  
Specialty: AI, AL, AN, APN, CCA, CCP, CD, CHS, CHP, D, DR, EM, EN, GE, GS, HO, ID, IM, IMG, MMN, M, NEP, NM, NPM, NE, NS, OBG, OP, OPH, OBS, OTO, O, P, PC, PC, PFO, PDC, PDE, PDR, PDS, PHO, PM, PN, PS, PTH, PUD, RHU, RNK, RO, SPS, TS, TY, U, VIR, VS  
Institution ID: 16-0962

Office of the Medical Examiner of Cook County  
2121 W Harrison St  
Chicago, IL 60612-3306  
Med Sch Affil: G-01643  
Specialty: POF  
Institution ID: 16-0602

Ravenswood Hospital Medical Center  
4550 N Winchester Ave  
Chicago, IL 60640-5306  
Med Sch Affil: M-01611  
Specialty: IM, TY  
Institution ID: 16-0111

Resurrection Medical Center  
7435 W Talbot Ave  
Chicago, IL 60631  
Med Sch Affil: M-01613, L-01642  
Specialty: FP, TY  
Institution ID: 16-0121

Rush Medical College  
600 S Paulina  
Chicago, IL 60612  
Specialty: AI, CCA  
Institution ID: 16-0749

Rush-Presbyterian-St Luke's Medical Center  
1653 W Congress Pkwy  
Chicago, IL 60612-3832  
Med Sch Affil: M-01601  
Specialty: AN, CCM, CD, CHF, D, DR, END, FP, GE, GS, HEM, HSP, ID, IM, IMG, MD, N, NEP, NM, NR, NS, OBG, ON, OPH, OBS, OOM, OSS, OTO, P, PC, PC, PD, PM, FS, PTH, RHU, RNK, RO, VS, WR, VIR, VS  
Institution ID: 16-0278

Shriners Hospital for Crippled Children (Chicago)  
2211 N Oak Park Ave  
Chicago, IL 60625-3922  
Med Sch Affil: M-01606, L-01602, G-01643, G-01611, G-01610  
Specialty: OP  
Institution ID: 16-0312

St Elizabeth's Hospital  
1431 N Claremont Ave  
Chicago, IL 60612  
Specialty: FP  
Institution ID: 16-0413

St Joseph Health Care Centers and Hospital  
3060 N Lake Shore Dr  
Chicago, IL 60661-6074  
Med Sch Affil: M-01606, G-01643, G-01611  
Specialty: FP, IM, OBG  
Institution ID: 16-0310

St Mary of Nazareth Hospital Center  
Medical Affairs Office  
Attn: Mary Lu Echevarria  
2239 W Division St  
Chicago, IL 60622-3596  
Specialty: FP  
Institution ID: 16-0133

University of Chicago Hospitals  
5841 S Maryland Ave  
Chicago, IL 60637-1476  
Med Sch Affil: M-01602, Z-01611  
Specialty: AN, BFB, CCM, CD, CN, CHF, D, DR, EM, EN, GE, GS, HO, ID, IM, IMG, MMN, M, NEP, NM, NPM, NE, NS, OBG, OP, OPH, OBS, OOM, OTO, P, PC, PC, PD, PM, PS, PTH, PUD, RHU, RNK, RO, SPS, TS, U, VIR, VS  
Institution ID: 16-0405

University of Illinois College of Medicine at Chicago  
1553 W Wolcott St  
MC 1244  
Chicago, IL 60612  
Med Sch Affil: M-01602  
Specialty: AN, APF, CD, CHF, D, DR, EN, END, FP, GE, GS, HEM, HSP, ID, IM, IMG, MMN, M, NEP, NM, NPM, NE, NS, OBG, OP, OPH, OBS, OOM, OTO, P, PC, PC, PD, PM, PS, PTH, PUD, RHU, RNK, RO, SPS, TS, U, VIR, VS  
Institution ID: 16-0315

Wiley Children's Hospital at the University of Chicago  
5841 S Maryland Ave  
Chicago, IL 60637  
Med Sch Affil: M-01602  
Specialty: CCP, NPM, PDE, PDS, PTH  
Institution ID: 16-0876

Evanston  
St Francis Hospital of Evanston  
355 Ridge Ave  
Evanston, IL 60202-2809  
Med Sch Affil: M-01611, G-01643  
Specialty: CD, DR, HEM, IM, OBG, ON, TY  
Institution ID: 16-0168

Hinsdale  
Hinsdale Hospital  
1201 N Oak St  
Hinsdale, IL 60521-3829  
Med Sch Affil: L-01602, L-01601, G-01643, G-01611  
Specialty: VP  
Institution ID: 16-0369

LaGrange  
LaGrange Memorial Health System  
5101 Willow Springs Rd  
LaGrange, IL 60525-8088  
Med Sch Affil: L-01605, L-01601  
Specialty: FP  
Institution ID: 16-0175

Maywood  
Foster G McGaw Hospital-Loyola University of Chicago  
2160 N First Ave  
Maywood, IL 60153-5580  
Med Sch Affil: M-01643  
Specialty: AN, CD, CHF, DR, END, GE, GS, HEM, HSP, ID, IM, IMG, MD, M, NEP, NM, NPM, NS, OBG, ON, OP, OBS, OOM, OSS, OT, P, PCC, PCC, PD, PDE, PM, PS, PTH, RHU, RNK, RO, SPS, TS, U, VS  
Institution ID: 16-0498

North Chicago  
Fitch University of Health Sciences-Chicago Medical School  
3333 Green Bay Rd  
North Chicago, IL 60064  
Med Sch Affil: M-01642  
Specialty: CCM, CD, EN, FP, GE, GS, HEM, HO, ID, IM, IMG, N, P, PUD, TY  
Institution ID: 16-0748

Oak Lawn  
EHS Christ Hospital and Medical Center  
4440 W 96th St  
Oak Lawn, IL 60453-4213  
Med Sch Affil: M-01611, L-01642, L-01601  
Specialty: CD  
Institution ID: 16-0303

Oak Park  
West Suburban Hospital Medical Center  
555 E 5th St  
Oak Park, IL 60302  
Med Sch Affil: L-01601  
Specialty: FP, IM, TY  
Institution ID: 16-0454

Park Ridge  
Lutheran General Hospital  
1775 Dempster St  
Park Ridge, IL 60068-1174  
Med Sch Affil: M-01602, G-01643, G-01606  
Specialty: CCP, CD, CF, FP, FO, GE, GS, HEM, HO, ID, IM, IMG, OBG, P, PTH, PUD, TY  
Institution ID: 16-0484

Peoria  
St Francis Medical Center  
530 NE Glen Oak Ave  
Peoria, IL 61606  
Med Sch Affil: M-01611  
Specialty: MD  
Institution ID: 16-0398

University of Illinois College of Medicine at Peoria  
Office of Graduate Medical Education  
One Illini Dr  
PO Box 1649  
Peoria, IL 61656  
Specialty: DR, EM, FP, GS, IM, N, NS, OBG, TD  
Institution ID: 16-0751
Rockford
University of Illinois College of Medicine at Rockford
1501 Parkview Ave
Rockford, IL 61107-1987
Specialty: FP
Institution ID: 16-0504

Scott AFB
USAF Medical Center (Scott) (SGE)
Scott AFB, IL 62225-5000
Med Sch Affil: L-02912
Specialty: FY, TY
Institution ID: 16-0476

Springfield
Illinois Department of Public Health
536 W Jefferson St
Springfield, IL 62701
Med Sch Affil: G-01445
Specialty: PH
Institution ID: 16-0147

Southern Illinois University School of Medicine
800 N First St
PO Box 18290
Springfield, IL 62704-9290
Med Sch Affil: M-01445
Specialty: DR, END, FP, GE, GS, ID, IM, MP, MPM, N, OB/GYN, OPH, ORS, OTO, P, PD, PS, PUD, SFS, U, VS
Institution ID: 16-0652

Urbana
Carle Foundation Hospital
611 W Park St
Urbana, IL 61801-2086
Med Sch Affil: M-01411
Specialty: CBS, FP
Institution ID: 16-0144

University of Illinois College of Medicine at Urbana
100 Medical Sciences Bldg
606 S Mathews
Urbana, IL 61801
Med Sch Affil: M-01411
Specialty: IM
Institution ID: 16-0752

Wheaton
Rehabilitation Foundation Inc
PO Box 589
26 W 171 Roosevelt Rd
Wheaton, IL 60188
Specialty: FM
Institution ID: 16-8003

Indiana
Beech Grove
St Francis Grove Hospital and Health Centers
1500 Albany St
Beech Grove, IN 46107-1683
Med Sch Affil: L-01720
Specialty: VP
Institution ID: 17-0125

Evansville
Deaconess Hospital
600 Mary St
Evansville, IN 47714
Med Sch Affil: L-01720
Specialty: FP
Institution ID: 17-0708

St Mary's Medical Center
3700 Washington Ave
Evansville, IN 47715
Med Sch Affil: L-01720
Specialty: FP
Institution ID: 17-0424

Fort Wayne
Fort Wayne Medical Education Program
2449 Lake Ave
Fort Wayne, IN 46806
Specialty: FY, TY
Institution ID: 17-0446

Lutheran Hospital of Indiana
7850 W Jefferson Blvd
Fort Wayne, IN 46904
Med Sch Affil: L-01720
Specialty: OB/GYN
Institution ID: 17-0228

Gary
Northwest Center for Medical Education
Indiana Univ School of Medicine
3400 Broadway
Gary, IN 46408-1197
Specialty: FP
Institution ID: 17-8006

Indianapolis
Community Hospitals of Indianapolis
1000 N Ritter Ave
Indianapolis, IN 46219-0805
Med Sch Affil: M-01720
Specialty: FP
Institution ID: 17-0710

Indiana Hand Center
8001 Harcourt Rd
Indianapolis, IN 46268
Specialty: IM
Institution ID: 17-4007

Indiana University Medical Center
1100 S University Dr
Indianapolis, IN 46225-5114
Med Sch Affil: M-01720
Institution ID: 17-0444

Methodist Hospital of Indiana
16-65 at 21st St
PO Box 1367
Indianapolis, IN 46206-1367
Med Sch Affil: M-01720
Specialty: CD, DR, EM, EPM, FP, GS, IM, MEM, MPM, NEP, OB/GYN, OB/GYN, OM, OSM, PD, PTH, PUD, TY, VIB
Institution ID: 17-0217

St Vincent Hospital and Health Care Center
2001 W 86th St
PO Box 40870
Indianapolis, IN 46240
Med Sch Affil: M-01720
Specialty: FP, IM, OB/GYN, TT
Institution ID: 17-0423

Muncie
Ball Memorial Hospital
2401 University Ave
Muncie, IN 47305-3490
Med Sch Affil: L-01720
Specialty: FP, IM, PTH, TY
Institution ID: 17-0150

South Bend
Memorial Hospital of South Bend
945 N Michigan St
South Bend, IN 46601-9785
Med Sch Affil: L-01720
Specialty: FP
Institution ID: 17-0335

St Joseph's Medical Center of South Bend
801 E LaSalle St
PO Box 1835
South Bend, IN 46624-1835
Med Sch Affil: L-01720
Specialty: FP
Institution ID: 17-0410

Terre Haute
Union Hospital
1066 N 7th St
Terre Haute, IN 47805-2790
Med Sch Affil: L-01720
Specialty: FP
Institution ID: 17-4009

Iowa
Cedar Rapids
St Luke's Methodist Hospital
PO Box 3025
Cedar Rapids, IA 52406-3025
Specialty: FP
Institution ID: 18-0417

Davenport
Genesis Medical Center
1227 E Rushmore
Davenport, IA 52803
Specialty: FP
Institution ID: 18-0101

Des Moines
Broadlawns Medical Center
1801 Hickman Rd
Des Moines, IA 50314-1597
Med Sch Affil: L-01803
Specialty: FY, TY
Institution ID: 18-0240

Iowa Lutheran Hospital
700 E University
Des Moines, IA 50316-2382
Med Sch Affil: L-01803
Specialty: FP
Institution ID: 18-0408
Iowa

Iowa Methodist Medical Center
1300 Pleasant St
Des Moines, IA 50309-0976
Med Sch Affl: L-0190
Specialty: GS, IM, PD, TY
Institution ID: 18-0130

Veterans Affairs Medical Center (Des Moines)
3600 30th St
Des Moines, IA 50310-5774
Med Sch Affl: L-0492
Specialty: GS
Institution ID: 18-0226

Iowa City

University of Iowa Hospitals and Clinics
200 Hawkins Dr
Iowa City, IA 52242-1009
Med Sch Affl: M-0190
Specialty: AI, AL, AN, AP, CK, CCA, CD, CHN, CHP, D, DR, EN, FP, FPG, GE, GS, HMP, HO, HSO, ID, IM, MP, N, NLP, NSP, NP, AP, AMR, NR, OB, OM, OP, ORS, ORT, OT, PC, PCP, PD, POC, PGR, PGR, PRP, RAR, PN, PTH, RHH, RUS, RO, TS, U, VS
Institution ID: 18-0416

Mason City

North Iowa Mercy Health Center
84 Beaumont Dr
Mason City, IA 50401-2099
Med Sch Affl: L-0490
Specialty: FP
Institution ID: 18-0796

Sioux City

Saint Luke's Regional Medical Center
2720 Stone Park Blvd
 Sioux City, IA 51104-0049
Med Sch Affl: L-0190
Specialty: FP
Institution ID: 18-0710

Waterloo

Covenant Medical Center-West Ninth
9421 W Ninth St
Waterloo, IA 50702-5499
Med Sch Affl: L-0190
Specialty: FP
Institution ID: 18-0715

Kansas

Kansas City

University of Kansas School of Medicine
3901 Rainbow Blvd
Kansas City, KS 66650-7300
Med Sch Affl: M-0190
Specialty: AI, AN, CD, CHN, CHP, D, DR, EN, FP, GE, GS, HEM, HSP, ID, IM, MP, MF, MFP, N, NEP, NM, NS, OB, ON, ORS, ORT, OT, PC, PD, PN, PS, PTH, RHH, RO, TS, U, VS
Institution ID: 19-0501

Salina

Salina Health Education Foundation
130 W Chaffin
PO Box 1757
Salina, KS 67402-1757
Specialty: FP
Institution ID: 19-0521

Topeka

Kansas Medical Education Foundation
1500 SW Eighth &
Topeka, KS 66605-1330
Specialty: FP
Institution ID: 19-0602

Menninger Clinic
PO Box 229
Topeka, KS 66601-0329
Specialty: CHP
Institution ID: 19-0404

Wichita

University of Kansas School of Medicine (Wichita)
1010 N Kansas
Wichita, KS 67214-3299
Med Sch Affl: L-0190
Specialty: AN, DR, FP, GS, IM, OBG, ORS, P, PD
Institution ID: 18-0611

Kentucky

Edgewood

St Elizabeth Medical Center
One Medical Village Dr
Edgewood, KY 41017-3422
Med Sch Affl: L-0091, G-00012
Specialty: FP
Institution ID: 20-0463

Lexington

Shriners Hospital for Crippled Children (Lexington)
1900 Richmond Rd
Lexington, KY 40503-1258
Med Sch Affl: G-02012
Specialty: OP
Institution ID: 20-0284

University Hospital-Albert B Chandler Medical Center
900 Rose St, N 106
Lexington, KY 40503-0094
Med Sch Affl: M-02012
Specialty: AI, AN, AP, CHN, CM, CD, CHP, CPP, DR, END, FP, GE, GSP, ISM, ID, IM, IMR, MDP, P, NEP, NM, NLP, NS, OB, ON, ORS, ORT, OT, P, POC, PD, PM, PS, PTH, PUD, RHH, RO, TS, U, VS
Institution ID: 20-0696

University of Kentucky College of Medicine
900 Rose St, N 106
Lexington, KY 40503-0094
Med Sch Affl: M-02012
Specialty: FP
Institution ID: 20-0513

Louisville

American Red Cross Blood Services
Louisville Region
520 E Chestnut St
Louisville, KY 40202
Specialty: BKB
Institution ID: 20-8920

Kosair Children's Hospital (Alliant Health System)
315 E Broadway
PO Box 14570
Louisville, KY 40232-5707
Med Sch Affl: M-02002
Specialty: PDR
Institution ID: 20-0846

University of Louisville School of Medicine
House Staff Office
Abell Administration Ctr Rm 138
Louisville, KY 40292
Med Sch Affl: M-02002
Specialty: AN, CD, CHP, D, DR, EN, END, FOP, FP, GE, GS, HMP, HSP, ID, IM, MDP, N, NEP, NIM, NS, OB, OPH, ORS, ORT, F, PCP, PD, PM, PS, PTH, PUD, RHH, RO, TS, U, VS
Institution ID: 20-0507

Madisonville

Traver Clinic Foundation
425 N Kentucky Ave
Madisonville, KY 41051
Specialty: FP
Institution ID: 20-0821

Missouri

Baton Rouge

Baton Rouge General Medical Center
3000 Florida St
PO Box 2511
Baton Rouge, LA 70821-2511
Med Sch Affl: M-02016
Specialty: FP
Institution ID: 21-7005

Earl K Long Medical Center
5056 Airline Hwy
Baton Rouge, LA 70805-2408
Med Sch Affl: M-02015
Specialty: EM, FP, IM, PD
Institution ID: 21-0491

Lafayette

University Medical Center (Lafayette)
221 S Main St
PO Box 4055-C
Lafayette, LA 70503-2406
Med Sch Affl: M-02015
Specialty: FP
Institution ID: 21-0380

Monroe

E A Conway Medical Center
PO Box 1881
4546 Jackson St
Monroe, LA 71211-1881
Med Sch Affl: G-02010
Specialty: FP
Institution ID: 21-0384

New Orleans

Alton Ochsner Medical Foundation
Graduate Medical Education
1516 Jefferson Hwy
New Orleans, LA 70121
Med Sch Affl: M-02015, G-02010
Specialty: AN, CD, CMR, DR, END, FP, GE, GS, ID, IM, OB, ON, ORS, P, PTH, PUD, RHH, TS, U, VS
Institution ID: 21-0381
<table>
<thead>
<tr>
<th>Institution Name</th>
<th>Address</th>
<th>City, State, Zip</th>
<th>Phone</th>
<th>Fax</th>
<th>Email</th>
<th>Website</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Childrens Hospital</td>
<td>200 Henry Clay Ave</td>
<td>New Orleans, LA 70118</td>
<td>504-494-7000</td>
<td>504-494-7080</td>
<td><a href="mailto:info@childrenshosp.org">info@childrenshosp.org</a></td>
<td><a href="http://www.childrenshosp.org">www.childrenshosp.org</a></td>
<td>Specialties: Pediatrics</td>
</tr>
<tr>
<td>Louisiana State University School of Medicine</td>
<td>1424 Tulane Ave</td>
<td>New Orleans, LA 70112-2822</td>
<td>504-251-4000</td>
<td>504-251-4000</td>
<td><a href="mailto:info@lsuhs.edu">info@lsuhs.edu</a></td>
<td><a href="http://www.lsuhsc.edu">www.lsuhsc.edu</a></td>
<td>Specialties: All specialties</td>
</tr>
<tr>
<td>Tulane University School of Public Health and Tropical Medicine</td>
<td>1601 Canal St</td>
<td>New Orleans, LA 70112-2699</td>
<td>504-252-5050</td>
<td>504-252-5050</td>
<td><a href="mailto:info@tulane.edu">info@tulane.edu</a></td>
<td><a href="http://www.tulane.edu">www.tulane.edu</a></td>
<td>Specialties: All specialties</td>
</tr>
<tr>
<td>Tulane University School of Medicine</td>
<td>1430 Tulane Ave</td>
<td>New Orleans, LA 70112-2808</td>
<td>504-252-5050</td>
<td>504-252-5050</td>
<td><a href="mailto:info@tulane.edu">info@tulane.edu</a></td>
<td><a href="http://www.tulane.edu">www.tulane.edu</a></td>
<td>Specialties: All specialties</td>
</tr>
<tr>
<td>Shreveport</td>
<td>Louisiana State University Medical Center-Shreveport</td>
<td>1501 Kings Hwy</td>
<td>Shreveport, LA 71103-3522</td>
<td>318-841-3121</td>
<td><a href="mailto:info@lsuhsc.edu">info@lsuhsc.edu</a></td>
<td><a href="http://www.lsuhsc.edu">www.lsuhsc.edu</a></td>
<td>Specialties: All specialties</td>
</tr>
<tr>
<td>Louisiana State University School of Medicine in Shreveport</td>
<td>PO Box 38932</td>
<td>Shreveport, LA 71130-3922</td>
<td>318-841-3121</td>
<td>318-841-3121</td>
<td><a href="mailto:info@lsuhsc.edu">info@lsuhsc.edu</a></td>
<td><a href="http://www.lsuhsc.edu">www.lsuhsc.edu</a></td>
<td>Specialties: All specialties</td>
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<td>Maine</td>
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<tr>
<td>Kennebec Valley Medical Center</td>
<td>6 8 Chestnut St</td>
<td>Augusta, ME 04330</td>
<td>207-622-6000</td>
<td>207-622-6000</td>
<td><a href="mailto:info@kvmc.org">info@kvmc.org</a></td>
<td><a href="http://www.kvmc.org">www.kvmc.org</a></td>
<td>Specialties: All specialties</td>
</tr>
<tr>
<td>Bangor</td>
<td>Eastern Maine Medical Center</td>
<td>408 State St</td>
<td>Bangor, ME 04401</td>
<td>207-982-4000</td>
<td><a href="mailto:info@emmhc.org">info@emmhc.org</a></td>
<td><a href="http://www.emmhc.org">www.emmhc.org</a></td>
<td>Specialties: All specialties</td>
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<tr>
<td>Lewiston</td>
<td>Central Maine Medical Center</td>
<td>300 Main St</td>
<td>Lewiston, ME 04240-0001</td>
<td>207-786-0000</td>
<td><a href="mailto:info@cmhc.org">info@cmhc.org</a></td>
<td><a href="http://www.cmhc.org">www.cmhc.org</a></td>
<td>Specialties: All specialties</td>
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<tr>
<td>Portland</td>
<td>Maine Medical Center</td>
<td>22 Bramhall St</td>
<td>Portland, ME 04102-1375</td>
<td>207-786-0000</td>
<td><a href="mailto:info@mmh.org">info@mmh.org</a></td>
<td><a href="http://www.mmh.org">www.mmh.org</a></td>
<td>Specialties: All specialties</td>
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<tr>
<td>Maryland</td>
<td>Aberdeen Proving Ground</td>
<td>US Army Center for Health Promotion and Preventive Medicine</td>
<td>Aberdeen Proving Ground, MD 21010-3422</td>
<td>410-963-2400</td>
<td><a href="mailto:info@apg.mil">info@apg.mil</a></td>
<td><a href="http://www.apg.mil">www.apg.mil</a></td>
<td>Specialties: All specialties</td>
</tr>
<tr>
<td>Andrews AFB</td>
<td>89th Medical Group</td>
<td>1000 W Perimeter Rd S JF JF</td>
<td>Andrews AFB, MD 20911-5600</td>
<td>202-622-2000</td>
<td><a href="mailto:info@afb.mil">info@afb.mil</a></td>
<td><a href="http://www.afb.mil">www.afb.mil</a></td>
<td>Specialties: All specialties</td>
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<tr>
<td>Baltimore</td>
<td>Franklin Square Hospital Center</td>
<td>5000 Franklin Square Dr</td>
<td>Baltimore, MD 21224-5900</td>
<td>410-921-2000</td>
<td><a href="mailto:info@fsq.org">info@fsq.org</a></td>
<td><a href="http://www.fsq.org">www.fsq.org</a></td>
<td>Specialties: All specialties</td>
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<tr>
<td>Good Samaritan Hospital of Maryland</td>
<td>5601 Loch Raven Blvd</td>
<td>Baltimore, MD 21234-2965</td>
<td>410-921-2000</td>
<td>410-921-2000</td>
<td><a href="mailto:info@gsh.org">info@gsh.org</a></td>
<td><a href="http://www.gsh.org">www.gsh.org</a></td>
<td>Specialties: All specialties</td>
</tr>
<tr>
<td>Greater Baltimore Medical Center</td>
<td>6701 N Charles St</td>
<td>Baltimore, MD 21208-6084</td>
<td>410-822-2000</td>
<td>410-822-2000</td>
<td><a href="mailto:info@gbmc.org">info@gbmc.org</a></td>
<td><a href="http://www.gbm.org">www.gbm.org</a></td>
<td>Specialties: All specialties</td>
</tr>
<tr>
<td>Johns Hopkins University School of Medicine</td>
<td>151 S University Pl</td>
<td>Baltimore, MD 21205-2139</td>
<td>410-614-3400</td>
<td>410-614-3400</td>
<td><a href="mailto:info@jhums.org">info@jhums.org</a></td>
<td><a href="http://www.jhums.org">www.jhums.org</a></td>
<td>Specialties: All specialties</td>
</tr>
<tr>
<td>Johns Hopkins University School of Public Health</td>
<td>515 N Wolfe St</td>
<td>Baltimore, MD 21205-2139</td>
<td>410-614-3400</td>
<td>410-614-3400</td>
<td><a href="mailto:info@jhp.org">info@jhp.org</a></td>
<td><a href="http://www.jhp.org">www.jhp.org</a></td>
<td>Specialties: All specialties</td>
</tr>
<tr>
<td>Johns Hopkins University School of Hygiene/Public Health</td>
<td>515 N Wolfe St</td>
<td>Baltimore, MD 21205-2139</td>
<td>410-614-3400</td>
<td>410-614-3400</td>
<td><a href="mailto:info@jhphs.org">info@jhphs.org</a></td>
<td><a href="http://www.jhphs.org">www.jhphs.org</a></td>
<td>Specialties: All specialties</td>
</tr>
<tr>
<td>Johns Hopkins University School of Nursing</td>
<td>515 N Wolfe St</td>
<td>Baltimore, MD 21205-2139</td>
<td>410-614-3400</td>
<td>410-614-3400</td>
<td><a href="mailto:info@jhun.org">info@jhun.org</a></td>
<td><a href="http://www.jhun.org">www.jhun.org</a></td>
<td>Specialties: All specialties</td>
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<tr>
<td>Johns Hopkins University School of Nursing</td>
<td>515 N Wolfe St</td>
<td>Baltimore, MD 21205-2139</td>
<td>410-614-3400</td>
<td>410-614-3400</td>
<td><a href="mailto:info@jhun.org">info@jhun.org</a></td>
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<tr>
<td>Johns Hopkins University School of Nursing</td>
<td>515 N Wolfe St</td>
<td>Baltimore, MD 21205-2139</td>
<td>410-614-3400</td>
<td>410-614-3400</td>
<td><a href="mailto:info@jhun.org">info@jhun.org</a></td>
<td><a href="http://www.jhun.org">www.jhun.org</a></td>
<td>Specialties: All specialties</td>
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<tr>
<td>Johns Hopkins University School of Nursing</td>
<td>515 N Wolfe St</td>
<td>Baltimore, MD 21205-2139</td>
<td>410-614-3400</td>
<td>410-614-3400</td>
<td><a href="mailto:info@jhun.org">info@jhun.org</a></td>
<td><a href="http://www.jhun.org">www.jhun.org</a></td>
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<tr>
<td>Johns Hopkins University School of Nursing</td>
<td>515 N Wolfe St</td>
<td>Baltimore, MD 21205-2139</td>
<td>410-614-3400</td>
<td>410-614-3400</td>
<td><a href="mailto:info@jhun.org">info@jhun.org</a></td>
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<td>Specialties: All specialties</td>
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<tr>
<td>Johns Hopkins University School of Nursing</td>
<td>515 N Wolfe St</td>
<td>Baltimore, MD 21205-2139</td>
<td>410-614-3400</td>
<td>410-614-3400</td>
<td><a href="mailto:info@jhun.org">info@jhun.org</a></td>
<td><a href="http://www.jhun.org">www.jhun.org</a></td>
<td>Specialties: All specialties</td>
</tr>
</tbody>
</table>
Massachusetts

Massachusetts General Hospital
Fruit St
Boston, MA 02114
Med Sch Affili: M-02401, L-02312
Specialties: AI, ALI, AN, APM, BKB, CCA, CM, CCP, CD, CHN, CHP, D, DME, DR, END, GE, GS, HEM, HSF, ID, IM, MPM, N, NER, NM, NP, NS, OBG, ON, OP, OHS, OMS, P, PCC, PD, PHS, PDP, PHT, PS, PTH, PUB, RBH, RNR, RO, TS, U, VS
Institution ID: 24-0594

New England Deaconess Hospital
One Deaconess Road
Boston, MA 02215-5389
Med Sch Affili: M-02401, L-02312
Specialties: CD, DR, END, GE, GS, HO, ID, IM, LR, NCC, PCC, PFC, PS, PTH, PUB, RO, TS, U, VS
Institution ID: 24-0582

New England Medical Center Hospitals
750 Washington St
Boston, MA 02111-4915
Med Sch Affili: M-02107
Specialties: AN, APM, BKB, CCA, CHP, CPP, DR, END, GE, GS, HO, ID, IM, LR, NCC, PCC, PFC, PS, PTH, PUB, RO, TS, U, VS
Institution ID: 24-0578

Spaulding Rehabilitation Hospital
125 Nashua St
Boston, MA 02114
Specialties: PM
Institution ID: 24-8036

St Elizabeth's Medical Center of Boston
736 Cambridge St
Boston, MA 02135-1111
Med Sch Affili: M-02407
Specialties: AN, CD, GE, GS, HEM, IM, ON, P, PCC
Institution ID: 24-0511

Brockton

Brockton Hospital
660 Centre St
Brockton, MA 02302-3366
Med Sch Affili: M-02405
Specialties: TV
Institution ID: 24-0525

Brockton-West Roxbury Veterans Affairs Medical Center
640 Belmont St
Brockton, MA 02301-5506
Med Sch Affili: M-02401
Specialties: P
Institution ID: 24-0172

Burlington

Lahey Clinic
41 Mall Rd
Burlington, MA 01805
Med Sch Affili: L-02407, L-02401, L-02406
Specialties: CD, CRS, DR, END, GE, GS, IM, PS, RNR, U
Institution ID: 24-0183

Cambridge

Cambridge Hospital
1490 Cambridge St
Cambridge, MA 02139
Med Sch Affili: M-02401, L-02407
Specialties: CHP, IM, P, TV
Institution ID: 24-0576
Mount Auburn Hospital
230 Mount Auburn St
Cambridge, MA 02238
Med Sch Affil: M-02401
Specialty: DR, IM
Institution ID: 24-0975

Fitchburg
Burbank Hospital
276 Nichols Rd
Fitchburg, MA 01420-2060
Med Sch Affil: G-03416
Specialty: FP
Institution ID: 24-0366

Framingham
MetroWest Medical Center
Framingham Union Campus
115 Lincoln St
Framingham, MA 01701
Med Sch Affil: L-02416, L-02405
Specialty: IM, TY
Institution ID: 24-0162

Lawrence
Greater Lawrence Family Health Center
119 Belmont St
Lawrence, MA 01841
Specialty: FP
Institution ID: 24-0188

Newton Lower Falls
Newton-Wellesley Hospital
2014 Washington St
Newton Lower Falls, MA 02162
Med Sch Affil: M-02307
Specialty: IM, MPM
Institution ID: 24-0448

Pittsfield
Berkshire Medical Center
725 North St
Pittsfield, MA 01201
Med Sch Affil: M-02416, L-02563
Specialty: DR, GS, IM, P, PTH
Institution ID: 24-0180

Salem
Salem Hospital
81 Highland Ave
Salem, MA 01970-2788
Med Sch Affil: L-02407, L-02405
Specialty: IM
Institution ID: 24-0287

Springfield
Baystate Medical Center
758 Chestnut St
Springfield, MA 01199-9999
Med Sch Affil: H-02407, L-02312, G-02405
Specialty: AN, AP, CD, DR, EM, END, GS, HO, ID, IM, MFD, OB/GYN, PD, PDR
Institution ID: 24-0369
Shriners Hospital for Crippled Children (Springfield)
616 Carew St
Springfield, MA 01104-2366
Med Sch Affil: G-02405
Specialty: ID
Institution ID: 24-0388

Stockbridge
Austen Riggs Center
35 Main St
Stockbridge, MA 01262-0682
Med Sch Affil: P
Institution ID: 24-0435

Worcester
Medical Center of Central Massachusetts
119 Belmont St
Worcester, MA 01605-3962
Med Sch Affil: M-02416
Specialty: IM
Institution ID: 24-0113
St Vincent Hospital
35 Winthrop St
Worcester, MA 01604-4583
Med Sch Affil: M-02416
Specialty: CD, DR, IM
Institution ID: 24-0361

University of Massachusetts Medical Center
55 Lake Ave N
Worcester, MA 01655
Med Sch Affil: M-02301, G-02301, G-02312
Specialty: AN, CCA, CCM, CD, CHN, CHP, D, DR, EM, END, FP, GE, GPM, GS, HO, ID, IM, IMG, N, NEP, NPM, OB/GYN, OM, ORS, OSM, P, PD, PS, PTH, PUD, RHU, RNR, TS, U, VHR, VS
Institution ID: 24-0724

University of Massachusetts Medical School
55 Lake Ave N
Worcester, MA 01655
Med Sch Affil: M-02416, L-02312
Specialty: NS
Institution ID: 24-0501

University of Michigan Hospitals
Office of Clinical Affairs
C201 Med Ina Box 0826
1500 E Medical Center Dr
Ann Arbor, MI 48109-0929
Med Sch Affil: M-02501
Specialty: AN, AP, APN, APF, CCS, CD, CHN, CHP, D, DR, EM, END, FP, GE, GS, HEM, HMP, ID, IM, IMG, MFD, N, NEP, NM, NP, NPM, OB/GYN, OPH, ORS, OT, P, PCC, PDC, PDR, PDP, PDR, PDS, PG, PHE, PM, PMP, FN, PS, PTH, RHU, RNR, RO, SPS, TS, U, UUP, VHR, VS
Institution ID: 24-0256

University of Michigan School of Public Health
108 S Observatory
Ann Arbor, MI 48103-2029
Med Sch Affil: L-02501
Specialty: OM
Institution ID: 25-0026

Dearborn
Oakwood Hospital
1501 Oakwood Blvd
Dearborn, MI 48126-3000
Med Sch Affil: M-02507, M-02091
Specialty: DR, FP, IM, OB/GYN, TY
Institution ID: 25-0466

Detroit
Children's Hospital of Michigan
3901 Beaubien Blvd
Detroit, MI 48201-2186
Med Sch Affil: M-02507
Specialty: MFD, PDR, PMP
Institution ID: 25-0456

Grace Hospital
6671 W Outer Dr
Detroit, MI 48235
Med Sch Affil: M-02507
Specialty: OB/GYN
Institution ID: 25-0291

Henry Ford Hospital
2799 W Grand Blvd
Detroit, MI 48202-2669
Med Sch Affil: L-02501
Specialty: AN, AP, APN, APF, CCS, CD, CHN, CHP, D, DR, EM, END, FP, GE, GS, HO, ID, IM, IMG, N, NEP, NM, OB/GYN, OPH, ORS, OT, P, PCC, PDR, PDP, PTH, RHU, RNR, RO, TS, U, VHR, VS
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Siina Hospital
6707 W Outer Dr
Detroit, MI 48235-2800
Med Sch Affil: M-02507
Specialty: AN, CCA, CD, DR, FP, GE, GS, IM, OB/GYN, OPH, P, PM, PUD, RHU
Institution ID: 25-0114

St John Hospital and Medical Center
22101 Moross Rd
Detroit, MI 48226-2172
Med Sch Affil: M-02507
Specialty: EM, FP, GS, ID, IM, MFD, OB/GYN, PD, PTH, TY
Institution ID: 25-0486

Wayne County Medical Examiner's Office
400 E Lafayette Ave
Detroit, MI 48226
Specialty: PDP
Institution ID: 26-0620
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730 S 7th St
Minneapolis, MN 55403-1798
Specialty: PAF
Institution ID: 28-0703

Minneapolis Sports Medicine Center
701 25th Ave S
Minneapolis, MN 55404
Specialty: OSM
Institution ID: 28-0624

Minnesota Spine Center
606 34th Ave S
St Paul, MN 55105
Specialty: OSM
Institution ID: 28-0629

University of Minnesota Hospital and Clinic
Harvard St at E River Rd
Minneapolis, MN 55455-5992
Med Sch Affil: M-02004
Specialty: MFD
Institution ID: 28-0224

University of Minnesota Medical School
UMHC Box 283
420 Delaware St SE
Minneapolis, MN 55455
Med Sch Affil: M-02004
Specialty: MFD
Institution ID: 28-0224

Keesler Medical Center
Air Force Medical Center
811 Medical Center
301 Fisher St Ste 107
Keesler AFB, MS 39504-2575
Med Sch Affil: M-02212, L-00106
Specialty: FS, IM, OBG, PD
Institution ID: 27-0567

Tuturo Medical Group/GE
305 S Gower St
Tuscaloosa, AL 35401
Med Sch Affil: G-02701
Specialty: PP
Institution ID: 27-0705

University of Mississippi School of Medicine
Jackson, MS 39216
Med Sch Affil: M-02701
Specialty: AN, CD, CHN, CHP, DR, EM, FP, GE, GS, HEM, HIS, ID, IM, M, N, NFP, GM, NDM, NS, OBG, ON, OPH, ORS, OTO, P, PCD, PD, PHO, PTH, PUD, TS, U
Institution ID: 27-0601

University of Mississippi-Kansas City School of Medicine
2411 Holmes
Kansas City, MO 64108-2792
Specialty: AN, CD, DR, EM, END, FP, FPG, GE, GI, HEM, HIS, ID, IM, N, NFP, GM, NDM, NS, OBG, ON, OPH, ORS, OTO, P, PCD, PD, PHO, PTH, PUD, TS, U
Institution ID: 28-0453

Springfield
Cox Medical Center North
1433 N Jefferson
Springfield, MO 65802-1995
Specialty: FP
Institution ID: 28-0186

St Louis
Barnes Hospital
One Barnes Hospital Plaza
St Louis, MO 63110
Med Sch Affil: M-02004
Specialty: APM, BAK, CCA, CD, CHN, CHP, DR, EM, ENO, ERI, FS, GI, HEM, HIS, ID, IM, M, N, NFP, GM, NDM, NS, OBG, ON, OPH, ORS, OTO, P, PCD, PD, PHO, PTH, PUD, TS, U
Institution ID: 28-0186

Missouri
Missouri University of Science and Technology
214 S Taylor St
Columbia, MO 65201
Med Sch Affil: M-02004
Specialty: MFD
Institution ID: 28-0124

University of Missouri-Columbia School of Medicine
1415 W 18th St
Columbia, MO 65201
Specialty: AN, APM, BAK, CCA, CD, CHN, CHP, DR, EM, ENO, ERI, FS, GI, HEM, HIS, ID, IM, M, N, NFP, GM, NDM, NS, OBG, ON, OPH, ORS, OTO, P, PCD, PD, PHO, PTH, PUD, TS, U
Institution ID: 28-0146

Shriners Hospital for Crippled Children (St Louis)
2001 S Lindbergh Blvd
St Louis, MO 63141-3597
Specialty: OP
Institution ID: 28-0146

St John's Mercy Medical Center
2110 S Lindbergh Blvd
St Louis, MO 63141-3597
Med Sch Affil: M-02004
Specialty: APM, BAK, CCA, CD, CHN, CHP, DR, EM, ENO, ERI, FS, GI, HEM, HIS, ID, IM, M, N, NFP, GM, NDM, NS, OBG, ON, OPH, ORS, OTO, P, PCD, PD, PHO, PTH, PUD, TS, U
Institution ID: 28-0146

St Louis Children's Hospital
One Children's Plaza
St Louis, MO 63110-1077
Med Sch Affil: M-02002, L-00106
Specialty: AN, CD, DR, EM, END, FP, FPG, GE, GI, HEM, HIS, ID, IM, M, N, NFP, GM, NDM, NS, OBG, ON, OPH, ORS, OTO, P, PCD, PD, PHO, PTH, PUD, TS, U
Institution ID: 28-0146

St Louis University School of Medicine
1400 South Grand Blvd
St Louis, MO 63104
Med Sch Affil: M-02004
Specialty: AN, APM, BAK, CCA, CD, CHN, CHP, DR, EM, ENO, ERI, FS, GI, HEM, HIS, ID, IM, M, N, NFP, GM, NDM, NS, OBG, ON, OPH, ORS, OTO, P, PCD, PD, PHO, PTH, PUD, TS, U
Institution ID: 28-0146

St Luke's Hospital
223 S Woods Mill Rd
St Louis, MO 63117
Med Sch Affil: M-02003, L-00106
Specialty: CD, IM
Institution ID: 28-0203
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<td>601 N 30th St Omaha, NE 68131</td>
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<td>Bishop Clarkson Memorial Hospital</td>
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New Hampshire

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<td>Memorial Hospital of Burlington County 175 Madison Ave Mount Holly, NJ 08060</td>
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<td>Med Sch Affil: L-03500</td>
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<td>Specialty: FP</td>
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<td>Institution ID: 33-0171</td>
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<td>Neptune</td>
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<td>Jersey Shore Medical Center 1945 Cortes Ave Hwy 33 Neptune, NJ 07754-0077</td>
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<td>Specialty: IM, OBG, PD, TY</td>
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<td>Institution ID: 33-0220</td>
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Newark
Newark Beth Israel Medical Center
201 Lyons Ave
Newark, NJ 07112
Med Sch Affil: M-03365
Specialties: DR, MP, OB-GYN
Institution ID: 38-0404

UMDNJ-New Jersey Medical School
Graduate Medical Education Office
185 S Orange Ave Rm C-595
Newark, NJ 07103-2714
Med Sch Affil: M-03365, L-02312
Specialties: AL, AN, APM, CCM, CPP, CD, CHN, CHP, D, DRP, END, GE, GS, HEM, ID, IM, IMG, MPD, N, NEP, OB-GYN, ON, OPH, ORS, OT, P, PCC, PD, FM, FMP, FS, PTH, RHU, TS, U, VS
Institution ID: 38-0502

United Hospitals Medical Center
(Presbyterian Hospital)
15 S 9th St
Newark, NJ 07107
Specialties: IM
Institution ID: 38-0484

Paramus
Bergen Pines County Hospital
E Ridgewood Ave
Paramus, NJ 07652-4131
Med Sch Affil: L-03365
Specialties: P
Institution ID: 38-0109

Paterson
St Joseph's Hospital and Medical Center
768 Main St
Paterson, NJ 07503-2991
Med Sch Affil: L-03364, L-03365
Specialities: MTF
Institution ID: 38-0319

Perth Amboy
Raritan Bay Medical Center-Perth Amboy Division
550 New Brunswick Ave
Perth Amboy, NJ 08861-3665
Med Sch Affil: L-03366
Specialties: IM
Institution ID: 38-0144

Phillipsburg
Warren Hospital
185 Roseberry St
Phillipsburg, NJ 08865-1684
Med Sch Affil: L-03366
Specialties: FP
Institution ID: 38-0138

Piscataway
UMDNJ-Robert Wood Johnson Medical School
675 Hoes Ln
Piscataway, NJ 08854-6535
Med Sch Affil: M-03366, L-02312
Specialties: AL, APM, CCM, CD, CHN, CHP, CRB, DRP, END, GE, GS, HEM, ID, IM, IMG, MPD, N, NEP, OB-GYN, ON, OPH, ORS, OT, P, PCC, PD, FM, FMP, FS, PTH, RHU, TS, U, VS
Institution ID: 38-0522

Plainfield
Muhlenberg Regional Medical Center
Park Ave and Randolph Rd
Plainfield, NJ 07061-3399
Med Sch Affil: M-03365
Specialties: IM
Institution ID: 38-0117

Somerville
Somerset Medical Center
110 Rehill Ave
Somerville, NJ 08876
Med Sch Affil: L-03366
Specialties: FP
Institution ID: 38-0356

South Orange
Seton Hall University School of Graduate Medical Education
406 S Orange Ave
South Orange, NJ 07079-3608
Specialties: AN, CCM, CD, END, PP, GE, HEM, ID, IM, OB-GYN, ON, ORS, OT, PD, PUD, RHU, TS
Institution ID: 38-0601

Summit
Overlook Hospital
99 Beavercreek
PO Box 220
Summit, NJ 07902-0220
Med Sch Affil: M-03365, L-03366
Specialties: DR, PP, IM, PD, TY
Institution ID: 38-0240

Trenton
Helene Fuld Medical Center
760 Brunswick Ave
Trenton, NJ 08619
Med Sch Affil: L-03366
Specialties: IM
Institution ID: 38-0150

St Francis Medical Center
601 Hamilton Ave
Trenton, NJ 08629-1986
Med Sch Affil: L-03366
Specialties: GS, IM
Institution ID: 38-0415

State of New Jersey Department of Health
John Fitch Plaza
CN 360
Trenton, NJ 08625-0980
Specialties: VH
Institution ID: 38-0620

Voorhees
West Jersey Hospital-Voorhees
101 Carrie Blvd
Voorhees, NJ 08043
Med Sch Affil: L-03365, L-04101
Specialties: PP
Institution ID: 38-0818

West Trenton
Trenton Psychiatric Hospital
PO Box 7500
West Trenton, NJ 08628-0006
Specialties: PP
Institution ID: 38-0423

Woodbury
Underwood-Memorial Hospital
500 N Broad St
Woodbury, NJ 08096
Med Sch Affil: L-04102
Specialties: FF
Institution ID: 38-0707

New Mexico
Albuquerque
University of New Mexico School of Medicine
Campus Box 535
Albuquerque, NM 87131-1516
Med Sch Affil: M-04001
Specialties: AN, APM, BK, CCM, CD, CHN, CHP, D, DR, EM, END, FOE, PP, GE, GS, HEM, HMP, HSQ, ID, IM, IMG, N, NEP, NFM, NS, OB-GYN, ON, OPH, ORS, OT, P, PCC, PD, FM, FMP, FS, PTH, RHU, RHR, TS, U, VS
Institution ID: 38-0610

New York
Albany
Albany Medical Center Hospital
43 New Scotland Ave
Albany, NY 12208-3478
Med Sch Affil: M-03365, L-03312
Specialties: AN, APM, CCA, CD, DR, EM, END, PP, GE, GS, HEM, HMP, ID, IM, IMG, N, NEP, NFM, NS, OB-GYN, ON, OPH, ORS, OT, P, PCC, PD, FM, FMP, FS, PTH, RHU, RHR, TS, U, VS
Institution ID: 38-0445

New York State Department of Health
651 Corning Tower
Empire State Plaza
Albany, NY 12237
Specialties: MFFH
Institution ID: 38-0456

Bay Shore
Southside Hospital
Montauk Hwy
Bay Shore, NY 11706
Med Sch Affil: L-03365
Specialties: FF
Institution ID: 38-0656

Binghamton
Wilson Memorial Regional Medical Center
(United Health Svcs)
20-42 Mitchell Ave
Binghamton, NY 13901
Med Sch Affil: M-03365, L-04101
Specialties: PP, IM, TS
Institution ID: 38-0110
New York

Sponsoring Institutions

New Hyde Park
Long Island Jewish Medical Center
270-05 76th Avenue
New Hyde Park, NY 11040
Med Sch Affil: M-00540, L-08008
Specialty: IM
Institution Id: 35-0658

New Rochelle
New Rochelle Hospital Medical Center
16 Guion Pl
New Rochelle, NY 10802-5500
Med Sch Affil: M-00539
Specialty: IM, NY
Institution Id: 35-06104

New York
Beth Israel Medical Center
Beth Israel Medical Center
First Ave at 16th St
New York, NY 10003
Med Sch Affil: M-00547, M-00546
Specialty: AN, CCM, CD, DR, END, FF, GE, GI, HIP, HI, IH, IM, MEM, NEP, OBG, OB, OB, PD, PD, PDD, PF, PFF, RHH, RNR, RQ, RY
Institution Id: 35-0628

Columbia University School of Public Health
619 W 168th St
New York, NY 10003
Med Sch Affil: L-05920
Specialty: OM
Institution Id: 35-06766

Cornell University Medical College
1300 York Ave
New York, NY 10021
Med Sch Affil: M-00530
Specialty: GP
Institution Id: 35-06719

Harlem Hospital Center
500 Lenox Ave
New York, NY 10037-1003
Med Sch Affil: M-00501
Specialty: CD, CHF, DR, GE, GS, ID, IM, NEP, OBG, OBG, P, PD, PS, PTH, PUD
Institution Id: 35-0618

Hospital for Joint Diseases Orthopaedic Institute
Hospital for Joint Diseases
Bernard Aronson Plaza
301 E 17th St
New York, NY 10003
Med Sch Affil: M-00510
Specialty: HSO, OP, OBG, OBM, OSS, SF
Institution Id: 35-0629

Hospital for Special Surgery
633 E 70th St
New York, NY 10021
Med Sch Affil: M-00500
Specialty: HSO, OAB, OR, OBM, OSM
Institution Id: 35-06159

Lenox Hill Hospital
100 E 77th St
New York, NY 10021-1833
Med Sch Affil: M-00510
Specialty: CD, DR, GE, GS, HO, IM, NEP, OBG, OPH, ORS, OSM, PTH, PUD, U
Institution Id: 35-0634

Manhattan Eye and Ear throat Hospital
210 E 64th St
New York, NY 10021
Med Sch Affil: L-05901, G-03519
Specialty: OPH, OTU
Institution Id: 35-0637

Memorial Sloan-Kettering Cancer Center
1275 York Ave
New York, NY 10021
Med Sch Affil: M-00520, L-05908, L-05212, G-03519
Specialty: CCA, CCM, GE, HEM, ID, IM, OMO, ON, PCP, P, PBD, PUD, RHH, RNR, RQ, RY, VIS
Institution Id: 35-06125

Metropolitan Hospital Center
1001 First Ave
New York, NY 10029
Med Sch Affil: M-00500
Specialty: M
Institution Id: 35-06103

Mount Sinai Medical Center
1 Gustave L Levy Pl
New York, NY 10029-0574
Med Sch Affil: M-00547
Specialty: CP
Institution Id: 35-06736

Mount Sinai School of Medicine
One Gustave L Levy Pl
New York, NY 10029-0574
Med Sch Affil: M-00547
Specialty: AI, AN, APFM, CCA, CCM, CD, CHN, CIP, D, DR, EM, END, GE, GEM, HS, HO, ID, IM, IM, MFG, R, NEP, NNM, OBG, OBG, ORS, OTU, P, PCE, PCE, PDC, PGR, PG, PH, PHN, PM, FSG, FSG, FSG, FSU, FTH, PUD, RRR, RSN, RSN, RSN, TQ, TQ, TQ, UT, VHR, VIS
Institution Id: 35-06963

New York Blood Center
130 E 67th St
New York, NY 10021
Specialty: BS
Institution Id: 35-08007

New York City Department of Health
125 W 50th St
RM 901 Box 28
New York, NY 10013
Specialty: PH
Institution Id: 35-06394

New York Downtown Hospital
170 William St
New York, NY 10038-2649
Med Sch Affil: M-00520, G-03519
Specialty: IM, OB
Institution Id: 35-06270

New York Eye and Ear Infirmary
310 E 14th St
New York, NY 10003-4200
Med Sch Affil: G-03509
Specialty: OPH
Institution Id: 35-0630

New York Hospital
515 E 65th St P-144
New York, NY 10021-1244
Med Sch Affil: M-00520
Specialty: AI, AN, APFM, CCA, CCM, CD, CHN, CIP, D, DR, EM, END, GE, GS, HO, ID, IM, NEP, NNM, NNM, OBG, OBG, ORS, OTH, PCT, PCD, PGR, PH, PHN, PS, PTH, PUD, RHR, RKN, RSN, S, TQ, VIS
Institution Id: 35-06262

Graduate Medical Education Directory

Teaching Institutions

Forest Hills
LaGuardia Hospital
102-01 66th Rd
Forest Hills, NY 11375-3059
Med Sch Affil: M-00520
Specialty: IM
Institution Id: 35-0658

Glen Cove
North Shore University Hospital at Glen Cove
101 Saint Andrews Ln
Glen Cove, NY 11542-2263
Med Sch Affil: L-00548
Specialty: FP
Institution Id: 35-0649

Jamaica
Catholic Medical Center of Brooklyn and Queens Inc
88-25 153rd St Ste 1C
Jamaica, NY 11432-8668
Med Sch Affil: M-00546, L-00546
Specialty: CD, FG, GS, ID, IM, OBG, OP, OR, OR, OR
Institution Id: 35-0658

Jamaica Hospital
8600 Van Wyck Expwy
Jamaica, NY 11428-3567
Med Sch Affil: L-00506, G-00530
Specialty: FP, IM, OBG
Institution Id: 35-06216

Manhasset
North Shore University Hospital
300 Community Dr
Manhasset, NY 11030-3876
Med Sch Affil: K-00530, L-00531, L-02312
Specialty: CCM, CC, CD, CHP, DR, GE, GS, HEM, ID, IM, IMG, N, NR, NEP, NFM, OBG, ON, OP, OF, PC, PD, PD, PPD, PG, PFT, RHH, RNR
Institution Id: 35-06467

Middletown
Middletown Psychiatric Center
110 Monhagen Ave
PO Box 1463
Middletown, NY 10940-6196
Specialty: P
Institution Id: 35-0582

Mineola
Winthrop-University Hospital
Winthrop-University Hospital
20 First St
Mineola, NY 11501-3597
Med Sch Affil: M-00548
Specialty: CD, DR, END, GE, HO, ID, IM, IMG, NEP, OBG, PCD, PDE, PTH, RRU
Institution Id: 35-0675

Mount Vernon
Mount Vernon Hospital
12 N 7th Ave
Mount Vernon, NY 10550-2066
Med Sch Affil: L-00509
Specialty: IM
Institution Id: 35-0255

New York
New York Hospital-Payne Whitney
Psychiatric Clinic
New York Hospital-Cornell Med Ctr
Payne Whitney Clinic (Box 140)
555 E 68th St
New York, NY 10021
Med Sch Affl: M-05030
Specialty: CHP-P
Institution ID: 35-0623

New York University Medical Center
550 First Ave
New York, NY 10016-1111
Med Sch Affl: M-05010, L-04100, L-0212
Specialty: AN, CCA, CD, CHN, CHP, D, DMP, DR, EM, END, GE, GS, HEM, HSP, ID, IM, IMG, N, N, NEP, NP, NFM, NR, NS, OBG, ON, OPH, ORS, OSM, OTO, P, PCC, PD, PDE, PDE, PDR, PHO, PIP, PM, PS, PTH, RHU, RNB, RO, TO, U, VS
Institution ID: 35-0660

North General Hospital
1579 Madison Ave
New York, NY 10029-5005
Med Sch Affl: L-0547
Specialty: GS, IM
Institution ID: 35-0608

Office of Chief Medical Examiner-City of New York
400 First Ave
New York, NY 10016
Specialty: POP
Institution ID: 35-0628

Presbyterian Hospital in the City of New York
The Presbyterian Hospital
Columbia-Presbyterian Medical Ctr
New York, NY 10032-3794
Med Sch Affl: M-05021
Specialty: AN, AN, CCA, CM, CD, CHN, CHP, D, DR, END, GE, GS, HEM, HSP, ID, IM, N, NEP, NP, NFM, NR, NS, OBG, ON, OPH, ORS, OTO, P, PD, PCC, PDE, PDR, PFS, PG, PHO, PM, PS, PTH, RHU, RNB, RO, TO, U, VS
Institution ID: 35-0629

Rusk Institute of Rehabilitation Medicine
400 E 56th St
New York, NY 10016-1111
Med Sch Affl: M-05019
Specialty: PMP
Institution ID: 35-0145

St Luke's-Roosevelt Hospital Center
1111 Amsterdam Ave
New York, NY 10025
Med Sch Affl: M-05001
Specialty: AN, AN, CCA, CD, CHP, CRS, DR, EM, END, GE, GS, HEM, HSP, ID, IM, IMG, NEP, NM, NR, OBG, ON, OPH, ORS, P, PCC, PD, PS, PTH, RHU, U
Institution ID: 35-0613

St Vincent's Hospital and Medical Center of New York
162 W 116th St
New York, NY 10011-5927
Med Sch Affl: M-05008, L-03308, G-03519
Specialty: MFD
Institution ID: 35-0341

Northport
Veterans Affairs Medical Center (Northport)
Middletown Rd
Northport, NY 11768
Med Sch Affl: M-05048
Specialty: NM
Institution ID: 35-0411

Oceanside
South Nassau Communities Hospital
3445 Oceanside Blvd
Oceanside, NY 11572
Med Sch Affl: L-03548
Specialty: FP
Institution ID: 35-0677

Patchogue
Brookhaven Memorial Hospital Medical Center
101 Hospital Rd
Patchogue, NY 11772
Specialty: FP
Institution ID: 35-0767

Poughkeepsie
St Francis Hospital North East
Poughkeepsie, NY 12601
Specialty: FP
Institution ID: 35-0443

Queens Village
Creedmoor Psychiatric Center
3000-3015 Westchester Blvd
Queens Village, NY 11427-2199
Specialty: P
Institution ID: 35-0138

Rochester
Highland Hospital of Rochester
1000 South Ave
Rochester, NY 14620-9996
Med Sch Affl: M-05045
Specialty: FP
Institution ID: 35-0897

Monroe County Medical Examiners Office
740 E Henrietta Rd
Rochester, NY 14623
Specialty: POP
Institution ID: 35-0554

Gouverneur Medical College
475 E Adams St
Syracuse, NY 13244
Med Sch Affl: M-05015
Specialty: AN, AP, AP, FY
Institution ID: 35-0443

University of Rochester
595 East Ave
Syracuse, NY 13210
Med Sch Affl: M-05015
Specialty: AN, AP, AP, FY
Institution ID: 35-0554

St Mary's Hospital
80 Genesee St
Rochester, NY 14611-9961
Med Sch Affl: M-05045
Specialty: IM
Institution ID: 35-0372

Strong Memorial Hospital of the University of Rochester
545 Elmwood Ave
Rochester, NY 14642
Med Sch Affl: M-05045
Specialty: AI, AN, AP, CCA, CM, CCF, CCM, CD, CHN, CHP, D, DR, EM, END, GE, GS, HEM, HSP, ID, IM, IMG, M, MFD, NEP, NM, NFM, NS, OBG, ON, OPF, ORS, OSM, OTO, P, PCC, PD, PDE, PDR, PHO, PM, PN, PS, PTH, RHU, RNB, RO, TO, U, VS
Institution ID: 35-0493

Schenectady
St Clare's Hospital of Schenectady
500 McCullers St
Schenectady, NY 12304
Med Sch Affl: L-03505
Specialty: FP
Institution ID: 35-0214

Staten Island
St Vincent's Medical Center of Richmond
356 Bard Ave
Staten Island, NY 10310-1999
Med Sch Affl: M-05006, G-03508
Specialty: FP
Institution ID: 35-0455

Staten Island University Hospital
475 Seaview Ave
Staten Island, NY 10306
Specialty: GS, IM, IM, OBG
Institution ID: 35-0186

Stony Brook
University Hospital-SUNY at Stony Brook
Health Science Center T4
Stony Brook, NY 11794-8410
Med Sch Affl: M-03545
Specialty: AL, AN, AP, AP, FY
Institution ID: 35-0550

University of Rochester
595 East Ave
Syracuse, NY 13210
Med Sch Affl: M-05015
Specialty: AN, AP, AP, FY
Institution ID: 35-0443

Utica
St Elizabeth Hospital
2360 Genesee St
Utica, NY 13501-5830
Specialty: FP
Institution ID: 35-0759

Valhalla
New York Medical College
Sunshine Cottage
Valhalla, NY 10595
Med Sch Affl: M-03505
Specialty: AN, AP, AP, AP, FY
Institution ID: 35-0756
West Point
Keller Army Community Hospital
US Army Medical Dept, Activity
West Point, NY 10996-1197
Specialty: OSM
Institution ID: 35-7271

Yonkers
St Joseph's Medical Center
127 S Broadway
Yonkers, NY 10701-6360
Med Sch Affil: L-03509
Specialty: FP
Institution ID: 35-0442

North Carolina

Asheville
Mountain Area Health Education Center
501 Biltmore Ave
Asheville, NC 28801-4588
Specialty: FP, OB/G
Institution ID: 36-0732

Chapel Hill
University of North Carolina Hospitals
101 Manning Dr
Chapel Hill, NC 27514
Med Sch Affil: M-03601, G-03607
Specialty: AN, BBK, CCP, CCS, CD, CHN, CHF, D, DR, EM, END, FOP, FP, GE, GPM, GS, HMF, HO, ID, IM, IMG, MM, MFD, N, NEP, NM, NF, NPM, NR, OBS, OBG, OPH, ORS, OTG, P, PCC, PCH, PCP, PD, PDR, PDR, PDE, PDE, PDE, PHE, PHO, PIP, PS, PTH, RHU, RNR, RO, TS, U, VHR, VS
Institution ID: 36-0478

Charlotte
Carolina Medical Center
1000 Blythe Blvd
Charlotte, NC 28208
Med Sch Affil: M-03601
Specialty: EM, FP, GS, IM, OB/G, OBS, OTR, PD, PM, TS, VS
Institution ID: 36-0291

Durham
Duke University Medical Center
Box 3706
Durham, NC 27710
Med Sch Affil: M-03607, L-03608, L-02212
Specialty: AI, AL, AN, APD, CCJ, CCM, CCR, CCS, CD, CHN, CHF, D, DMP, DR, END, FOP, FOP, GE, GS, HO, HSO, ID, IM, IMG, MM, MN, MPD, N, NEP, NM, NPM, NR, OBS, OBG, OPH, ORS, OTO, P, PCC, PD, PDE, PDE, PDE, PHE, PHO, PS, PTH, PTH, RHU, RNR, RO, TS, U, VHR, VS
Institution ID: 36-2222

Fayetteville
Cape Fear Valley Medical Center
PO Box 2000
Fayetteville, NC 28302-2000
Med Sch Affil: L-03607
Specialty: FP
Institution ID: 36-0731

Fort Bragg
Womack Army Medical Center
US Army Medical Dept
Attn: HSNK-CS (GMB Office)
Fort Bragg, NC 28307-5000
Med Sch Affil: L-03612, L-03607
Specialty: FP
Institution ID: 36-0410

Greensboro
Moses H Cone Memorial Hospital
1200 N Elm St
Greensboro, NC 27401-1020
Med Sch Affil: M-03601
Specialty: FP, IM
Institution ID: 36-0468

Greenville
East Carolina University School of Medicine
Brody Medical Sciences Bldg AD48
Greenville, NC 27858-3554
Med Sch Affil: M-03608
Specialty: AI, CD, CHF, EM, END, FP, FOP, GS, HMF, HO, ID, IM, IMG, MM, MFD, N, NEP, NM, NF, NPM, NR, OBS, OBG, OPH, ORS, OTG, P, PCC, PCH, PCP, PD, PDR, PDE, PDE, PDE, PHE, PHO, PIP, PS, PTH, RHU, RNR, RO, TS, U, VHR, VS
Institution ID: 36-0478

Wilmington
New Hanover Regional Medical Center
2101 S 17th St
PO Box 9025
Wilmington, NC 28402-9025
Med Sch Affil: M-03601
Specialty: GS, IM, OB/G
Institution ID: 36-0288

Winston-Salem
North Carolina Baptist Hospital
Medical Center Blvd
Winston-Salem, NC 27157-0001
Med Sch Affil: M-03605
Specialty: AI, AN, APD, CCA, CCM, CD, CHN, CHF, D, DMP, DR, EM, END, FOP, FP, GE, GS, HO, ID, IM, IMG, MM, MM, MN, MPD, N, NEP, NM, NPM, NR, OBS, OBG, OPH, ORS, OTO, P, PCC, PD, PDE, PDE, PDE, PHE, PHO, PS, PTH, PTH, RHU, RNR, RO, TS, U, VHR, VS
Institution ID: 36-0490

North Dakota
Grand Forks
Univ of North Dakota School of Medicine
501 Columbia Rd N
Grand Forks, ND 58203
Med Sch Affil: M-03701
Specialty: FP, GS, IM, TV
Institution ID: 37-0400

Ohio

Akron
Akron City Hospital (Summa Health System)
535 E Market St
Akron, OH 44309-2090
Med Sch Affil: M-03644, L-03640
Specialty: EM, FP, GS, IM, OB/G, OPH, ORS, PCD, PS, PTH, TV
Institution ID: 38-0215

Akron General Medical Center
Attn: Jaime Hoffman
400 Wabash Ave
Akron, OH 44307
Med Sch Affil: M-03644, L-03640
Specialty: EM, FP, GS, IM, MPD, OBG, OB/G, OB/G, TV
Institution ID: 38-0124

Children's Hospital Medical Center of Akron
One Perkins Sq
Akron, OH 44306-1002
Med Sch Affil: M-03604
Specialty: MPD, PD, PDR, SP
Institution ID: 38-0371

Barberton
Barberton Citizens Hospital
155 5th St NE
PO Box 550
Barberton, OH 44203-0550
Med Sch Affil: M-03644
Specialty: FP
Institution ID: 38-0164

Canton
Aultman Hospital
3600 6th St SW
Canton, OH 44710
Med Sch Affil: M-03644
Specialty: FP, OB/G, TV
Institution ID: 38-0148

Canton Medical Education Foundation
2600 Sixth St SW
Canton, OH 44710
Specialty: IM
Institution ID: 38-0059

Cincinnati
Bethesda Hospital Inc
619 Oak St
Cincinnati, OH 45206-5675
Med Sch Affil: L-03841, L-03840
Specialty: FP, OB/G
Institution ID: 38-0464

Children's Hospital Medical Center
3333 Burnet Ave
Cincinnati, OH 45229-3009
Med Sch Affil: M-03841
Specialty: AI, CHN, NPM, PD, PCD, PCD, PDR, PDES, PDS, PDS, PhD, PTH, PS, PTH, RHU, RNR, RO, TS, U, VHR, VS
Institution ID: 38-0002

Christ Hospital
2109 Auburn Ave
Cincinnati, OH 45219-2006
Med Sch Affil: M-03841
Specialty: IM, NM, OSM
Institution ID: 38-0492

Graduate Medical Education Directory
Ohio

Mercy Hospital of Toledo
2200 Jefferson Ave
Toledo, OH 43604-1181
Med Sch Affil: M-03843
Specialty: FP, TY
Institution ID: 38-0219

St Vincent Medical Center
2213 Cherry St
Toledo, OH 43608-2991
Med Sch Affil: M-03843
Specialty: EM
Institution ID: 38-0180

Toledo Hospital
2147 N Cove Blvd
Toledo, OH 43606-3965
Med Sch Affil: M-03843
Specialty: FP
Institution ID: 38-0218

Worthington Harding Hospital
445 E Granville Rd
Worthington, OH 43085-3185
Med Sch Affil: M-03840
Specialty: P
Institution ID: 38-0111

Wright-Patterson AFB
USAF Medical Center (Wright-Patterson)
4851 Sugar Maple Dr
Wright-Patterson AFB, OH 45433-5529
Med Sch Affil: M-03845, M-0212
Specialty: IM
Institution ID: 38-0336

Youngstown
St Elizabeth Hospital Medical Center
104 Belmont Ave
PO Box 1790
Youngstown, OH 44501-1790
Med Sch Affil: M-03844
Specialty: DR, FP, GS, IM, OB/GY, TY
Institution ID: 38-0164

Tod Children's Hospital
Western Reserve Care System
345 Oak Hill Ave
PO Box 900
Youngstown, OH 44501-0890
Med Sch Affil: M-03845
Specialty: M/D
Institution ID: 38-0754

Western Reserve Care System
345 Oak Hill Ave
Youngstown, OH 44501
Specialty: AN, FP, GS, IM, PD, PTH, TY
Institution ID: 38-0964

Oklahoma

Enid
Bass Memorial Baptist Hospital
600 S Monroe
PO Box 3168
Enid, OK 73702-3168
Med Sch Affil: G-08901
Specialty: FP
Institution ID: 39-0488

Norman
Griffin Memorial Hospital
900 E Main St
PO Box 161
Norman, OK 73069-0151
Med Sch Affil: G-03001
Specialty: P
Institution ID: 39-0286

Oklahoma City
Baptist Medical Center of Oklahoma
3300 NW Expy
Oklahoma City, OK 73112-4481
Med Sch Affil: G-03001
Specialty: DR, HSO
Institution ID: 39-0475

Office of the Chief Medical Examiner-State of Oklahoma
901 N Stonewall
Oklahoma City, OK 73117-1111
Specialty: FP
Institution ID: 39-0485

St Anthony Hospital
1000 N Lee
PO Box 265
Oklahoma City, OK 73101-0205
Med Sch Affil: G-03001
Specialty: FP
Institution ID: 39-0111

University Hospital and Clinics
PO Box 26307
Oklahoma City, OK 73128
Med Sch Affil: M-03841
Specialty: MYD
Institution ID: 39-0121

University of Oklahoma College of Medicine-Oklahoma City
Dean's Office
PO Box 3901
Oklahoma City, OK 73190
Med Sch Affil: M-03801
Specialty: AN, CD, CEP, D, DMP, DR, EM, END, FP, GE, GS, HO, ID, IM, IME, NC, NKP, NM, NF, NPM, NS, OB/GY, OM, OPH, OB/GY, OTO, P, PCC, PD, PDR, PHS, PG, PHO, PS, PTH, KHU, RO, RS, TS, TY, U, VIB
Institution ID: 39-0477

Tulsa
In His Image Inc
7306 S Lewis Ave Ste 100
Tulsa, OK 74136-6660
Specialty: FP
Institution ID: 39-0816

University of Oklahoma College of Medicine-Tulsa
2308 S Sheridan Rd
Tulsa, OK 74128-1677
Med Sch Affil: M-03801
Specialty: FP, GS, IM, PD, PNM, OB/GY, P, P
Institution ID: 39-0501

Oregon

Portland
Emanuel Hospital and Health Center
2501 N Garden Ave
Portland, OR 97227
Med Sch Affil: M-04002
Specialty: GS, IM, TY
Institution ID: 40-0229

Oregon Health Sciences University Hospital
3181 SW Sam Jackson Park Rd L579
Portland, OR 97201-3008
Med Sch Affil: M-04002
Specialty: AN, APM, CUM, CD, CHF, D, DR, EM, END, FP, GE, GS, HEM, HSFP, ID, IM, IDMG, N, NKP, NM, NPM, NS, OB/GY, OPH, OB/GY, OTO, P, PCC, PD, PDR, PHS, PG, PHO, PS, PTH, KHU, RO, RS, TS, U, VIB
Institution ID: 40-0109

Providence Medical Center
4906 NE Glisan St
Portland, OR 97213-2967
Med Sch Affil: G-04002
Specialty: IM
Institution ID: 49-0398

Shriners Hospital for Crippled Children (Portland)
5101 SW Sam Jackson Park Rd
Portland, OR 97210-4058
Med Sch Affil: L-04002
Specialty: OP
Institution ID: 49-0325

St Vincent Hospital and Medical Center
2020 SW Barnes Rd Ste 20
Portland, OR 97205-6991
Med Sch Affil: M-04002
Specialty: IM, PTH
Institution ID: 40-0133

Pennsylvania

Abington
Abington Memorial Hospital
1200 Old York Rd
Abington, PA 19043-1788
Med Sch Affil: M-04113, L-04109, L-04101
Specialty: FP, GS, IM, OB/GY
Institution ID: 41-0455

Allentown
Lehigh Valley Hospital
2011 Cedar Crest Blvd
PO Box 589
Allentown, PA 18105-1556
Med Sch Affil: M-04114, M-04106, L-04113
Specialty: CRS, GS, IM, OB/GY, PS, TV
Institution ID: 41-0724

Sacred Heart Hospital
421 Chestnut St
Allentown, PA 18102-3400
Med Sch Affil: M-04113
Specialty: FP
Institution ID: 41-0179

Altoona
Altoona Hospital
602 Howard Ave
Altoona, PA 16601-4999
Med Sch Affil: L-04114
Specialty: FP
Institution ID: 41-0220

Baia Cynwyd
Mercy Catholic Medical Center Inc
One Bala Plaza Ste 402
Bala Cynwyd, PA 19004
Specialty: DR, GS, IM, TY
Institution ID: 41-0503
York
York Hospital
1001 S George St
York, PA 17405
Med Sch Affil: M-04114, M-04101, L-02301
Specialties: EM, FP, GS, IM, OB/GYN
Institution ID: 414143

Puerto Rico
Bayamon
Hospital San Pablo
Calle Santa Cruz #70
Urb Santa Cruz
Bayamon, PR 00950
Med Sch Affil: L-04103
Specialties: FP
Institution ID: 42-0473

University Hospital Ramon Ruiz Arnau
Avend. Laurel y Santa Juana
Bayamón, PR 00956-0002
Med Sch Affil: M-04203
Specialties: FP, IM, PD, TY
Institution ID: 42-7019

Caguas
Caguas Regional Hospital
PO Box 5728
Caguas, PR 00726
Med Sch Affil: M-04301
Specialties: FP, PPG, IM, OB/GYN
Institution ID: 42-0470

Manati
Hospital Dr Alejandro Otero Lopez
PO Box 1142
Manati, PR 00674
Specialties: FP
Institution ID: 42-0416

Mayaguez
Dr Ramon E Betances Hospital-Mayaguez Medical Center
410 Carretera #2
Mayaguez, PR 00680-1522
Med Sch Affil: M-04301
Specialties: GS, IM, OB/GYN
Institution ID: 42-0417

Ponce
Dr Pila Hospital
PO Box 1910
Ponce, PR 00730-1910
Med Sch Affil: L-02002
Specialties: FP
Institution ID: 42-7416

Hospital de Damas
Ponce Bypass
Ponce, PR 00731
Med Sch Affil: M-04302
Specialties: CD, GE, IM, PUD, TY
Institution ID: 42-0289

Ponce Regional Hospital
Bo Quisho Lane
Carreno #114
Ponce, PR 00731
Med Sch Affil: M-04301, L-04202
Specialties: GS, IM, OB/GYN
Institution ID: 42-0194

Río Piedras
San Juan City Hospital
Ilacca #50
Milanés
Río Piedras, PR 00926
Med Sch Affil: M-04303, M-04201
Specialties: CD, ENDO, HEM, IM, OB/GYN, ON, PD, PUD, RHU, T
Institution ID: 42-0209

San German
Hospital de la Concepción
Box 286
San German, PR 00685-0001
Med Sch Affil: M-04202
Specialties: IM
Institution ID: 42-0478

San Juan
Puerto Rico Institute of Psychiatry
San Patricio Mental Health Center
GPO Box 3741
San Juan, PU 00936-3741
Specialties: P
Institution ID: 42-0487

University of Puerto Rico School of Medicine
PO Box 395879
San Juan, PR 00936-5037
Med Sch Affil: M-04201
Specialties: AN, CD, CHEF, D, DR, EM, END, GE, GS, HEM, ID, IM, IMAG, N, NEF/PM, NPM, NS, OB/GYN, OPH, ORS, OTO, P, PD, PDP, PHO, PM, PTH, PUD, RHU, RO, U
Institution ID: 42-0464

Veterans Affairs Medical Center (San Juan)
One Veterans Plaza
San Juan, PR 00927-5800
Med Sch Affil: M-04201, L-04203
Specialties: CD, ID, IM, NEF, PM, PUD
Institution ID: 42-0285

Rhode Island
East Providence
Emma Pendleton Bradley Hospital
1011 Veterans Memorial Parkway
East Providence, RI 02915
Med Sch Affil: M-04301
Specialties: CIP
Institution ID: 43-0432

Pawtucket
Memorial Hospital of Rhode Island
111 Brewster Street
Pawtucket, RI 02860
Med Sch Affil: M-04301, L-02301
Specialties: FP, IM
Institution ID: 43-0436

Providence
Butler Hospital
345 Blackstone Blvd
Providence, RI 02906
Med Sch Affil: M-04301
Specialties: P
Institution ID: 43-0483

Miriam Hospital
The Miriam Hospital
104 Summit Ave
Providence, RI 02906
Med Sch Affil: M-04303
Specialties: CCM, IM, TY
Institution ID: 43-0432

Rhode Island Hospital
588 Eddy St
Providence, RI 02903-4970
Med Sch Affil: M-04301, G-00415
Specialties: AI, CCM, CCS, CD, CEN, CHEF, DR, EM, END, GE, GS, IM, N, NEF/PM, PS, OB/GYN, OPH, ORS, PDE, PG, PHO, PD, PTH, SF, U
Institution ID: 43-0281

Roger Williams Medical Center
231 Chalkstone Ave
Providence, RI 02908-4736
Med Sch Affil: M-04301
Specialties: CD, D, DMP, HEM, ID, IM, ON, PD, PUD, RHU
Institution ID: 43-0438

Women and Infants Hospital of Rhode Island
101 Dudley St
Providence, RI 02906-2401
Med Sch Affil: M-04301
Specialties: NPM, OB/GYN
Institution ID: 43-0434

South Carolina
Anderson
Anderson Area Medical Center
800 N Fann St
Anderson, SC 29621
Med Sch Affil: L-04504, L-04501
Specialties: FP
Institution ID: 45-4732

Charleston
Medical University of South Carolina College of Medicine
171 Ashley Ave
Charleston, SC 29425-2201
Med Sch Affil: M-04501
Specialties: AN, CD, CHEF, D, DMP, DR, EM, END, POP, PP, GE, GS, HO, ID, IM, N, NEF/PM, NPM, NS, OB/GYN, OPH, ORS, OTO, P, PCG, PD, PD, PDP, PHO, PM, PTH, PUD, RHU, RR, RO, TS, U, VIR
Institution ID: 45-0901

Columbia
Richland Memorial Hospital-Univ of South Carolina Sch of Med
Five Richard Medical Plk
Columbia, SC 29033
Med Sch Affil: M-04504, L-04501
Specialties: AN, APM, CD, EM, END, FF, GE, GS, IM, OB/GYN, ON, OPH, ORS, PD, PHO, PUD
Institution ID: 45-0866

University of South Carolina School of Medicine
Office of the Dean
5438 Garners Ferry Rd
Columbia, SC 29090
Med Sch Affil: M-04504
Specialties: MPH
Institution ID: 45-0801
Tennessee

Chattanooga
University of Tennessee College of Medicine-Chattanooga
921 E Third St Ste 400
Chattanooga, TN 37403
Med Sch Affil: M-04706
Specialty: GS, IM, OB/GYN, OB/GYN, OB/GYN, OB/GYN, OB/GYN, OB/GYN, OB/GYN, OB/GYN, OB/GYN
Institution ID: 47-0490

Jackson
Jackson-Madison County General Hospital
284 Sumner Dr
Jackson, TN 38301-3883
Med Sch Affil: M-04706
Specialty: FP
Institution ID: 47-0490

Johnson City
James H Quillen College of Medicine
Box 70671
East Tennessee State University
Johnson City, TN 37614-0571
Med Sch Affil: M-04706
Specialty: FP
Institution ID: 47-0492

Knoxville
University of Tennessee Graduate School of Medicine
1904 Alcoa Hwy
Knoxville, TN 37920-8999
Med Sch Affil: M-04706
Specialty: Endocrinology, Diabetes, & Metabolism
Institution ID: 47-0448

Memphis
Baptist Memorial Hospital
809 Madison Ave
Memphis, TN 38146
Med Sch Affil: M-04706
Specialty: FP
Institution ID: 47-0882

Methodist Hospital-Central Unit
1265 Union Ave
Memphis, TN 38104-3416
Med Sch Affil: M-04706
Specialty: FP
Institution ID: 47-0113

University of Tennessee College of Medicine
906 Court Ave PO Box 19A
Memphis, TN 38163-9969
Med Sch Affil: M-04706, 44-0707
Specialty: FP
Institution ID: 47-0474

Nashville
Baptist Hospital
Department of Medicine
2000 Church St
Nashville, TN 37220-0001
Med Sch Affil: M-04706, L-04736
Specialty: IM
Institution ID: 47-0183

George W Hubbard Hospital of Meharry Medical College
1065 D B Todd Blvd
Nashville, TN 37208
Med Sch Affil: M-04707
Specialty: FP
Institution ID: 47-0255

Vanderbilt University Medical Center
1161 21st Ave S
Nashville, TN 37232-3283
Med Sch Affil: M-04706
Specialty: Anesthesiology, Cardiology, Critical Care Medicine, Endocrinology, Diabetes, & Metabolism, Gastroenterology, Hematology, Oncology, Nephrology, Neurology, Pediatrics, Psychiatry, Radiology, Surgery, Thoracic Surgery
Institution ID: 47-0487

Texas

Amarillo
Texas Tech University Health Sciences Center at Amarillo
1400 Wallace Blvd
Amarillo, TX 79106
Med Sch Affil: M-04815
Specialty: FP
Institution ID: 48-0520

Austin
Austin State Hospital
4110 Guadalupe
Austin, TX 78751-4296
Specialty: CHP
Institution ID: 48-0388

Central Texas Medical Foundation
Department of Medical Education
601 E 15th St
Austin, TX 78701
Med Sch Affil: L-04802
Specialty: FP
Institution ID: 48-0451

Texas Department of Health
1100 W 44th St
Austin, TX 78756
Specialty: FP
Institution ID: 48-0458

Baytown
San Jacinto Methodist Hospital
4401 Garth Rd
Baytown, TX 77520
Med Sch Affil: M-04814
Specialty: FP
Institution ID: 48-0579
Texas

Port Arthur
St Mary Hospital
3535 Gates Blvd Ste 150
Port Arthur, TX 77642-1111
Med Sch Aff: G-04022
Specialty: FP
Institution ID: 48-7021

San Antonio
Bexar County Forensic Science Center
7397 Lewis Pasteur
San Antonio, TX 78229-4665
Specialty: POP
Institution ID: 48-8027

University of Texas Medical School at San Antonio
Office of the Medical Dean
Univ of Texas Health Science Ctr
7703 Floyd Curl Dr
San Antonio, TX 78284-7790
Med Sch Aff: M-04813
Specialty: AI, AN, APM, BSK, CD, CHEP, D, DR, END, FF, GE, GS, HEM, HMP, HS0, ID, IM, IMC, N, NFP, NM, NS, OAR, OBG, ON, OTH, ONS, OSM, OTO, P, PCC, PCP, PD, PDE, PHO, PM, PTH, S, SHU, RNR, RO, SP, TS, U, V, VR
Institution ID: 48-6496

USAFSAM/AFAP
San Antonio, TX 78236-5301
Med Sch Aff: L-02312
Specialty: AM
Institution ID: 48-0490

Temple
Scott and White Memorial Hospital
Graduate Medical Education
2401 S 31st St
Temple, TX 76508-6001
Med Sch Aff: M-04816, L-04802
Specialty: AN, CD, CR, EM, END, FF, GE, GS, HEM, HMP, IM, MFD, OBG, ON, OTH, ONS, P, PD, PS, PTH, PUD, U, VR
Institution ID: 48-0149

Tyler
University of Texas Health Center at Tyler
US Hwy 271 and State Hwy 155
PO Box 2006
Tyler, TX 75719
Specialty: FP, ON
Institution ID: 48-0581

Waco
McClellan County Medical Education and Research Foundation
1600 Providence Dr
PO Box 3276
Waco, TX 76707
Specialty: FP
Institution ID: 48-0583

Wichita Falls
North Central Texas Medical Foundation
1301 3rd St
Wichita Falls, TX 76301
Specialty: FP
Institution ID: 48-0581

Utah
Murray
The Orthopedic Specialty Hospital
5849 S 200 E
Murray, UT 84107
Specialty: OSM
Institution ID: 48-6018

Salt Lake City
FHP of Utah Inc
35 W Broadway
Salt Lake City, UT 84101
Specialty: FP
Institution ID: 48-6017

LDS Hospital
Eighth Ave and C St
Salt Lake City, UT 84143-1001
Med Sch Aff: M-04801, L-02312
Specialty: IM, IO, TO, TY
Institution ID: 48-6490

University of Utah Medical Center
Graduate Medical Education
50 N Medical Dr Rm: 10412
Salt Lake City, UT 84132
Med Sch Aff: M-04801, L-02312
Specialty: AN, CCM, CCF, CHN, CHP, CHP, D, DR, END, FF, GE, GS, HEM, HMP, HS0, ID, IM, IMC, N, MFD, NFP, NF, NPM, NR, NS, OBG, ON, OP, OPH, OSM, OSS, OTO, P, PD, PPH, POP, PM, PS, PTH, PUD, RHH, RNR, RO, TS, U, VR
Institution ID: 48-0247

Vermont
Burlington
Medical Center Hospital of Vermont
111 Colchester Ave
Burlington, VT 05401
Med Sch Aff: M-05002
Specialty: AN, APM, CD, DR, END, FF, GE, GS, HO, IM, X, N, NED, NPM, NS, OBG, ONS, OSM, OTO, P, PEC, PPD, PTH, PUD, RHH, U, VR
Institution ID: 50-0480

Virginia
Alexandria
Alexandria Hospital
4320 Seminary Rd
Alexandria, VA 22304
Med Sch Aff: L-02312, G-01001
Specialty: VIB
Institution ID: 51-6412

Arlington
Arlington Hospital
1701 N George Mason Dr
Arlington, VA 22205-3698
Med Sch Aff: M-01002, L-02312
Specialty: OSM
Institution ID: 51-6501

Charlottesville
University of Virginia Medical Center
McKim Hall Rm 1044
Jefferson Park Ave
Charlottesville, VA 22208
Med Sch Aff: M-05101
Specialty: AI, AN, CCC, CCM, CDP, CHP, CD, DR, EM, END, FP, GE, GS, HEM, HSP, ID, IM, IMC, MFC, N, NFP, NF, NFPM, NR, NS, OAR, OBG, ONS, OPH, OSM, OTO, P, PFR, PGC, PPC, PPD, PM, PS, PTH, PUD, RHH, RNR, RO, TS, U
Institution ID: 51-6492

Falls Church
Fairfax Hospital
3000 Gallows Rd
Falls Church, VA 22046
Med Sch Aff: M-01005, L-02312, L-01001, G-05104, G-01003
Specialty: PT, HH
Institution ID: 51-6492

Fort Belvoir
DeWitt Army Community Hospital
US Army Medical Dept Activity
Atn: HSSA-DCS
Port Belvoir, VA 22050-6901
Med Sch Aff: L-0012
Specialty: FP
Institution ID: 51-6577

Lynchburg
Centra Health Inc
2067 Langhorne Rd
Lynchburg, VA 24501
Med Sch Aff: G-06101
Specialty: FP
Institution ID: 51-6719

Newport News
Riverside Regional Medical Center
600 J Clyde Morris Blvd
Newport News, VA 23601-1975
Med Sch Aff: L-05107, G-05104, G-02312
Specialty: GB, TP
Institution ID: 51-6108

Norfolk
Eastern Virginia Graduate School of Medicine
358 Mowbray Arch
PO Box 1080
Norfolk, VA 23501
Med Sch Aff: M-05107
Specialty: DR, EM, FP, GE, GS, IM, N, OBG, OPH, OTO, P, PD, PM, PTH, RO, U, VS
Institution ID: 51-6714

Portsmouth
Naval Medical Center (Portsmouth)
Office of Academic Affairs
Portsmouth, VA 23708-5000
Med Sch Aff: M-05107, G-02312
Specialty: AN, APM, EM, GE, GS, IM, NFP, OBG, ORS, OTO, P, PD, PTH, PUD, TX, U
Institution ID: 51-6814
Richmond

Medical College of Virginia Hospitals
West Hospital 6th Fl S Wing
PO Box 980357
1100 E Broad St
Richmond, VA 23298-0257
Med Sch Affil: M-05104
Specialty: MFD
Institution ID: 51-0457

Medical College of Virginia/Virginia Commonwealth University
1200 E Broad St
PO Box 980357
Richmond, VA 23298-0257
Med Sch Affil: M-05104
Specialty: AI, AN, APFM, CCP, CD, CBN, CHP, D, DR, END, FOP, GP, GR, HS, ID, IM, IMG, N, NBD, NM, NF, NFM, NS, OB, OPH, ONS, OT, OTO, F, PCC, PCH, PCP, PD, PDC, PH, PI, PM, PS, PTH, RHU, RNR, RO, TS, U, VS
Institution ID: 51-8801

Orthopaedic Research of Virginia
8010 Three Chopt Road
Richmond, VA 23229
Specialty: OSM
Institution ID: 51-8026

Roanoke

Carilion Health System
1212 Third St SW
Roanoke, VA 24015
Specialty: CD, CP, GS, ID, IM, OB, P, PUD, TY
Institution ID: 51-8024

Washington

Bremerton

Naval Hospital (Bremerton)
Naval Hospital
Boone Rd
Bremerton, WA 98312-1988
Med Sch Affil: M-05404, G-00312
Specialty: FP
Institution ID: 54-7063

Olympia

St Peter Hospital
525 Lilly Rd NE
Olympia, WA 98506
Med Sch Affil: M-05404
Specialty: FP
Institution ID: 54-6004

Renton

Valley Medical Center
400 S 4th St
Renton, WA 98055
Med Sch Affil: G-05404
Specialty: FP
Institution ID: 54-0519

Seattle

Children's Hospital and Medical Center
4500 Sand Point Way NE
PO Box C-5371
Seattle, WA 98105
Med Sch Affil: M-05404
Specialty: Peds
Institution ID: 54-0311

Group Health Cooperative of Puget Sound
521 Wall St
Seattle, WA 98121
Med Sch Affil: M-05404
Specialty: FP
Institution ID: 54-0498

King County Medical Examiner's Office
325 5th Ave
ZA-57
Seattle, WA 98104-2400
Med Sch Affil: L-06404
Specialty: POP
Institution ID: 54-0615

Northwest Colon and Rectal Clinic PS
606 Broadway Ste 400
Seattle, WA 98122
Specialty: CRB
Institution ID: 54-8805

Providence Medical Center
500 17th Ave
PO Box C-34008
Seattle, WA 98124
Med Sch Affil: M-05404
Specialty: FP
Institution ID: 54-0139

Swedish Medical Center-Seattle
747 Broadway
PO Box 14990
Seattle, WA 98114-0999
Med Sch Affil: M-05404
Specialty: PP, FS
Institution ID: 54-0481

University of Washington School of Medicine
1959 NE Pacific St Rm 3300
Mailstop SC-64
Seattle, WA 98195
Med Sch Affil: M-05404, L-02312
Specialty: AI, ALI, AN, APFM, CCM, CCP, CD, CBN, CHP, D, DR, END, FOP, GP, GS, HEM, HSO, ID, IM, IMG, N, NFP, NM, NS, OB, OPH, ONS, OTO, F, PCC, PCH, PCP, PD, PDC, PH, PI, PM, PS, PTH, RHU, RNR, RO, TS, U, VIB, VS
Institution ID: 54-0602

University of Washington School of Public Health
Health Sciences Bldg F350 90200
Seattle, WA 98195
Med Sch Affil: L-06404
Specialty: MPH, OM
Institution ID: 54-0604

Virginia Mason Medical Center
Housestaff Affairs (HH-ME)
925 Seneca St
Seattle, WA 98101
Med Sch Affil: L-06404
Specialty: AN, APFM, DR, GS, IM, TY
Institution ID: 54-0846

Spokane

Deaconess Medical Center
800 W 4th Ave
PO Box 248
Spokane, WA 99210-0248
Med Sch Affil: L-06404
Specialty: TC
Institution ID: 54-0392

Inland Empire Hospital Services Association
101 8th TAP CP
Spokane, WA 99200
Specialty: FY
Institution ID: 54-051f

Sacred Heart Medical Center
101 W 6th Ave
PO Box 2525
Spokane, WA 99202-2525
Med Sch Affil: M-05404
Specialty: DR, IM, TY
Institution ID: 54-0402

Tacoma

Madigan Army Medical Center
Commander:
Attr: HS//EDME
Tacoma, WA 98431-5001
Med Sch Affil: M-05404, G-03312
Specialty: AN, CD, DR, EM, END, FF, GS, H, IM, IMG, N, OB, OPH, ONS, OT, PD, PH, PTH, PUD, TY, U
Institution ID: 54-8893

Tacona General Hospital
315 S St
PO Box 5377
Tacoma, WA 98405
Med Sch Affil: M-05404
Specialty: FP
Institution ID: 54-0566

Vancouver

Southwest Washington Medical Center
PO Box 1650
Vancouver, WA 98685
Specialty: FP
Institution ID: 54-8897

Yakima

Yakima Valley Memorial Hospital
2811 Tieton Dr
Yakima, WA 98902
Specialty: FP
Institution ID: 54-0610

West Virginia

Charleston

Charleston Area Medical Center
PO Box 1547
Charleston, WV 25326-1547
Med Sch Affil: M-05501
Specialty: CHIP, PP, GS, IM, MP, MFD, OB, P, PD
Institution ID: 55-08450

Clarksburg

United Hospital Center
3 Hospital Plaza
PO Box 1680
Clarksburg, WV 26302-1550
Med Sch Affil: L-05501
Specialty: FP
Institution ID: 55-0750

Huntington

Marshall University School of Medicine
Doctors Memorial Bldg
1801 Sixth Ave
Huntington, WV 25705-5000
Med Sch Affil: M-05502
Specialty: CD, EN, FY, GS, ID, IM, IMG, MFD, OB, P, PD, PUD, TY
Institution ID: 55-0501
Morgantown
West Virginia University Hospitals
PO Box 8568
Morgantown, WV 26508-8568
Med Sch Affil: M-05601
Specialty: AN, CD, CEN, D, DMP, DR, EM, END, FP, GE, GS, ID, IM, IM, NP, M, MFP, N, NEF, NP, N, OB, OB-GYN, ON, OPH, ORS, OT, O, OBGYN, OT, POG, PS, DPC, PTH, PTN, TS, U, VR
Institution ID: 56-0428

West Virginia University School of Medicine
PO Box 9000
Morgantown, WV 26506-9000
Med Sch Affil: M-05501
Specialty: OM
Institution ID: 55-0602

Morgantown
West Virginia University Hospitals
PO Box 8568
Morgantown, WV 26508-8568
Med Sch Affil: M-05601
Specialty: IM
Institution ID: 56-0425

Wheeler
Ohio Valley Medical Center
2000 Eoff St
Wheeling, WV 26003
Med Sch Affil: L-05601
Specialty: FP
Institution ID: 56-0431

Wheeler
Wheeling Hospital
Medical Pavilion
Wheeling, WV 20003-3110
Med Sch Affil: L-05601
Specialty: FP
Institution ID: 56-0431

Wisconsin
Appleton
Appleton Medical Center
1518 N Meade St
Appleton, WI 54911
Med Sch Affil: U-05605
Specialty: FP
Institution ID: 56-0724

Eau Claire
Luther Hospital
1221 Whipple St
Call Box 6
Eau Claire, WI 54702-4125
Med Sch Affil: G-05605
Specialty: FP
Institution ID: 56-0389

Janesville
Mercy Health System
1000 Mineral Point Ave
PO Box 6068
Janesville, WI 53545
Specialty: FP
Institution ID: 56-0333

La Crosse
Gundersen Medical Foundation-La Crosse Lutheran Hospital
1836 South Ave
La Crosse, WI 54601-5429
Med Sch Affil: M-05606
Specialty: GS, IM, TY
Institution ID: 56-0354

St Francis Medical Center
700 West Ave S
La Crosse, WI 54601-4783
Specialty: FP
Institution ID: 56-0718

Madison
St Marys Hospital Medical Center
707 5 Mills St
Madison, WI 53715-0450
Med Sch Affil: L-05605
Specialty: FP
Institution ID: 56-0459

University of Wisconsin Hospital and Clinics
600 Highland Ave H-4821
Madison, WI 53792-6310
Med Sch Affil: M-05605
Specialty: AI, AN, BHI, CCA, CCE, CD, CHN, CHF, D, DMR, END, GE, GS, HEM, ID, IM, IM, IMG, N, NER, NM, NPM, NS, OB-GYN, ON, OBGYN, ORS, OT, OTO, OT, POG, PS, DPC, PTH, PTN, TS, VR
Institution ID: 56-0174

Marshfield
Marshfield Clinic-St Joseph’s Hospital
1000 N Oak Ave
Marshfield, WI 54449-5777
Med Sch Affil: M-05605
Specialty: GS, IM, IMG, PD, TY
Institution ID: 56-0364

Milwaukee
Medical College of Wisconsin Affiliated Hospitals Inc
8701 Watertown Plank Rd
Milwaukee, WI 53226
Med Sch Affil: M-05605
Specialty: AI, AN, AP, BH, BHI, CCA, CCE, CD, CHM, CHF, D, DMR, END, GE, GS, HEM, ID, IM, IMG, MP, N, NER, NM, NPM, NS, OB, OB-GYN, ON, OP, OPH, ORS, OT, P, PD, PDP, PDR, PG, PHO, PM, PMP, PS, DPH, PTN, PUT, RHI, RNR, RO, TS, U, VIS, VS
Institution ID: 56-0444

Milwaukee County Medical Examiner’s Office
933 W Highland Ave
Milwaukee, WI 53233-1445
Specialty: POP
Institution ID: 56-0618

Sinaia Samaritan Medical Center
945 N 11th St
PO Box 342
Milwaukee, WI 53201-0342
Med Sch Affil: M-05606, G-05606
Specialty: CD, GE, IM, IMG, OB, OB
Institution ID: 56-0379

St Joseph’s Hospital
5000 W Chamber St
Milwaukee, WI 53210
Med Sch Affil: G-05606
Specialty: EM, TY
Institution ID: 56-0379

St Luke’s Medical Center
PO Box 3901
Milwaukee, WI 53201-2901
Med Sch Affil: L-05605, G-05606
Specialty: DR, FP, NM, PTN, TY
Institution ID: 56-0377
Primary Clinical Sites

Alabama

Montgomery
Baptist Medical Center
PO Box 11010
Montgomery, AL 36111-1010
Med Sch Affil: G-00102
Specialty: IM
Institution ID: 01-6861

Arizona

Scottsdale
Mayo Clinic (Scottsdale)
15400 E Shea Blvd
Scottsdale, AZ 85259
Med Sch Affil: M-02608
Specialty: GS, TY
Institution ID: 03-8019

Arkansas

El Dorado
Area Health Education Center (South Arkansas)
480 W Paulk Ave
El Dorado, AR 71730
Specialty: FP
Institution ID: 04-0481

Fayetteville
Area Health Education Center (Northwest)
2607 N Joyce
Fayetteville, AR 72703
Specialty: FP
Institution ID: 04-0470

Fort Smith
Sparks Regional Medical Center
PO Box 17006
Fort Smith, AR 72917-7006
Med Sch Affil: G-00401
Specialty: FP
Institution ID: 04-0407

Jonesboro
St Bernard Regional Medical Center
PO Box 9370
Jonesboro, AR 72405-9320
Med Sch Affil: G-00401
Specialty: FP
Institution ID: 04-0478

Pine Bluff
Jefferson Regional Medical Center
1515 W 42nd Ave
Pine Bluff, AR 71603
Med Sch Affil: G-00401
Specialty: FP
Institution ID: 04-0465

Texarkana
St Michael Hospital
Sixth and Eared St
Texarkana, AR 75502
Specialty: FP
Institution ID: 04-7012

California

Anaheim
Kaiser Foundation Hospital (Anaheim)
441 N Lakeview Ave
Anaheim, CA 92807-6520
Specialty: FP
Institution ID: 05-6043

Downey
LAC-Rancho Los Amigos Medical Center
7501 E Imperial Hwy 11711B
Downey, CA 90242
Med Sch Affil: M-00501, G-01401, G-00515
Specialty: FPG
Institution ID: 06-6054

Fontana
Kaiser Foundation Hospital (Fontana)
6661 Sierra Ave
Fontana, CA 92335
Med Sch Affil: L-00512
Specialty: FP
Institution ID: 06-6056

Los Angeles
Kaiser Foundation Hospital (Los Angeles)
Hospital Administration
4687 Sunset Blvd
Los Angeles, CA 90027
Med Sch Affil: M-00514, L-02312
Specialty: AL, CD, DR, FP, FPG, GE, GS, ID, IM, N, NRP, OB, PK, 90, U
Institution ID: 06-0285

Kaiser Foundation Hospital (West Los Angeles)
6641 Cadillac Ave
Los Angeles, CA 90044
Med Sch Affil: G-00514
Specialty: HSP
Institution ID: 06-0742

San Francisco
Kaiser Foundation Hospital (San Francisco)
Graduate Medical Education Office
2425 Geary Blvd
San Francisco, CA 94115-3995
Med Sch Affil: L-00602
Specialty: IM, OBG, PD, PTH
Institution ID: 05-0204

Santa Clara
Kaiser Permanente Medical Center (Santa Clara)
500 Kiely Blvd
Santa Clara, CA 95051-5386
Med Sch Affil: M-00111
Specialty: IM, OBG
Institution ID: 05-0407

Woodland Hills
Kaiser Foundation Hospital (Woodland Hills)
5001 DeSoto Ave
Woodland Hills, CA 91364-4084
Med Sch Affil: G-00014
Specialty: FP
Institution ID: 05-6068

Colorado

Aspen
Orthopaedic Associates of Aspen and Glenwood
100 E Main St Ste 101
Aspen, CO 81611
Specialty: OSM
Institution ID: 07-0013

Englewood
Swedish Medical Center
501 E Hampden Ave
FY Box 2961
Englewood, CO 80150
Specialty: FP
Institution ID: 07-0020

Connecticut

Danbury
Danbury Hospital
24 Hospital Ave
Danbury, CT 06810-6020
Med Sch Affil: M-00081, L-02599, G-00802
Specialty: NM
Institution ID: 08-0363

Hartford
St Francis Hospital and Medical Center
114 Woodland St
Hartford, CT 06106-1209
Med Sch Affil: M-00082
Specialty: FP
Institution ID: 08-0460
Stamford
Stamford Hospital
Shelburne Rd and W Broad St
PO Box 9117
Stamford, CT 06904-9317
Med Sch Affil: M-03609
Specialty: OS, IM, OB/G
Institution ID: 08-0455

Hawaii
Wahiawa
Wahiawa General Hospital
128 Lehua St PO Box 508
Wahiawa, HI 96786
Specialty: FP
Institution ID: 14-9114

Illinois
Belleville
St Elizabeth's Hospital
211 S Third St
Belleville, IL 62222
Med Sch Affil: G-01645
Specialty: FP
Institution ID: 16-0787

Carbondale
Memorial Hospital of Carbondale
404 W Main St
Carbondale, IL 62901
Med Sch Affil: G-01646
Specialty: FP
Institution ID: 16-0506

Chicag0
Cook County Hospital
1855 W Harrison St
Chicago, IL 60612-9086
Med Sch Affil: M-01643, M-01611, M-01601, G-01608
Specialty: N
Institution ID: 16-0164

Michael Reese Hospital and Medical Center
2222 S Ellis Ave
Chicago, IL 60616-3390
Med Sch Affil: G-01602
Specialty: RNR
Institution ID: 18-0612

Swedish Covenant Hospital
5454 N California Ave
Chicago, IL 60635
Med Sch Affil: G-01642
Specialty: FP, TY
Institution ID: 18-0342

Decatur
Decatur Memorial Hospital
2300 N Edward St
Decatur, IL 62526
Med Sch Affil: G-01645
Specialty: FP
Institution ID: 16-0168

Evanston
Evanston Hospital
2650 Ridge Ave
Evanston, IL 60201-1761
Med Sch Affil: M-01606
Specialty: IM, P, PTH, TY
Institution ID: 16-0145

Melrose Park
Westlake Community Hospital
1225 Lake St
Melrose Park, IL 60160
Specialty: IM
Institution ID: 16-7049

Oak Lawn
EHS Christ Hospital and Medical Center
4440 W 88th St
Oak Lawn, IL 60453-4213
Med Sch Affil: M-01611, M-01643, L-01601
Specialty: IM, IM, PD, PGC
Institution ID: 16-0363

Quincy
Blessing Hospital
Broadway at 11th
PO Box C3
Quincy, IL 62305-3117
Med Sch Affil: G-01645
Specialty: FP
Institution ID: 16-7127

Kentucky
Hazard
ARH Regional Medical Center
150 Medical Center Dr
Hazard, KY 41701
Med Sch Affil: G-01643
Specialty: FP
Institution ID: 20-7045

Massachusetts
Burlington
Lahey Clinic
41 Mall Rd
Burlington, MA 01805
Med Sch Affil: L-02407, L-02401, G-02405
Specialty: GE
Institution ID: 24-0163

Michigan
Northville
Hawthorne Center Hospital
18411 Haggerty Rd
Northville, MI 48176
Med Sch Affil: G-01643
Specialty: CHF
Institution ID: 25-0247

Pontiac
Fairlawn Center
146 Elizabeth Lake Rd
Pontiac, MI 48461-1003
Specialty: CHF
Institution ID: 25-0654
**Minnesota**

**St Paul**

**United Hospital**
300 N Smith Ave  
St Paul, MN 55105  
Med Sch Affil: L-0390  
Specialty: FP  
Institution ID: 33-0311

**Nevada**

**Las Vegas**

**University Medical Center of Southern Nevada**
1096 W Charleston Blvd  
Las Vegas, NV 89102-2886  
Med Sch Affil: M-0310  
Specialty: FS, IM, OBG  
Institution ID: 31-0199

**New Hampshire**

**Concord**

**Concord Hospital**
200 Pleasant St  
Concord, NH 03301  
Specialty: FP  
Institution ID: 32-0602

**Lebanon**

**Mary Hitchcock Memorial Hospital**
Mary Hitchcock Memorial Hospital  
One Medical Center Dr  
Lebanon, NH 03756  
Specialty: FP  
Institution ID: 32-0601

**New Jersey**

**Jersey City**

**Jersey City Medical Center**
50 Baldwin Ave  
Jersey City, NJ 07304-3199  
Med Sch Affil: G-0305  
Specialty: CD, GE, IM, OBG, PD  
Institution ID: 33-0199

**New Brunswick**

**St Peter's Medical Center**
254 Easton Ave  
New Brunswick, NJ 08901-0591  
Med Sch Affil: M-0336  
Specialty: IM  
Institution ID: 33-0407

**Newark**

**St Michael's Medical Center (Cathedral Health Services Inc)**
University Heights  
238 Dr Martin Luther King Jr Blvd  
Newark, NJ 07102  
Med Sch Affil: L-0402, G-0305  
Specialty: OBG, TY  
Institution ID: 33-0418

**Paramus**

**Bergen Pines County Hospital**
8 Ridgewood Ave  
Paramus, NJ 07652-4133  
Med Sch Affil: L-0390  
Specialty: IM  
Institution ID: 33-0199

**Paterson**

**St Joseph's Hospital and Medical Center**
703 Main St  
Paterson, NJ 07502-3591  
Med Sch Affil: L-0390, L-0390  
Specialty: AN, FP, OBG, OBG, PD  
Institution ID: 33-0319

**New York**

**Bronx**

**Lincoln Medical and Mental Health Center**
234 E 149th St  
Bronx, NY 10451  
Med Sch Affil: M-0359  
Specialty: CCM, EM, END, IM, OBG, P, PD  
Institution ID: 35-0437

**Our Lady of Mercy Medical Center**
600 E 32nd St  
Bronx, NY 10466-2697  
Med Sch Affil: M-0359  
Specialty: CSS, CD, GE, GS, IM, NEP, OBG  
Institution ID: 35-0401

**Elmhurst**

**Elmhurst Hospital Center-Mount Sinai Services**
78-01 Broadway  
Elmhurst, NY 11373  
Med Sch Affil: M-0354  
Specialty: CD, CHP, GE, IM, P, PD, PUD, TY  
Institution ID: 35-0271

**Jamaica**

**Queens Hospital Center**
82-66 164th St  
Jamaica, NY 11432-1234  
Med Sch Affil: M-0354  
Specialty: HO, IM, OBG  
Institution ID: 35-0220

**Kingston**

**Kingston Hospital**
396 Broadway  
Kingston, NY 12401  
Med Sch Affil: L-0350, L-0350  
Specialty: FP  
Institution ID: 35-0435

**New York**

**Cabrini Medical Center**
227 E 10th St  
New York, NY 10003  
Med Sch Affil: M-0350, G-0350  
Specialty: CD, GE, GS, HO, ID, IM, P, PUD, RHU  
Institution ID: 35-0410

**Metropolitan Hospital Center**
1601 First Ave  
New York, NY 10029  
Med Sch Affil: M-0350  
Specialty: CD, CHP, IM, NEP, P, PD, PUD, RHU  
Institution ID: 35-0103

**New York Eye and Ear Infirmary**
310 E 14th St  
New York, NY 10003-4200  
Med Sch Affil: G-0350  
Specialty: OTO  
Institution ID: 35-0230

**St Vincent's Hospital and Medical Center of New York**
553 W 11th St  
New York, NY 10011-3897  
Med Sch Affil: M-0350, L-0350, G-0350  
Specialty: AN, CCM, CD, CHP, DR, END, GE, GS, HO, ID, IM, IMG, NS, NEP, NM, OB, OBG, OBG, OPH, P, PCC, PD, PFM, PTH, TY  
Institution ID: 35-0241

**Niagara Falls**

**Niagara Falls Memorial Medical Center**
621 Tenth St  
Niagara Falls, NY 14002-2008  
Specialty: FP  
Institution ID: 35-0448

**Rochester**

**Monroe Community Hospital**
435 E Henrietta Rd  
Rochester, NY 14610-2685  
Med Sch Affil: M-0354  
Specialty: IMG  
Institution ID: 35-0562

**Staten Island**

**St Vincent's Medical Center of Richmond**
355 2nd Ave  
Staten Island, NY 10301-1099  
Med Sch Affil: M-0350, G-0350  
Specialty: CD, DR, IM, OBG, P  
Institution ID: 35-0428

**White Plains**

**New York Hospital-Westchester Division**
21 Bloomingdale Rd  
White Plains, NY 10605-504  
Med Sch Affil: M-0350  
Specialty: CHP, P  
Institution ID: 35-0378

**North Dakota**

**Bismarck**

**Medcenter One Inc**
300 N 7th St  
Bismarck, ND 58501  
Med Sch Affil: M-0370  
Specialty: FP  
Institution ID: 37-0159

**Fargo**

**St Luke's Hospital**
720 Fourth St N  
Fargo, ND 58102  
Med Sch Affil: M-0370  
Specialty: FP, TY  
Institution ID: 37-0386
Veterans Affairs Medical and Regional Office Center (Fargo)
2101 N Rf Rd
Fargo, ND 58102
Med Sch Affil: M-03701
Specialty: IM, P
Institution ID: 37-0895

Grand Forks
United Hospital
1200 S Columbia Rd
Grand Forks, ND 58201
Med Sch Affil: M-05701
Specialty: FM, OB
Institution ID: 37-0463

Minot
St Joseph's Hospital
3rd St SE and Burdick Expwy
Minot, ND 58701
Med Sch Affil: M-03701
Specialty: FP
Institution ID: 37-0488

Texas
Conroe
Montgomery County Medical Center Hospital
104 Medical Center Blvd
Conroe, TX 77304
Specialty: FP
Institution ID: 48-0574

McAllen
McAllen Medical Center
301 W Loop 83
McAllen, TX 78503
Specialty: FP
Institution ID: 48-0548

Utah
Ogden
McKay-Dee Hospital Center
380 S Harrison Blvd
Ogden, UT 84405-0370
Med Sch Affil: L-0400
Specialty: FP
Institution ID: 46-0304

Virginia
Falls Church
Fairfax Hospital
3300 Gallows Rd
Falls Church, VA 22046
Med Sch Affil: M-03702, L-02312, L-01001, G-05104, G-01603
Specialty: FP, TV
Institution ID: 51-0492

Portsmouth
Portsmouth General Hospital
852 Crawford Pkwy
Portsmouth, VA 23704-3285
Med Sch Affil: M-05108
Specialty: FP
Institution ID: 81-0358

Oregon
Klamath Falls
Merle West Medical Center
2866 Daggett Ave
Klamath Falls, OR 97601
Specialty: FP
Institution ID: 40-0004

Pennsylvania
Lebanon
Good Samaritan Hospital
PO Box 128
Fourth & Walnut Sts
Lebanon, PA 17042-1281
Med Sch Affil: G-04114
Specialty: FP
Institution ID: 41-0130

Tennessee
Bristol
Bristol Regional Medical Center
1 Medical Park Blvd
Bristol, TN 37621-9044
Med Sch Affil: M-04700
Specialty: FP
Institution ID: 47-0491

Kingsport
Holston Valley Hospital and Medical Center
PO Box 238
Kingsport, TN 37662-0238
Med Sch Affil: H-04700
Specialty: FP
Institution ID: 47-0379

Washington
Kent
St Catherine's Hospital
3000 Seventh Ave
Kensington, WA 98140
Med Sch Affil: G-05006
Specialty: FM
Institution ID: 59-0732

Waukesha
Waukesha Medical Hospital
716 American Ave
Waukesha, WI 53188-5099
Med Sch Affil: G-05005
Specialty: FP
Institution ID: 56-9722

Wyoming
Casper
Wyoming Medical Center
1201 E 2nd St
Casper, WY 82601
Specialty: FP
Institution ID: 57-0100

Cheyenne
United Medical Center
300 E 22nd St
Cheyenne, WY 82001-3999
Specialty: FP
Institution ID: 57-0106

Salem
Veterans Affairs Medical Center (Salem)
1970 Boulevard
Salem, OR 97304-8683
Med Sch Affil: M-01010
Specialty: GI, ID, PG
Institution ID: 81-4613

Wisconsin
Kenosha
St Catherine's Hospital
3056 Seventh Ave
Kenosha, WI 53140
Med Sch Affil: G-05006
Specialty: FM
Institution ID: 56-0732

Participating Institutions

Alabama

Birmingham
American Red Cross Blood Services-Alabama Region
2225 Third Ave N
Birmingham, AL 35203
Specialty: RNK
Institution ID: 01-8004

Birmingham Baptist Medical Center-Montclair
800 Montclair Rd
Birmingham, AL 35213
Med Sch Affil: M-00102
Specialty: EP, GS, IM, PTH, TY
Institution ID: 01-0897

Birmingham Baptist Medical Center-Princeton
701 Princeton Ave SW
Birmingham, AL 35211
Med Sch Affil: M-00102
Specialty: AN
Institution ID: 01-0897

Carraway Methodist Medical Center
1600 Carraway Blvd
Birmingham, AL 35234
Med Sch Affil: M-00102
Specialty: AN
Institution ID: 01-0897

Children's Hospital of Alabama
1600 7th Ave S
Birmingham, AL 35223
Med Sch Affil: M-00102
Specialty: AN, CPE, NTM, NS, ORS, OSM, PD, PDP, PDS, PG, PS, RNR, U
Institution ID: 01-0897

Cooper Green Hospital
1515 6th Ave S
Birmingham, AL 35233-1601
Med Sch Affil: M-00102
Specialty: AN, GS, IM, OBG, OPH, ORS, OT
Institution ID: 01-0897

Eye Foundation Hospital
1720 University Blvd
Birmingham, AL 35233
Med Sch Affil: M-00102
Specialty: OPJ
Institution ID: 01-0897

Jefferson County Coroner/Medical Examiner's Office
1615 6th Ave S
Birmingham, AL 35223
Specialty: PFP
Institution ID: 01-0897

St Vincent's Hospital
2701 6th St S
20 Box 1407
Birmingham, AL 35203-2407
Med Sch Affil: M-00102
Specialty: U
Institution ID: 01-0897

University of Alabama at Birmingham
School of Public Health
399 Tutwiler Hall
720 S 2nd St
Birmingham, AL 35294
Specialty: OM
Institution ID: 01-8004

University of Alabama Hospital
619 19th St S
Birmingham, AL 35203-6886
Med Sch Affil: M-00102
Specialty: OB/G
Institution ID: 01-0897

University of Alabama School of Medicine
MRB 301
DAB Station
Birmingham, AL 35204-3283
Med Sch Affil: M-00102
Specialty: OM
Institution ID: 01-0897

Veterans Affairs Medical Center (Birmingham)
700 S 19th St
Birmingham, AL 35223
Med Sch Affil: M-00102
Specialty: AN, CCE, DMP, DR, GS, IM, IMG, N, NM, NP, NS, OPH, ORS, OTO, P, PDP, PS, PTH, RNR, RO, TR, U, VTR
Institution ID: 01-0897

Fairfield (Birmingham)
Lloyd Nolan Hospital and Health Centers
701 Lloyd Nolan Dr
Fairfield (Birmingham), AL 35044
Med Sch Affil: M-00102
Specialty: GS
Institution ID: 01-0897

Huntsville
Huntsville Hospital
191 Sivley Rd
Huntsville, AL 35801
Med Sch Affil: M-00102
Specialty: FP
Institution ID: 01-0897

Mobile
University of South Alabama Medical Center
281 Fillmore St
Mobile, AL 36697-2293
Med Sch Affil: M-00102, L-00102
Specialty: OPH
Institution ID: 01-0897

USA Doctors Hospital
1700 Center St
Mobile, AL 36604
Med Sch Affil: M-00102
Specialty: ORS, P
Institution ID: 01-0897

USA Knollwood Park Hospital
5600 Gaffey Rd
PO Box 9753
Mobile, AL 36667
Med Sch Affil: M-00102
Specialty: GE, P
Institution ID: 01-0897

Montgomery
Montgomery Regional Medical Center
301 S Ripley St
Montgomery, AL 36144
Med Sch Affil: G-00102
Specialty: IM
Institution ID: 01-0897

Mount Vernon
Searcy State Hospital
Route 1 Box 265
Mount Vernon, AL 36560
Specialty: P
Institution ID: 01-0897

Selma
Vaughan Regional Medical Center
1050 W Dallas Ave
Selma, AL 36701
Med Sch Affil: G-00102
Specialty: FP
Institution ID: 01-0897

Tuscaloosa
DCH Regional Medical Center
800 University Blvd E
Tuscaloosa, AL 35401
Med Sch Affil: M-00102
Specialty: FP
Institution ID: 01-0897

Tuskegee
Veterans Affairs Medical Center (Tuskegee)
2400 Hospital Rd
Tuskegee, AL 36088-5022
Med Sch Affil: M-00121
Specialty: P
Institution ID: 01-0897

Arizona

Phoenix
Carl T Hayden Veterans Affairs Medical Center (Phoenix)
650 E Indiana School Rd
Phoenix, AZ 85012-1894
Med Sch Affil: L-00001, G-00002
Specialty: CD, EN, GI, GE, GS, IM, IMG, ORS, PUD, TY
Institution ID: 03-0804

Children's Rehabilitative Services
124 W Thomas Rd
Phoenix, AZ 85013-1134
Med Sch Affil: L-00001
Specialty: ORS
Institution ID: 03-0804

Good Samaritan Regional Medical Center
1111 E McDowell Rd
PO Box 62174
Phoenix, AZ 85062-2174
Med Sch Affil: M-00101
Specialty: GE
Institution ID: 03-0845

Harrington Arthritis Research Center
1800 E Van Buren
Phoenix, AZ 85006-3742
Specialty: ORS
Institution ID: 03-0801
Maricopa Medical Center
2611 E Roosevelt
Phoenix, AZ 85006
Med Sch Affil: M-00301, L-02312
Specialty: AN, CCA, END, FP, MPD, NS, PD
Institution ID: 03-9898

Phoenix Children's Hospital
1300 N 12th St Ste 404
Phoenix, AZ 85006
Specialty: MPD
Institution ID: 03-9898

Phoenix Indian Medical Center
4712 N 16th St
Phoenix, AZ 85016-6899
Med Sch Affil: L-00312, L-00301
Specialty: GS
Institution ID: 03-0449

St Joseph's Hospital and Medical Center
350 W Thomas Rd
PO Box 2071
Phoenix, AZ 85001-2071
Med Sch Affil: M-00301, L-04615
Specialty: EM, OB/G, P
Institution ID: 03-4136

Scottsdale
Mayo Clinic (Scottsdale)
13490 E Shea Blvd
Scottsdale, AZ 85256
Med Sch Affil: M-02668
Specialty: AN, APN, CSH, IM, OTO
Institution ID: 03-9819

Scottsdale Memorial Hospital
7400 E Osborn Rd
Scottsdale, AZ 85251-5672
Med Sch Affil: M-02668
Specialty: APN
Institution ID: 03-0612

Scottsdale Memorial Hospital-North
10450 N 92nd St
PO Box 4500
Scottsdale, AZ 85251
Specialty: GS, IM, TY
Institution ID: 03-9824

Tucson
Desert Hills Center for Youth
2787 N Innsbruck Dr
Tucson, AZ 85745
Specialty: CHP
Institution ID: 03-9025

Kino Community Hospital
2800 E Ajo Way
Tucson, AZ 85713-8298
Med Sch Affil: M-00301
Specialty: D, END, IM, OPW, P, TY
Institution ID: 03-0244

Tucson Medical Center
5021 E Grant Rd
PO Box 42195
Tucson, AZ 85722-2196
Med Sch Affil: M-00301
Specialty: SS, N, NPM, ORS, PD, TY, U
Institution ID: 03-0263

University Medical Center
1551 N Campbell Ave
Tucson, AZ 85724
Med Sch Affil: M-00301
Specialty: AN, CCA, CCP, CD, CHP, D, DR, EM, END, FP, FPG, GE, GPM, GS, HO, ID, IM, N, NPE, NM, NPM, NR, ORS, OPW, P, PCO, PD, PDC, PTH, RHH, RNB, RO, TS, U
Institution ID: 03-0050

Veterans Affairs Medical Center (Tucson)
3601 S 6th Ave
Tucson, AZ 85723
Med Sch Affil: M-00301
Specialty: AN, CD, D, DR, END, FPG, GE, GS, HO, ID, IM, N, NPE, NM, OPH, ORS, P, PCC, PDC, PTH, RHH, RNB, TS, U
Institution ID: 04-0061

Arkansas
El Dorado
Medical Center of South Arkansas (Union Medical Center)
PO Box 1968
El Dorado, AR 71731-1968
Med Sch Affil: G-00401
Specialty: FP
Institution ID: 04-0476

Medical Center of South Arkansas (Warner Brown Hospital)
460 W Oak St
PO Box 1968
El Dorado, AR 71730
Med Sch Affil: G-00401
Specialty: FS
Institution ID: 04-0477

Fayetteville
Washington Regional Medical Center
1125 N College
Fayetteville, AR 72703
Med Sch Affil: G-00401
Specialty: FP
Institution ID: 04-0473

Little Rock
Arkansas Children's Hospital
800 Marshall St
Little Rock, AR 72205-3591
Med Sch Affil: M-04001
Specialty: AN, CHP, MDP, NPM, NS, OPW, ORS, OTO, P, PD, PDC, PDE, PDS, PG, PM, PTH, RHH, RNB, TS, TY
Institution ID: 04-0284

Arkansas State Hospital-Little Rock Hospital
4317 W Marshall St
Little Rock, AR 72205-6996
Med Sch Affil: G-00401
Specialty: CHP, P
Institution ID: 04-0397

Baptist Medical Center
9601 Interstate 630 Exit 7
Little Rock, AR 72205-7290
Med Sch Affil: L-00401
Specialty: TY
Institution ID: 04-0469

Baptist Rehabilitation Institute of Arkansas
9601 Interstate 630 Exit 7
Little Rock, AR 72205-7290
Med Sch Affil: L-00401
Specialty: PM
Institution ID: 04-0415

California
Anaheim
Kaiser Foundation Hospital (Anaheim)
411 N Lakeway Ave
Anaheim, CA 92807-6380
Med Sch Affil: IM, U
Institution ID: 05-8043

Berkeley
Permanente Medical Group Regional Laboratory
1725 Eastshore Way
Berkeley, CA 94710
Specialty: PTH
Institution ID: 65-0886

University of California School of Public Health
140 Ral Warren Hall
Berkeley, CA 94720-7300
Med Sch Affil: L-00502
Specialty: OM, PH
Institution ID: 05-0276

Daly City
Seton Medical Center
1900 Sullivan Ave
Daly City, CA 94015
Med Sch Affil: L-00502
Specialty: ORS, RO
Institution ID: 05-0494

Davis
University of California (Davis) School of Medicine
Health Sciences Dr
Davis, CA 95616
Med Sch Affil: M-00501, L-3312
Specialty: HMP
Institution ID: 05-9042
Downey
LAC-Rancho Los Amigos Medical Center
7601 E Imperial Hwy 1171B
Downey, CA 90242
Med Sch Affil: M-00605, G-01401, G-00615
Specialties: GE, ID, ORS, RS, RHU
Institution ID: 06-09584

Duarte
City of Hope National Medical Center
1500 E Duarte Rd
Duarte, CA 91010-8269
Med Sch Affil: L-00518, L-00506, G-00512
Specialties: RS, RO
Institution ID: 06-06233

Encino
Encino-Tarzana Regional Medical Center
16377 Ventura Blvd
Encino, CA 91436
Med Sch Affil: L-00514, G-00512
Specialties: GS, RO
Institution ID: 06-06097

Fairfield
Solano County Mental Health Clinic
1753 S Enterprise Dr
Fairfield, CA 94533
Med Sch Affil: L-00512
Specialties: PS
Institution ID: 06-09768

Fontana
Kaiser Foundation Hospital (Fontana)
9961 Sierra Ave
Fontana, CA 92335
Med Sch Affil: L-00512
Specialties: GS, PS, TS
Institution ID: 06-09778

Fountain Valley
FHP Hospital-Fountain Valley
9920 Talbert Ave
Fountain Valley, CA 92708
Specialties: MD, PS
Institution ID: 06-09778

Fresno
Valley Children’s Hospital
3151 N Millbrook Ave
Fresno, CA 93703-1497
Med Sch Affil: M-00502
Specialties: GD, EM, EP, PS
Institution ID: 06-09708

Valley Medical Center of Fresno
445 S Cedar Ave
Fresno, CA 93702-2907
Med Sch Affil: M-00502
Specialties: GD, EM, EP, PS
Institution ID: 06-09708

Valleym Children’s Hospital
3151 N Millbrook Ave
Fresno, CA 93703-1497
Med Sch Affil: M-00502
Specialties: GD, EM, EP, PS
Institution ID: 06-09708

Veterans Affairs Medical Center (Fresno)
2015 E Clinton Ave
Fresno, CA 93703
Med Sch Affil: M-00602
Specialties: GD, EM, EP, PS
Institution ID: 06-09581

Inglewood
Continental Hospital Medical Center
555 E Harvey St
Inglewood, CA 90307
Specialties: OSR
Institution ID: 06-09792

Irvine
University of California (Irvine) College of Medicine
Irvine Hall Bldg
Irvine, CA 92617-4659
Med Sch Affil: M-00515, L-02312
Specialties: CEA, BP
Institution ID: 06-07411

La Jolla
Scripps Clinic and Research Foundation
Dept of Grad Med Ed 401 C
10666 N Torrey Pines Rd
La Jolla, CA 92037-1063
Med Sch Affil: L-02312, G-00518
Specialties: DMP
Institution ID: 06-03235

Livermore
Veterans Affairs Medical Center (Livermore)
4051 Arroyo Rd
Livermore, CA 94550
Med Sch Affil: L-06111
Specialties: IMG
Institution ID: 06-07683

Loma Linda
Jerry L Pettis Memorial Veterans Hospital
11201 Benton St
Loma Linda, CA 92357-1111
Med Sch Affil: M-00512
Specialties: GD, DR, GE, GS, IM, MDP, N, NEM, NS, OP, ORS, OTS, OTO, P, PM, PS, PTH, PS, PTH, PTH, PTH, P
Institution ID: 06-07648

Loma Linda University Community Hospital
25333 Barton Rd
Loma Linda, CA 92354
Med Sch Affil: M-00512
Specialties: MDP
Institution ID: 06-09444

Loma Linda University Medical Center
11234 Anderson St
Loma Linda, CA 92354
Med Sch Affil: M-00512, L-02312
Specialties: OBG
Institution ID: 06-07683

Long Beach
Long Beach Memorial Medical Center
2801 Atlantic Ave
PO Box 1426
Long Beach, CA 90801-1428
Med Sch Affil: M-00615, L-00514
Specialties: CCP, CD, DR, EM, GE, GS, HEM, IM, IMG, NPH, OBG, OPH, PD, PM, PTH, RO
Institution ID: 06-08136

Southern California Center for Sports Medicine
2760 Atlantic Ave
Long Beach, CA 90806
Specialties: OSR
Institution ID: 06-08062

St Mary Medical Center
1050 Linden Ave
Long Beach, CA 90813
Med Sch Affil: L-00514
Specialties: GS, VS
Institution ID: 06-09267

Veterans Affairs Medical Center (Long Beach)
Long Beach Veterans Medical Center
6901 E 7th St
Long Beach, CA 90802
Med Sch Affil: M-00615
Specialties: AI, AN, CCA, CD, D, DMP, DR, END, GE, GS, HEM, ID, N, NEM, NS, OP, ORS, OTS, OTO, P, PCC, PM, PS, PTH, PS, PS, PS, PS, PS, PS, PS, PS, PS
Institution ID: 06-01816

Los Angeles
American Red Cross Blood Services-Southern California Region
1130 S Vermont Ave
Los Angeles, CA 90006-0908
Specialties: BBK
Institution ID: 06-07644

Barlow Respiratory Hospital
2300 Stadium Way
Los Angeles, CA 90026-2686
Med Sch Affil: L-00060
Specialties: PCC
Institution ID: 06-07625

California Medical Center (Los Angeles)
1401 S Grand Ave
Los Angeles, CA 90015-0001
Med Sch Affil: G-00508
Specialties: GS, RO
Institution ID: 06-02311

Cedars-Sinai Medical Center
8700 Beverly Blvd
Los Angeles, CA 90048-3199
Med Sch Affil: L-00514, L-00515
Specialties: AN, GE, HO, NEM, PS
Institution ID: 06-06445

Children’s Hospital of Los Angeles
4625 Sunset Blvd
Los Angeles, CA 90027
Med Sch Affil: M-00606, L-00615, G-03201, G-00612
Specialties: AI, BBL, BS, ORS, OTS, PS, PTH, PS, PS, PS, PS, PS, PS, PS, PS, PS
Institution ID: 06-08444

Joseph H Boyes Foundation
1610 San Pablo Ste 300
Los Angeles, CA 90033
Specialties: HSU
Institution ID: 06-08975

Kaiser Foundation Hospital (Los Angeles)
Hospital Administration
4907 Sunset Blvd
Los Angeles, CA 90027
Med Sch Affil: M-00514, L-02312
Specialties: AI, JSB
Institution ID: 06-03268

Kaiser Foundation Hospital (West Los Angeles)
6041 Cadillac Ave
Los Angeles, CA 90024
Med Sch Affil: G-00614
Specialties: PS
Institution ID: 06-07412
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<th>Institution Name</th>
<th>Address</th>
<th>City, State</th>
<th>Phone</th>
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<td>Kaiser Permanente Medical Center (Oakland)</td>
<td>380 W MacArthur Blvd</td>
<td>Oakland, CA 94611-5695</td>
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<td>Naval Hospital (Oakland)</td>
<td>8750 Mountain Blvd</td>
<td>Oakland, CA 94627-5000</td>
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<td>Orange</td>
<td>Children's Hospital of Orange County</td>
<td>455 S Main St</td>
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<td>1100 W Stewart</td>
<td>Orange, CA 92868-5600</td>
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<td>UCLA Medical Center</td>
<td>10833 Le Conte Ave</td>
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<td>UCLA Neuropsychiatric Hospital</td>
<td>Attn: Sandra Lipschultz</td>
<td>760 Westwood Plaza Rd #8-082</td>
<td>Los Angeles, CA 90024-1759</td>
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<td>UCLA School of Public Health</td>
<td>Dean's Office</td>
<td>16-035 CHS</td>
<td>10833 Le Conte Ave</td>
<td>Los Angeles, CA 90024-1772</td>
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<td>University of Southern California School of Medicine</td>
<td>1075 Ezelial Ave KAM 500</td>
<td>Los Angeles, CA 90033</td>
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<td>USC University Hospital</td>
<td>1500 San Pablo St</td>
<td>Los Angeles, CA 90033</td>
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<td>Veterans Affairs Medical Center (West Los Angeles)</td>
<td>11301 Wilsbache Blvd</td>
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<td>White Memorial Medical Center</td>
<td>1200 Cesar E Chavez Ave</td>
<td>Los Angeles, CA 90033-2461</td>
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<td>Shriner's Hospital for Crippled Children (Los Angeles)</td>
<td>3100 Geneva St</td>
<td>Los Angeles, CA 90033-1199</td>
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<td>St Vincent Medical Center</td>
<td>2131 W Third St</td>
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<td>University of California (Irvine) Medical Center</td>
<td>101 The City Dr</td>
<td>Orange, CA 92868</td>
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<td>Palo Alto</td>
<td>Lucile Salter Packard Children's Hospital at Stanford</td>
<td>530 Sand Hill Rd</td>
<td>Palo Alto, CA 94304</td>
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<td>Modesto</td>
<td>Stanislaus Medical Center</td>
<td>830 Scenic Dr</td>
<td>Modesto, CA 95353</td>
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<td>Oakland</td>
<td>Children's Hospital Medical Center of Northern California</td>
<td>747 52nd St</td>
<td>Oakland, CA 94609</td>
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<td>Redwood City</td>
<td>Kaiser-Permanente Medical Center (Redwood City)</td>
<td>1150 Veterans Blvd</td>
<td>Redwood City, CA 94063</td>
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Graduate Medical Education Directory
Riverside
Riverside General Hospital-University Medical Center
9851 Magnolia Ave
Riverside, CA 92503
Med Sch Affil: M-0012
Specialties: EM, PT, GS, MPD, N, OB/GYN, OPH, OT, PD, PS, U
Institution ID: 05-4260

Sacramento
Kaiser Foundation Hospital (Sacramento)
2065 Morse Ave
Sacramento, CA 95825
Med Sch Affil: M-00519
Specialties: GL, GS, HG, IM, NS, OB/GYN, OB/GYN, PS, TS, U
Institution ID: 05-0078

Kaiser Foundation Hospital (South Sacramento)
6600 Bruceville Rd
Sacramento, CA 95823
Specialties: EM, GS
Institution ID: 05-8048

Sutter General Hospital
2801 L St
Sacramento, CA 95816
Med Sch Affil: M-00519
Specialties: FOG, PT, PS
Institution ID: 05-0042

University of California (Davis) Medical Center
2315 Stockton Blvd
Sacramento, CA 95817
Med Sch Affil: M-00519
Specialties: FOG, PS, OT
Institution ID: 05-9436

San Bernardino
San Bernardino County Medical Center
780 E Gilbert St
San Bernardino, CA 92404-0616
Med Sch Affil: M-00151, L-00312, L-00612
Specialties: AN, GS, HS/IS, OB/GYN, OB/GYN, OT, U
Institution ID: 05-2287

San Diego
Children's Hospital and Health Center
3029 Children's Way 86009
San Diego, CA 92123-4328
Med Sch Affil: M-00618
Specialties: CHP, CHN, CHN, CHP, NS, OP, OB/GYN, OB/GYN, OT, PDE, PN, PS, U, UP
Institution ID: 05-0533

Graduate School of Public Health
San Diego State University
San Diego, CA 92182
Med Sch Affil: L-00618
Specialties: GPH
Institution ID: 05-8020

Kaiser Foundation Hospital (San Diego)
4647 Zion Ave
San Diego, CA 92120
Med Sch Affil: M-00618
Specialties: NS, OB/GYN
Institution ID: 05-0760

Naval Medical Center (San Diego)
34800 Bob Wilson Dr
San Diego, CA 92134-5060
Med Sch Affil: M-02312, M-00518
Specialties: NEP
Institution ID: 05-0996

Sharp Memorial Hospital
7011 Fost St
San Diego, CA 92123
Specialties: FP
Institution ID: 05-6996

Veterans Affairs Medical Center (San Diego)
3550 La Jolla Village Dr
San Diego, CA 92161-4223
Med Sch Affil: M-00518
Specialties: AN, ANP, CD, CHN, D, DR, END, GE, GS, HS, ID, IM, MG, N, NNP, NM, NP, OB/GYN, OPH, OT, PS, PCC, PS, PT, RHI, RNU, U
Institution ID: 05-0888

San Francisco
California Pacific Medical Center
PO Box 7530
San Francisco, CA 94129
Specialties: PT
Institution ID: 05-8092

California Pacific Medical Center (California Campus)
PO Box 7530
San Francisco, CA 94120
Med Sch Affil: L-00602
Specialties: NPM
Institution ID: 05-0190

California Pacific Medical Center (Pacific Campus)
PO Box 7530
San Francisco, CA 94120
Med Sch Affil: L-00602
Specialties: CHP, CD, CHN, HS, IM, OB/GYN, OB/GYN, OT, P, PCC, PDE, PDP, PDI, PG, PHO, PN, PS, PT, RHI, RNU, RN, PS, TS, U, URR, V
Institution ID: 05-0243

Davies Medical Center
 Castillo and Duboce St
San Francisco, CA 94114
Med Sch Affil: M-00502
Specialties: HS/IS, OB/GYN, OB/GYN, OT
Institution ID: 05-0461

Davies Medical Hospital
San Francisco, CA 94114
Med Sch Affil: M-00502
Specialties: HS/IS, OB/GYN, OB/GYN, OT
Institution ID: 05-0490

Kaiser Foundation Hospital (San Francisco)
Graduate Medical Education Office
2352 Geary Blvd
San Francisco, CA 94115-3305
Med Sch Affil: L-00602
Specialties: GS, OB/GYN, OB/GYN, OT
Institution ID: 05-2204

Langley Porter Psychiatric Hospitals and Clinics
401 Parnassus Ave
PO Box 9864
San Francisco, CA 94143
Med Sch Affil: M-00602
Specialties: PS
Institution ID: 05-0122

Mount Zion Medical Center of the University of California
PO Box 7821
San Francisco, CA 94115
Med Sch Affil: M-00602
Specialties: CD, GE, GS, ID, IM, IM, MG, NS, PD, PS, RO
Institution ID: 05-2829

San Francisco General Hospital Medical Center
1001 Potrero Ave
San Francisco, CA 94110
Med Sch Affil: M-00502, L-00213
Specialties: AN, ANP, CCM, CD, CHN, D, DR, END, GE, GS, HEM, ID, IM, MG, NNP, NM, NP, OB/GYN, OB/GYN, OPH, OPH, OT, PS, PCC, PS, PT, RHI, RNU, U
Institution ID: 05-6390

San Francisco Magnetic Resonance Center
3333 California St
San Francisco, CA 94115
Specialties: NMR
Institution ID: 05-8044

San Francisco Surgicentre
1625 Divisadero St
San Francisco, CA 94115
Specialties: HSO
Institution ID: 05-0704

Shriners Hospital for Crippled Children (San Francisco)
1701 18th Ave
San Francisco, CA 94122-2590
Med Sch Affil: L-00602
Specialties: ORS
Institutions ID: 05-0293

University of California (San Francisco) Medical Center
500 Parnassus Ave
San Francisco, CA 94143-0296
Med Sch Affil: M-00502
Specialties: AN, ANP, CD, CHN, D, DR, END, GE, GS, HEM, ID, IM, MG, NNP, NM, NP, OB/GYN, OB/GYN, OPH, OPH, OT, PS, PCC, PDE, PDP, PDI, PG, PHO, PN, PS, PT, RHI, RNU, RN, PS, TS, U, URR, V
Institution ID: 05-0254

Veterans Affairs Medical Center (San Francisco)
4150 Clement St
San Francisco, CA 94121-1586
Med Sch Affil: M-00502
Specialties: AN, ANP, CD, CHN, D, DR, END, GE, GS, HEM, ID, IM, MG, NNP, NM, OB/GYN, OB/GYN, OPH, OB/GYN, OT, PS, PCC, PDE, PDP, PDI, PG, PHO, PN, PS, PT, RHI, RNU, RN, PS, TS, U, URR, V
Institution ID: 05-0113

San Jose
Santa Clara Valley Medical Center
Robert Sillen
Health/Hosp Systems Administration
2220 Moespark Ave
San Jose, CA 95128-2699
Med Sch Affil: M-00511
Specialties: AN, ANP, CD, CHN, D, DR, END, GE, GS, HEM, ID, IM, MG, NNP, NM, OB/GYN, OB/GYN, OB/GYN, ORS, OTO, PD, PM, PS
Institution ID: 05-0438

San Rafael
Marin County Mental Health Services
20 N San Pedro Rd 8028
San Rafael, CA 94903
Specialties: PS
Institution ID: 05-8641

Sasta Ana
Western Medical Center
1001 N Tustin Ave
Santa Ana, CA 92705
Specialties: FP
Institution ID: 05-0747

Santa Barbara
Santa Barbara Cottage Hospital
PO Box 689
Santa Barbara, CA 93102
Med Sch Affil: L-00614, L-00606
Specialties: CRN
Institution ID: 05-0981
Santa Barbara County Health Care Services
30 N San Antonio Rd
Santa Barbara, CA 93110
Specialty: IM
Institution ID: 05-0588

Santa Clara
Kaiser Permanente Medical Center (Santa Clara)
900 Kiely Blvd
Santa Clara, CA 95051-5386
Med Sch Affl: M-0611
Specialty: EM, GS, P, PS
Institution ID: 05-0571

Sylmar
LAC-Olive View Medical Center
14445 Olive View Dr
Sylmar, CA 91342-1496
Specialty: CD, DR, EM, END, FP, GR, GS, HO, IM, NPM, OB, OT, P, PD, PDR, PS, PTH, PUD, RHU, U
Institution ID: 05-0216

Torrance
Los Angeles County-Harbor-UCLA Medical Center
1500 W Carson St
Torrance, CA 90609-2120
Med Sch Affl: M-0614, L-02312
Specialty: GR, IM, NS, OPH, OT, PD, P, U
Institution ID: 05-0268

Travis AFB
David Grant Medical Center
60th Medical Group
101 Bodin Circle
Travis AFB, CA 94535-1800
Med Sch Affl: M-0312, M-00619
Specialty: N
Institution ID: 05-0499

Woodland
Yolo County Mental Health Services
213 W Beamer St
Woodland, CA 95695
Specialty: CHP
Institution ID: 05-8089

Woodland Hills
Kaiser Foundation Hospital (Woodland Hills)
8601 DeSoto Ave
Woodland Hills, CA 91365-4084
Med Sch Affl: G-0614
Specialty: HSP
Institution ID: 05-8088

Colorado
Aurora
Fitzsimons Army Medical Center
Graduate Medical Education Office
Attn: MCGH-75-98 (Ms. Nolen)
Aurora, CO 80045-5000
Med Sch Affl: M-02312, M-00702
Specialty: OTO, U
Institution ID: 07-0461

Denver
Children's Hospital
1066 E 11th Ave
Medical Education Box 158
Denver, CO 80218-1488
Med Sch Affl: M-00702
Specialty: CCF, CIDN, NS, OB, PD, PDC, PDE, PDR, PDS, PG, PHO, PN, PS, TS
Institution ID: 07-0978

Denver Health and Hospitals
777 Bannock St
Denver, CO 80226-6207
Med Sch Affl: M-00702
Specialty: AN, AH, CD, D, DMP, DR, END, FP, GE, GS, HEM, ID, IM, N, NEP, NS, OB, ON, OPH, ORS, OTO, P, PD, PG, PS, PTH, PUD, RHU
Institution ID: 07-0250

Immunological Associates of Denver
101 University Blvd
Denver, CO 80205-6302
Specialty: AI
Institution ID: 07-0914

National Jewish Ctr for Immunology and Respiratory Medicine
1400 Jackson St
Denver, CO 80206-1967
Med Sch Affl: M-00702
Specialty: AI, AI, CCF, CM, OM, PDP
Institution ID: 07-0957

Porter Memorial Hospital
2525 S Downing St
Denver, CO 80210
Med Sch Affl: G-00702
Specialty: EM
Institution ID: 07-0888

Presbyterian-Denver Hospital
1719 E 10th Ave
Denver, CO 80218
Med Sch Affl: L-00702
Specialty: TY
Institution ID: 07-0809

Provenant St Anthony Hospital Central
4231 W 15th Ave
Denver, CO 80204
Med Sch Affl: G-00702
Specialty: EM
Institution ID: 07-0851

Rose Medical Center
4567 E 9th Ave
Denver, CO 80220
Med Sch Affl: M-00702
Specialty: CCM, FP, GS, IM, OB
Institution ID: 07-0829

St Joseph Hospital
1835 Franklin St
Denver, CO 80218-9968
Specialty: EM
Institution ID: 07-0451

Veterans Affairs Medical Center (Denver)
1066 Clermont St
Denver, CO 80220
Med Sch Affl: M-00702
Specialty: AN, CHM, CD, D, DMP, DR, END, FP, GE, GS, HEM, ID, IM, DNG, N, NEP, NM, NS, ON, OPH, ORS, OTO, P, PD, PG, PS, PTH, PUD, RHU, TS, U
Institution ID: 07-0157

Louisville
Avista Hospital
100 Health Park Dr
Louisville, CO 80227
Specialty: FP
Institution ID: 07-0819

Vail
Vail Valley Medical Center
181 W Meadow Dr
Vail, CO 81657
Specialty: OSM
Institution ID: 07-0817

Wray
Wray Community District Hospital
340 Sixth St PO Box 66
Wray, CO 80758
Specialty: FP
Institution ID: 07-0816

Connecticut
Bridgeport
Bridgeport Hospital
267 Grant St
Bridgeport, CT 06610-2870
Med Sch Affl: M-00801
Specialty: CGS
Institution ID: 08-0350

St Vincent's Medical Center
2800 Main St
Bridgeport, CT 06606
Med Sch Affl: M-00001, L-03509
Specialty: GS
Institution ID: 08-0341

Danbury
Danbury Hospital
24 Hospital Ave
Danbury, CT 06810-6086
Med Sch Affl: M-06001, L-03509, G-06002
Specialty: P
Institution ID: 08-0363

Derby
Griffin Hospital
130 Division St
Derby, CT 06418
Med Sch Affl: M-06801
Specialty: GS
Institution ID: 08-0172

Farmington
Connecticut Red Cross Blood Services
200 Farmington Ave
Farmington, CT 06082
Med Sch Affl: G-06002
Specialty: BBK
Institution ID: 08-0723
Hospital of St Raphael
1450 Chapel St
New Haven, CT 06511-4440
Med Sch Aff: M-08001
Specialty: CCM, OHS, OT O, P, PD, PS, PUD, RO
Institution ID: 08-04244

Yale Psychiatric Institute
184 Liberty St
PO Box 200338
New Haven, CT 06520-8038
Med Sch Aff: M-08091
Specialty: P
Institution ID: 08-04711

Yale University Health Service
77 Hillhouse Ave
New Haven, CT 06520
Med Sch Aff: G-08081
Specialty: P
Institution ID: 08-04716

Yale-New Haven Hospital
1063 Clinic Bldg
20 York St
New Haven, CT 06504-1111
Med Sch Aff: G-08081
Specialty: GV, GS, PUD
Institution ID: 08-04883

Newington
Newington Children's Hospital
181 E Cedar St
Newington, CT 06111-1540
Med Sch Aff: G-06020, G-06080
Specialty: AFM, CHP, ESO, OP, OHS, PDE, U
Institution ID: 08-04937

Veterans Affairs Medical Center (Newington)
555 Willard Ave
Newington, CT 06111-2900
Med Sch Aff: M-06082
Specialty: GHS, IM, NM, RHU
Institution ID: 08-04983

Norwalk
Norwalk Hospital
Maple St
Norwalk, CT 06856-5600
Med Sch Aff: M-08080, L-06142
Specialty: P
Institution ID: 08-05066

Norwich
Uncas on Thames Hospital
PO Box 711
Norwich, CT 06360
Med Sch Aff: L-06080
Specialty: RO
Institution ID: 08-70003

William W Backus Hospital
326 Washington St
Norwich, CT 06360
Specialty: GHS
Institution ID: 08-70004

Preston
Community Mental Health Services of Southeastern Connecticut
No 14 Rt 12
Preston, CT 06365
Specialty: P
Institution ID: 08-8017

Stamford
Stamford Hospital
Sheelburne Rd and W Broad St
PO Box 9137
Stamford, CT 06904-9317
Med Sch Aff: M-06009
Specialty: P
Institution ID: 08-04456

Waterbury
St Mary's Hospital
56 Franklin St
Waterbury, CT 06706
Med Sch Aff: M-06082, M-06080
Specialty: IM, PD, RHU
Institution ID: 08-04458

Waterbury Hospital Health Center
64 Robbins St
Waterbury, CT 06721
Med Sch Aff: M-06081, L-06201
Specialty: GE, IM, OHS, PUD, RHU, U
Institution ID: 08-04137

West Haven
Veterans Affairs Medical Center (West Haven)
950 Campbell Ave
West Haven, CT 06516-2700
Med Sch Aff: M-06081
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Institution ID: 08-01199

Wilmington
Alfred I DuPont Institute of the Nemours Foundation
1600 Rockland Rd
PO Box 299
Wilmington, DE 19890-0299
Med Sch Aff: M-04102, G-04113
Specialty: CHN, OHS, PD, U
Institution ID: 08-03400

The Medical Center of Delaware
50 W 14th St
PO Box 1836
Wilmington, DE 19899
Med Sch Aff: M-04102, G-04113
Specialty: CHN, N, NEP, OPH, PD, TS
Institution ID: 08-03417

Veterans Affairs Medical Center (Wilmington)
1601 Kirkwood Hwy
Wilmington, DE 19805-0997
Med Sch Aff: M-06001, G-06001
Specialty: N, OT O, U
Institution ID: 08-04412
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### Florida

#### Bay Pines

**Veterans Affairs Medical Center (Bay Pines)**

Dept of Veterans Affairs Medical Center (519/1B)

10000 Bay Pines Blvd

Bay Pines, FL 33304

Med Sch Affil: G-01014

Speciality: OHS, OSM

Institution ID: 11-0902

**Coral Gables**

**Doctor's Hospital**

5000 University Dr

PO Box 14-1789

Coral Gables, FL 33141

Med Sch Affil: G-01014

Speciality: FS

Institution ID: 11-0902

**Fort Lauderdale**

**Cleveland Clinic Florida**

3000 W Cypress Creek Rd

Fort Lauderdale, FL 33309-1745

Speciality: ABC

Institution ID: 11-0902

**Gainesville**

**Alachua General Hospital**

801 SW Second Ave

Gainesville, FL 32601-2666

Med Sch Affil: M-01103

Speciality: FS

Institution ID: 11-0523

**Shands Hospital at the University of Florida**

P O Box 100026

Gainesville, FL 32610

Med Sch Affil: M-01003

Speciality: AN, APM, CCA, CCP, CD, CHP, D, DR, END, EP, GE, GS, HEM, HMP, HSO, ID, IM, IMG, MDP, N, NFP, NM, NP, NPM, NR, NS, OAK, ORG, OMO, ON, OPH, ORS, OSS, OTO, OTO, P, PCC, PPC, PDP, PFD, PFD, PFR, PGR, OG, PHS, PS, PTH, RHU, RNK, RD, TS, U, VRE, VS

Institution ID: 11-0461

**Lake City**

**Veterans Affairs Medical Center (Lake City)**

801 S Marion St

Lake City, FL 32025-5888

Med Sch Affil: L-01103

Speciality: OHS, OTO

Institution ID: 11-0486

**Miami**

**Bascom Palmer Eye Institute-Anne Bates Leach Eye Hospital**

PO Box 016880

Miami, FL 33001-6880

Med Sch Affil: M-01107

Speciality: OPH

Institution ID: 11-0791

**Cedars Medical Center**

1400 NW 12th Ave

Miami, FL 33136

Med Sch Affil: L-01102

Speciality: FS

Institution ID: 11-0797

**Veterans Affairs Medical Center (Gainesville)**

1601 SW Archer Rd

Gainesville, FL 32608-1197

Med Sch Affil: M-01103

Speciality: AN, APM, CCA, CD, D, DR, END, GE, GS, HEM, ID, IM, IMG, N, NFP, NM, NP, NR, NS, ORH, ORH, OTO, P, PCC, PPC, PDP, PTH, RHU, RNK, TS, U, VRE, VS

Institution ID: 11-04320

**Hollywood Memorial**

3501 Johnson St

Hollywood, FL 33021

Speciality: GS

Institution ID: 11-0276

**Jacksonville**

**Baptist Medical Center (UFHSC/J)**

800 Prudential Dr

Jacksonville, FL 32207-8983

Med Sch Affil: G-01103

Speciality: CCP, PF, ID, ON, PD

Institution ID: 11-0119

**Mayo Clinic (Jacksonville)**

4500 San Pablo Rd

Jacksonville, FL 32224

Med Sch Affil: M-02006

Speciality: APM, OTO

Institution ID: 11-0603

**Nemours Children's Clinic (UFHSC/J)**

807 Nira St

Jacksonville, FL 32207

Med Sch Affil: L-01103

Speciality: OBS, PD, PHO

Institution ID: 11-0478

**St Luke's Hospital**

4201 Reifert Rd

Jacksonville, FL 32216

Med Sch Affil: M-02006

Speciality: AN, APM, PF, IM, TY

Institution ID: 11-0215

**University Medical Center (UFHSC/J)**

650 W Eighth St

Jacksonville, FL 32206-6587

Med Sch Affil: M-01103, L-02312

Speciality: OPH, OTO

Institution ID: 11-0486
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<tr>
<th>Florida</th>
<th>Participating Institutions</th>
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<td>3106 SW 62 Ave Miami, FL 33155-3908</td>
<td>Emory University Hospital</td>
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<td>Institution ID: 11-8096</td>
<td>Fulton County Health Department</td>
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<td>University of Miami Hospital and Clinics</td>
<td>1475 NW 12th Ave</td>
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<td><strong>University of Miami-Jackson Memorial Medical Center</strong></td>
<td>1611 NW 12th Ave</td>
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<td>Tampa, FL 33601-1289</td>
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<td><strong>Georgia</strong></td>
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<td>Crawford Long Hospital of Emory University</td>
<td>13201 Bruce B Downs Blvd</td>
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<td>550 Peachtree St NE</td>
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<td>Atlanta, GA 30305-2225</td>
<td>Specialty: APN, CD, D, EM, GS, H, ID, IM, OM, P, PDE, PDS, PS, PTH, RHE, TS, U, V,</td>
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<td><strong>Southwest Hospital and Medical Center</strong></td>
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<td><strong>St Petersburg</strong></td>
<td>501 Fairburn Rd SW</td>
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<td>Atlanta, GA 30331-2069</td>
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<td>St Petersburg, FL 33710-0300</td>
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Veterans Affairs Lakeside Medical Center (Chicago)
333 E Arbon St
Chicago, IL 60611
Med Sch Aff: M-01006
Specialties: AN, CCA, CD, D, DR, END, GE, GS, HO, ID, IM, IMG, N, NEP, NS, OPH, ORS, OT, P, PCC, PCH, PHTH, AHU, TS, U, VIB, VS
Institution ID: 16-0243

Veterans Affairs Westside Medical Center (Chicago)
Education Service (141)
3A 127 ACB
523 S Damen Ave
Chicago, IL 60612
Med Sch Aff: M-01611
Specialties: CD, D, DR, END, GE, GS, HO, ID, IM, IMG, MFO, MP, MPD, MPM, N, NEP, ORS, OT, P, PCC, PM, PHTH, RHU, TS, U, vs
Institution ID: 16-0420

Wyler Children's Hospital at the University of Chicago
5841 S Maryland Ave
Chicago, IL 60637
Med Sch Aff: M-01602
Specialties: MFO, PD
Institution ID: 16-0763

Danville
Veterans Affairs Medical Center (Danville)
1900 E Main St
Danville, IL 61832
Med Sch Aff: M-01511
Specialty: IM
Institution ID: 16-0766

Decatur
St Mary's Hospital
1800 E Lake Shore Dr
Decatur, IL 62521
Med Sch Aff: G-01645
Specialty: FP
Institution ID: 16-0767

Evaston
Evaston Hospital
2650 Ridge Ave
Evaston, IL 60201-1781
Med Sch Aff: M-01006
Specialties: AN, DI, GE, GS, N, NPM, NS, OP, ORS, OPH, ORS, PD, PS, RO, TS
Institution ID: 16-0145

St Francis Hospital of Evanston
355 Ridge Ave
Evanston, IL 60202-3399
Med Sch Aff: M-01611, G-01643
Specialty: GS, ID
Institution ID: 16-0188

Granite City
St Elizabeth Medical Center
2100 Madison Ave
Granite City, IL 62040
Med Sch Aff: L-02000
Specialties: CHP
Institution ID: 16-7112

Hines
Edward J Hines Jr Veterans Affairs Hospital
Pith Ave and Roosevelt Rd
PO Box 5600
Hines, IL 60141
Med Sch Aff: M-01643, L-01644, G-01645
Specialties: AN, CD, CIN, D, DR, END, GE, GS, HEM, HMP, ID, IM, IMG, N, NEP, NM, NS, ON, OP, ORS, OT, OTO, P, PCC, PCH, PHTH, RHU, TS, U, VIB, VS
Institution ID: 16-0439

LaGrange
LaGrange Memorial Health System
5101 Willow Springs Rd
LaGrange, IL 60525-2698
Med Sch Aff: L-01602, L-01603
Specialty: TS
Institution ID: 16-0175

Maywood
Loyola University of Chicago Stritch School of Medicine
2160 S First Ave
Maywood, IL 60153-5500
Med Sch Aff: M-01643
Specialty: TY
Institution ID: 16-08001

North Chicago
Veterans Affairs Medical Center (North Chicago)
3011 Green Bay Rd
North Chicago, IL 60064
Med Sch Aff: M-01542
Specialty: CCM, CD, END, GE, GS, HO, ID, IM, IMG, N, P, PUD
Institution ID: 16-0460

Oak Forest
Oak Forest Hospital of Cook County
15600 S Cicero Ave
Oak Forest, IL 60452
Med Sch Aff: G-01602, G-01603
Specialty: OP, PM
Institution ID: 16-0792

Oak Lawn
EHS Christ Hospital and Medical Center
4440 W 95th St
Oak Lawn, IL 60453-4213
Med Sch Aff: M-01611, L-01402, L-01601
Specialty: PA, PS, N, OB, OG
Institution ID: 16-09001

Park Ridge
Lutheran General Hospital
1775 Dempster St
Park Ridge, IL 60068-1174
Med Sch Aff: M-01602, G-01645, G-01646
Specialties: EM, GS, ORS, PCH, PS, PHTH, S, U
Institution ID: 16-0494

Peoria
Methodist Medical Center of Illinois
221 NE Glen Oaks Ave
Peoria, IL 61636
Med Sch Aff: M-01611
Specialty: FP, N, NS
Institution ID: 16-09390

St Francis Medical Center
530 NE Glen Oak Ave
Peoria, IL 61637
Med Sch Aff: M-01611
Specialty: DR, EM, GS, IM, N, NS, OB, PD
Institution ID: 16-05898

Rockford
St Anthony Medical Center
5666 E State St
Rockford, IL 61108-3472
Med Sch Aff: M-01611
Specialty: FP
Institution ID: 16-04102

Swedish American Hospital
1400 Charles St
Rockford, IL 61104-2308
Med Sch Aff: M-01601
Specialty: FP
Institution ID: 16-0446

Skokie
Rush North Shore Medical Center
9500 Gross Point Rd
Skokie, IL 60077
Med Sch Aff: M-01001
Specialty: OB
Institution ID: 16-0763

Springfield
Memorial Medical Center
800 N Mattis Dr
Springfield, IL 62781-0001
Med Sch Aff: M-01645
Specialties: DR, END, FP, GE, GS, H, ID, IM, MP, MFO, N, OB, OPH, ORS, OT, P, PS, PUD, S, U
Institution ID: 16-05099

St John's Hospital
800 E Carpenter St
Springfield, IL 62769
Med Sch Aff: M-01645
Specialties: DR, END, FP, GE, GS, ID, IM, MP, MFO, N, OB, OPH, ORS, OT, P, PS, PUD, S, U
Institution ID: 16-0503

Urbana
Carle Foundation Hospital
611 W Park St
Urbana, IL 61801-2565
Med Sch Aff: M-01611
Specialty: IM
Institution ID: 16-0146

Covenant Medical Center
1400 W Park St
Urbana, IL 61801
Med Sch Aff: M-01611
Specialty: IM
Institution ID: 16-0788

Wheaton
Marianjoy Rehabilitation Hospital and Clinics
26 W 171 Roosevelt Rd
PO Box 795
Wheaton, IL 60189-0795
Med Sch Aff: G-01645, G-01601
Specialty: PM
Institution ID: 16-0925
Indiana

Fort Wayne

Fort Wayne State Development Center
4000 St Joe Rd
Fort Wayne, IN 46835
Specialty: ORS
Institution ID: 17-0633

Lutheran Hospital of Indiana
7060 W Jefferson Blvd
Fort Wayne, IN 46804
Med Sch Affl: L-01720
Specialty: FP, ORS, TY
Institution ID: 17-0228

Parkview Memorial Hospital
2200 Randallia Dr
Fort Wayne, IN 46805
Med Sch Affl: L-01720
Specialty: FP, ORS, TY
Institution ID: 17-0447

St Joseph's Medical Center
700 Broadway
Fort Wayne, IN 46802
Med Sch Affl: L-01720
Specialty: FP, ORS, TY
Institution ID: 17-0422

Gary

The Methodist Hospitals
600 Grant St
Gary, IN 46403-1523
Med Sch Affl: L-01720
Specialty: FP
Institution ID: 17-0236

Hammond

St Margaret Hospital and Health Center
5454 Hobson Ave
Hammond, IN 46204
Specialty: FP
Institution ID: 17-0449

Indianapolis

Central Indiana Regional Blood Center
3450 N Meridian St
Indianapolis, IN 46208
Specialty: BBX
Institution ID: 17-0008

Community Hospitals of Indianapolis
1500 N Ritter Ave
Indianapolis, IN 46210-0805
Med Sch Affl: M-01720
Specialty: PM, TY
Institution ID: 17-0710

Gallahue Mental Health Center of Community Hospital
1500 Ritter St
Indianapolis, IN 46219
Specialty: CHP
Institution ID: 17-0402

Indiana University Medical Center
I U School of Medicine
Pfizer Hall Rm 307
1120 South Dr
Indianapolis, IN 46202-5114
Med Sch Affl: M-01720
Specialty: HSO
Institution ID: 17-0444

Larue D Carter Memorial Hospital
1315 West Tenth St
Indianapolis, IN 46202-2886
Med Sch Affl: M-01720
Specialty: GHE, P
Institution ID: 17-0189

Methodist Hospital of Indiana
1-65 at 21st St
PO Box 1367
Indianapolis, IN 46209-1367
Med Sch Affl: M-01720
Specialty: NS, OPH, ORS, U
Institution ID: 17-0217

Richard L Roudebush Veterans Affairs Medical Center
1120 South Dr Pfll 207
Indianapolis, IN 46202-5114
Med Sch Affl: M-01720
Specialty: AN, D, DMP, DR, GS, IM, IMG, MM, MPD, N, NM, NS, OPH, ORS, OTO, P, PCE, PM, FS, PTH, RO, TS, TY
Institution ID: 17-0414

Riley Hospital for Children
1 U School of Medicine
Fisher Hall Rm 207
Indianapolis, IN 46202-5114
Med Sch Affl: M-01720
Specialty: HMT, PDR
Institution ID: 17-0005

St Vincent Hospital/ and Health Care Center
2001 W 86th St
P.O Box 4070
Indianapolis, IN 46240
Med Sch Affl: M-01720
Specialty: ORS
Institution ID: 17-0421

William N Wishard Memorial Hospital
1118 South Dr Pfll 3577
Indianapolis, IN 46202-5114
Med Sch Affl: M-01720
Specialty: AN, BBK, CHP, D, DMP, DR, FS, IM, IMG, MM, MPD, N, NM, NPM, NS, OBG, ORS, OTO, P, PCC, PCP, PD, POST, FS, PTH, RO, TS, TY
Institution ID: 17-0414

Jeffersonville

Lifespring Mental Health Services
207 W 13th St
Jeffersonville, IN 47130
Specialty: P
Institution ID: 17-0444

Iowa

Cedar Rapids

Mercy Medical Center
701 10th St SE
Cedar Rapids, IA 52405-0003
Specialty: FP
Institution ID: 18-0482

Des Moines

Broadlawns Medical Center
1801 Hickman Rd
Des Moines, IA 50314-1857
Med Sch Affl: L-01803
Specialty: GS
Institution ID: 18-0240

Iowa Methodist Medical Center
1200 Pleasant St
Des Moines, IA 50309-8976
Med Sch Affl: L-01803
Specialty: TY
Institution ID: 18-0130

Mercy Hospital Medical Center
400 University Ave
Des Moines, IA 50314-3180
Specialty: US
Institution ID: 18-0356

Veterans Affairs Medical Center (Des Moines)
3600 30th St
Des Moines, IA 50310-5774
Med Sch Affl: L-01803
Specialty: IM, TY
Institution ID: 18-0226

Iowa City

Mercy Hospital
500 Market St
Iowa City, IA 52245
Med Sch Affl: G-0193
Specialty: PP, FPG
Institution ID: 18-0416

Veterans Affairs Medical Center (Iowa City)
Hwy 6 W
Iowa City, IA 52246
Med Sch Affl: M-01900
Specialty: AN, DR, GS, HSO, IM, MP, N, NM, NP, NR, NS, OHS, OTO, P, PCE, PTH, RNR, U
Institution ID: 18-0019

Sioux City

Marian Health Center
801 5th St
PO Box 3168
Sioux City, IA 51101
Med Sch Affl: L-01803
Specialty: FP
Institution ID: 18-0709

Waterloo

Allen Memorial Hospital
1825 Logan Ave
Waterloo, IA 50703-1076
Med Sch Affl: L-01803
Specialty: PP
Institution ID: 18-0713

Covenant Medical Center
3421 W Ninth St
Waterloo, IA 50702
Specialty: FP
Institution ID: 18-0714

Kansas

Kansas City

Bethany Medical Center
51 N 12th St
Kansas City, KS 66102
Med Sch Affl: L-01802
Specialty: ID, PM
Institution ID: 19-0418
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<td>St Francis Regional Medical Center</td>
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<td>925 N St Francis Ave, Wichita, KS 67214-3892</td>
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<td>Dwight D Eisenhower Veterans Affairs Medical Center</td>
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<td>4101 S 4th St Trafficway, Leavenworth, KS 66048-5055</td>
<td>3600 E Harry St, Wichita, KS 67218</td>
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<td>5000 E Kellogg, Wichita, KS 67218</td>
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<td>400 S Santa Fe Ave, Salina, KS 67401</td>
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<td>C F Menninger Memorial Hospital</td>
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<td>5800 SW Sixth Ave, PO Box 8829</td>
<td>Cardinal Hill Hospital</td>
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<td>Topeka, KS 66601-0829</td>
<td>2000 Versailles Rd, Lexington, KY 40504</td>
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<td>Colmery-O'Neil Veterans Affairs Medical Center</td>
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<td>2200 Gage Blvd, Topeka, KS 66622</td>
<td>1740 Nicholsville Rd, Lexington, KY 40503</td>
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<td>St Francis Hospital and Medical Center</td>
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<td>1700 W 7th St, Topeka, KS 66606-1560</td>
<td>3050 Rio Doa Dr, Lexington, KY 40502</td>
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<td>1500 SW 10th St, Topeka, KS 66604-1803</td>
<td>Shriners Hospital for Crippled Children (Lexington)</td>
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<td>1990 Richmond Rd, Lexington, KY 40502-1208</td>
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<td>Wichita, KS 67207</td>
<td>University Hospital-Albert B Chandler Medical Center</td>
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<td>800 Rose St N 106</td>
<td>Veterans Affairs Medical Center (Lexington)</td>
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<td>Lexington, KY 40536-0094</td>
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<td>Louisville</td>
<td>Child Psychiatric Services (Bingham Child Guidance Clinic)</td>
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<tr>
<td>Amelia Brown Frazier Rehabilitation Center</td>
<td>220 Abraham Flexner Way, Louisville, KY 40202</td>
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<td>200 E Chestnut St, Louisville, KY 40202</td>
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<td>520 S Jackson St, Louisville, KY 40202</td>
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<td>271 E Chestnut St, Louisville, KY 40202</td>
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<tr>
<td>Kosair Children's Hospital (Alliant Health System)</td>
<td>University Hand Surgery Center</td>
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<tr>
<td>315 E Broadway, PO Box 50070</td>
<td>1091 Doctor's Office Bldg, 260 E Liberty St, Louisville, KY 40223-5070</td>
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<td>Methodist Evangelical Hospital</td>
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<tr>
<td>315 E Broadway</td>
<td>405 Liberty St, Louisville, KY 40202</td>
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<td>Louisville, KY 40202</td>
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<td>Institution ID: 20-08007</td>
<td>University Medical Center (Alliant Health System)</td>
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<td>Norton Hospital</td>
<td>200 E Chestnut St, Louisville, KY 40202-1903</td>
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<td>PO Box 36070</td>
<td>Med Sch Affl: G-02002</td>
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<tr>
<td>Louisville, KY 40297-0707</td>
<td>Specialty: BHK, EM, GS, N, NEE, NS, OBG, ORS, OTO, P, PTH, U</td>
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Kentucky

Office of Chief Medical Examiner
820 Barret Ave
Louisville, KY 40204
Specialty: POP
Institution ID: 20-8008

University of Louisville Hospital
530 S Jackson St
Louisville, KY 40202-3611
Med Sch Affil: M-02902
Specialty: AN, CD, D, DR, EM, END, FOP, PP, GE, GS, HMP, HO, ID, IM, MDP, N, NEP, NPM, NS, OBG, OFH, ORS, OTO, P, PS, PTH, PUB, RHU, RO, TS, U
Institution ID: 20-0283

University of Louisville School of Medicine
House Staff Office
Abell AdministrationCtr Rm 518
Louisville, KY 40292
Med Sch Affil: M-02902
Specialty: BBK
Institution ID: 20-0287

Veterans Affairs Medical Center (Louisville)
800 Zorn Ave
Louisville, KY 40205-1409
Med Sch Affil: M-02902
Specialty: AN, CD, D, DR, END, GE, GS, NO, ID, IM, MDP, N, NEP, OFH, ORS, OTO, P, PS, PTH, PUB, RHU, TS, U
Institution ID: 20-0280

Madisonville
Regional Medical Center of Hopkins County
900 Hospital Dr
Madisonville, KY 42431-1694
Med Sch Affil: L-02002, L-02002
Specialty: FP
Institution ID: 20-0220

Louisiana

Alexandria
Veterans Affairs Medical Center (Alexandria)
Shreveport Hwy
Alexandria, LA 71301
Med Sch Affil: G-0201
Specialty: OB
Institution ID: 21-0100

Baton Rouge
Baton Rouge General Medical Center
3600 Florida St
PO Box 2551
Baton Rouge, LA 70822-2551
Med Sch Affil: M-02135
Specialty: EM
Institution ID: 21-7005

Earl K Long Medical Center
5258 Airline Hwy
Baton Rouge, LA 70805-2488
Med Sch Affil: M-02105
Specialty: GS, OBG, OB/GYN
Institution ID: 21-0491

New Orleans
Alton Ochsner Medical Foundation
Graduate Medical Education
1516 Jefferson Hwy
New Orleans, LA 70121
Med Sch Affil: M-02010, G-02100
Specialty: D, N, NS, OTO, PD, PTC, PM, PS
Institution ID: 21-0811

Blood Center for Southeast Louisiana
312 S Galvez St
New Orleans, LA 70119
Specialty: BBK
Institution ID: 21-0828

Children's Hospital
200 Henry Clay Ave
New Orleans, LA 70118
Med Sch Affil: M-02010, G-02101
Specialty: AL, CHN, DR, MDP, NPM, NS, OF, OBS, PD, FHO, TTY, U
Institution ID: 21-0731

Eye Ear Nose and Throat Hospital
8236 Napoleon Ave
New Orleans, LA 70115
Med Sch Affil: G-02105, G-02101
Specialty: OPH, OTO
Institution ID: 21-0110

Louisiana Rehabilitation Institute
1532 Tulane Ave
New Orleans, LA 70110
Specialty: PM
Institution ID: 21-0734

Louisiana State University Eye Center
2020 Gravier St Ste B
New Orleans, LA 70112
Med Sch Affil: M-02105
Specialty: OPH
Institution ID: 21-0401

Lake Charles
Lake Charles Memorial Hospital
1701 Oak Park Blvd
Dr swer M
Lake Charles, LA 70601
Specialty: OSH
Institution ID: 21-0819

Metairie
Doctors Hospital of Jefferson
4900 Houns Blvd
Metairie, LA 70006
Specialty: HSP
Institution ID: 21-0222

East Jefferson General Hospital
1700 General Dr
Metairie, LA 70011
Med Sch Affil: L-02101
Specialty: HSP
Institution ID: 21-0211

Monroe
E A Conway Medical Center
PO Box 1881
4864 Jackson St
Monroe, LA 71210-1881
Med Sch Affil: C-02106
Specialty: GS, OBG, OB/GYN
Institution ID: 21-0344

New Orleans
Alton Ochsner Medical Foundation
Graduate Medical Education
1516 Jefferson Hwy
New Orleans, LA 70121
Med Sch Affil: M-02105, G-02101
Specialty: D, N, NS, OTO, PD, PTC, PM, PS
Institution ID: 21-0811

Blood Center for Southeast Louisiana
312 S Galvez St
New Orleans, LA 70119
Specialty: BBK
Institution ID: 21-0828

Medical Center of Louisiana at New Orleans-LSU Division
1532 Tulane Ave
New Orleans, LA 70110-1016
Med Sch Affil: M-02105
Specialty: CRM, MDP, NPM, TS, U
Institution ID: 21-0772

Medical Center of Louisiana at New Orleans-Tulane Division
1532 Tulane Ave
New Orleans, LA 70110-1016
Med Sch Affil: M-02105
Specialty: AL, CHN, DR, MDP, NPM, NS, OF, OBS, PD, FHO, TTY, U
Institution ID: 21-0772

Medical Center of Louisiana University Hospital Campus
2021 Perdido St
PO Box 61265
New Orleans, LA 70141-1262
Med Sch Affil: M-02105
Specialty: CD, END, GE, HEM, ID, IM, MEM, N, NEP, ON, OBS, PCC, PS, PUB, RHU, VS
Institution ID: 21-0233

Graduate Medical Education Directory
Southern Baptist Hospital
2720 Nolensville Ave
New Orleans, LA 70115
Med Sch Affil: M-02106
Specialty: OB, ESP, PCC
Institution Id: 21-0449

Touro Infirmary
1401 Flower St
New Orleans, LA 70115-3593
Med Sch Affil: M-02101, G-02105
Specialty: GS, P, PM, FS
Institution Id: 21-0183

Tulane University Hospital and Clinics
1415 Tulane Ave
New Orleans, LA 70112-2699
Med Sch Affil: M-02101
Specialty: AI, AN, CCM, CD, CHIN, CHP, D, DR, END, GE, GS, HO, IM, MN, MF, N, NFM, NS, OBG, OPH, ORS, OSM, OTO, P, PO, PDC, PDR, PHO, PN, PS, PUD, TS, U, V
Institution Id: 21-0445

Veterans Affairs Medical Center-LSU Service (New Orleans)
1601 Perdido St
New Orleans, LA 70115-2946
Med Sch Affil: M-02105
Specialty: AN, D, DR, GS, OTO, PS, PTH, TS, VS
Institution Id: 21-0234

Veterans Affairs Medical Center-Tulane Service (New Orleans)
1601 Perdido St
New Orleans, LA 70114
Med Sch Affil: M-02101, L-02312
Specialty: CCM, CD, GE, HO, ID, IM, MN, MF, MPD, N, NFM, NS, OPH, ORS, P, PUD, TS, U
Institution Id: 21-0733

Pineville
Huey P Long Regional Medical Center
PO Box 5382
Pineville, LA 71361-4301
Med Sch Affil: M-02101, L-02105
Specialty: GS, OBG, OHS
Institution Id: 21-0490

Shreveport
Charter Forest Hospital
9220 Linwood Ave
PO Box 18130
Shreveport, LA 71138-1130
Specialty: P
Institution Id: 21-0024

Louisiana State University Medical Center-Shreveport
1601 Kings Hwy
PO Box 33932
Shreveport, LA 71130-3932
Med Sch Affil: M-02106
Specialty: P
Institution Id: 21-0722

Overtown Brooks Veterans Affairs Medical Center
510 S Stoner Ave
Shreveport, LA 71101-4295
Med Sch Affil: M-02106
Specialty: CCM, CD, D, GE, GS, ID, IM, MEP, OPH, ORS, OTO, P, PCC, PTH, RHU, TS, U
Institution Id: 21-0497

Schumpert Medical Center
915 Margaret Pl
PO Box 21976
Shreveport, LA 71128-1976
Med Sch Affil: L-02105
Specialty: OBG, PS, U
Institution Id: 21-0440

Shriners Hospital for Crippled Children (Shreveport)
3100 Sanford Ave
Shreveport, LA 71103-4289
Med Sch Affil: L-02105
Specialty: OBG
Institution Id: 21-0440

Willis-Knighton Medical Center
2600 Greenwood Blvd
Box 32600
Shreveport, LA 71110
Med Sch Affil: L-02105
Specialty: GS
Institution Id: 21-0449

Maine
Portland
Mercy Hospital
144 State St
Portland, ME 04101
Specialty: CHP
Institution Id: 23-0585

South Portland
Jackson Brook Institute
175 Running Hill Rd
South Portland, ME 04106
Specialty: CHP
Institution Id: 23-0601

Togus
Veterans Affairs Medical Center (Togus)
VCM&ROC
Togus, ME 04380
Specialty: U
Institution Id: 23-0200

Wasserlot
Mid-Maine Medical Center
140 North St
Wasserlot, ME 04330
Med Sch Affil: L-02301
Specialty: CHP
Institution Id: 23-0200

Maryland
Baltimore
American Red Cross Blood Services
4700 Mount Hope Dr
Baltimore, MD 21215-3200
Specialty: BIB
Institution Id: 23-0614

Children’s Hospital and Center for Reconstructive Surgery
3225 Greenspring Ave
Baltimore, MD 21211
Med Sch Affil: G-02301, G-03201
Specialty: GS, ORS, OSM, PS
Institution Id: 23-0286

Franklin Square Hospital Center
6000 Franklin Square Dr
Baltimore, MD 21237-3588
Med Sch Affil: L-02312, L-02207, L-02301
Specialty: P
Institution Id: 23-0212

Good Samaritan Hospital of Maryland
6501 Loch Raven Blvd
Baltimore, MD 21226-2905
Med Sch Affil: G-02307
Specialty: ORS, PM
Institution Id: 23-0522

Greater Baltimore Medical Center
670 N Charles St
Baltimore, MD 21204-8608
Med Sch Affil: L-02301, G-02307
Specialty: UTO
Institution Id: 23-0507

James Lawrence Kernan Hospital
7200 N Forest Park Ave
Baltimore, MD 21207
Med Sch Affil: L-02301
Specialty: ORS
Institution Id: 23-0238

Johns Hopkins Bayview Medical Center
4940 Eastern Ave
Baltimore, MD 21224
Med Sch Affil: M-02307, L-02312, L-02301
Specialty: AI, AN, D, DMP, EM, GE, GS, IM, IMG, N, NFM, NS, ORG, ORS, OTO, P, F, PCC, PS, U
Institution Id: 23-0118

Johns Hopkins Hospital
600 N Wolfe St
Baltimore, MD 21205-2196
Med Sch Affil: M-02307, G-02301
Specialty: AI, AN, APM, BIX, CCA, CCM, CCP, CCR, CD, CH, CHP, D, DMP, DR, DM, END, GE, GS, HEM, ID, IM, IMG, N, NFM, NP, NRM, NR, NS, ORG, ON, ORG, OPH, ORS, OSM, OTO, P, F, PCC, PD, FDC, PDE, PDR, PDR, PDS, PD, PHO, PIP, PM, PS, PTH, RHU, RHI, RO, RS, TS, U, UER
Institution Id: 23-0119

Johns Hopkins University School of Hygiene/Public Health
615 N Wolfe St
Baltimore, MD 21205-2179
Med Sch Affil: L-02307
Specialty: OM, PN
Institution Id: 23-0503

Maryland General Hospital
827 Linden Ave
Baltimore, MD 21201-4081
Med Sch Affil: L-02301
Specialty: UTO
Institution Id: 23-0417

Mercy Medical Center
301 St Paul Pl
Baltimore, MD 21201-2165
Med Sch Affil: M-02301
Specialty: EM, DMP, GE, IM, OBG, ORS, FD
Institution Id: 23-0419

Sheppard and Enoch Pratt Hospital
6601 N Charles St
PO Box 6815
Baltimore, MD 21205-6815
Med Sch Affil: G-02301
Specialty: CHP
Institution Id: 23-0397

Sinai Hospital of Baltimore
2401 W Belvedere Ave
Baltimore, MD 21215-5271
Med Sch Affil: M-02307, L-02301
Specialty: GS, PM, PS
Institution Id: 23-0190
<table>
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<tr>
<th>Maryland</th>
<th>Participating Institutions</th>
<th>Massachusetts</th>
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<td>St Agnes Hospital of the City of Baltimore</td>
<td>SUHSS Edward Herbert School of Medicine</td>
<td>Boston Department of Health and Hospitals</td>
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<tr>
<td>Baltimore, MD 21209-5309</td>
<td>4301 Jones Bridge Road</td>
<td>618 Harrison Ave</td>
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<td>Med Sac Aff: L-02301, G-0207</td>
<td>Bethesda, MD 20814-4790</td>
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<td>Specialty: O/R, U</td>
<td>Med Sac Aff: M-03312</td>
<td>Boston, MA 02118</td>
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<td><strong>Union Memorial Hospital</strong></td>
<td><strong>Institution ID: 23-0471</strong></td>
<td><strong>Institution ID: 23-0166</strong></td>
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<td>201 S University Plwy</td>
<td><strong>Boston University Medical Center-University Hospital</strong></td>
<td><strong>Boston University School of Medicine</strong></td>
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<td>Baltimore, MD 21218-2805</td>
<td>Wade Ave</td>
<td><strong>80 E Concord St</strong></td>
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<td>Med Sac Aff: M-02307, L-02301</td>
<td>Catonsville, MD 21228</td>
<td>Boston, MA 02118-2804</td>
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<td>22 S Greene St</td>
<td><strong>Silver Spring</strong></td>
<td><strong>Brigham and Women’s Hospital</strong></td>
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<tr>
<td>Baltimore, MD 21201-1550</td>
<td>Holy Cross Hospital of Silver Spring</td>
<td>75 Frascati St</td>
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<td>Med Sac Aff: M-02301, L-02312</td>
<td>1500 Forest Glen Rd</td>
<td>Boston, MA 02115</td>
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<td>Specialty: OB/GYN</td>
<td>Silver Spring, MD 20910-9987</td>
<td>Med Sac Aff: M-03401, L-02312, G-02010</td>
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<td><strong>Veterans Affairs Medical Center (Baltimore)</strong></td>
<td>Specialty: PS, OBG</td>
<td>Institution ID: 54-0438</td>
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<td>10 N Greene St</td>
<td><strong>Walter P Carter Center</strong></td>
<td><strong>Carney Hospital</strong></td>
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<td>Baltimore, MD 21201-1524</td>
<td>630 W Fayette St</td>
<td>2100 Dorchester Ave</td>
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<td>Med Sac Aff: M-02301, G-02007</td>
<td>Baltimore, MD 21201-1585</td>
<td>Boston, MA 02124-5666</td>
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<td>Specialty: COM, CD, D, EN, ID, IM, IMG, N, NS, P, PTH, PUD, RNU, RNV, U, VIR</td>
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<td>National Cancer Institute</td>
<td><strong>Children’s Hospital</strong></td>
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<td>Bldg 10 Rm 12N-214</td>
<td>300 Longwood Ave</td>
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<td>8900 Rockville Pike</td>
<td>Boston, MA 02115</td>
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<td>Bethesda, MD 20892</td>
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<td>Specialty: APM, CCA, D, DMP, DR, HSO, HSP, NM, NP, NR, NS, OMS, ORS, OS, PS, RNR, RO, TS, U</td>
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<td>Specialty: PCP</td>
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<td><strong>Boston</strong></td>
<td><strong>Dana-Farber Cancer Institute</strong></td>
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<td><strong>National Naval Medical Center (Bethesda)</strong></td>
<td><strong>Belmont</strong></td>
<td>44 Binney St</td>
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<tr>
<td>4601 Wisconsin Ave</td>
<td>McLean Hospital</td>
<td>Boston, MA 02116</td>
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<td>Bethesda, MD 20814-5011</td>
<td>115 Milt St</td>
<td>Specialty: NM, ON, PHO, RO, VIR</td>
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<td>Med Sac Aff: M-02312, M-01002, L-01001, G-01003</td>
<td>Belmont, MA 02178</td>
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<td>Specialty: ON, PCE, RO, TY</td>
<td>Med Sac Aff: M-02401, L-02312</td>
<td><strong>Erich Lindemann Mental Health Center</strong></td>
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<td>Institution ID: 23-0275</td>
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<td>25 Stanford St Gont Center</td>
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<td><strong>NIH Warren Grant Magnuson Clinical Center</strong></td>
<td><strong>Institution ID: 24-0239</strong></td>
<td>Boston, MA 02114</td>
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<td>Bldg 10 Rm 1C129</td>
<td><strong>Boston</strong></td>
<td>Specialty: P</td>
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<td>National Institutes of Health</td>
<td><strong>Suburban Hospital</strong></td>
<td><strong>Institution ID: 24-0757</strong></td>
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<tr>
<td>10 Center Drive MSC 1138</td>
<td><strong>800 Old Georgetown Rd</strong></td>
<td><strong>Faulkner Hospital</strong></td>
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<td>Bethesda, MD 20892-1108</td>
<td>Bethesda, MD 20814-1497</td>
<td>1153 Centre St</td>
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<td>Med Sac Aff: L-02312, L-01001, G-01002</td>
<td>Med Sac Aff: G-02312, G-01001, G-01002</td>
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<td><strong>Boston</strong></td>
<td><strong>Suburban Hospital</strong></td>
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<tr>
<td>Beth Israel Hospital</td>
<td><strong>Boston City Hospital</strong></td>
<td><strong>Harvard Community Health Plan</strong></td>
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<tr>
<td>330 Brookline Ave</td>
<td>818 Harrison Ave</td>
<td>Teaching Center</td>
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<tr>
<td>Boston, MA 02215-5111</td>
<td>Administration</td>
<td>Two Pennway Plaza</td>
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<td>Med Sac Aff: M-02401</td>
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<td>Boston, MA 02215</td>
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<td><strong>Institution ID: 24-0404</strong></td>
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**Institution ID:** IDs provided for each institution.
Massachusetts

Jewish Memorial Hospital
50 Townsend St
Boston, MA 02110
Med Sch Affil: M-02401
Specialty: DMP
Institution ID: 24-0758

Joint Center for Radiation Therapy
50 Binney St
Boston, MA 02115
Med Sch Affil: M-02405
Specialty: DMP
Institution ID: 24-0633

Joslin Diabetes Center
One Joslin Place
Boston, MA 02215
Specialty: END
Institution ID: 24-0834

Judge Baker Guidance Center
295 Longwood Ave
Boston, MA 02115
Med Sch Affil: M-02401
Specialty: CHP
Institution ID: 24-0212

Lamuel Shattuck Hospital
Attn: Donnellen Beurde Medical Services
170 Morton St
Boston, MA 02190
Med Sch Affil: M-02401
Specialty: GE, P
Institution ID: 24-0401

Mallory Institute of Pathology Foundation
784 Massachusetts Ave
Boston, MA 02118
Specialty: DMP
Institution ID: 24-0830

Massachusetts General Hospital
Pru St
Boston, MA 02114
Med Sch Affil: M-02401, L-02312
Specialty: OBG, PS
Institution ID: 24-0994

Massachusetts Mental Health Center
74 Fenwood Rd
Boston, MA 02115
Med Sch Affil: M-02401
Specialty: CHP, P
Institution ID: 24-0255

New England Baptist Hospital
125 Parker Hill Ave
Boston, MA 02120-2850
Med Sch Affil: L-02401
Specialty: MO, OB, OB
Institution ID: 24-0652

New England Deaconess Hospital
One Deaconess Road
Boston, MA 02215-5306
Med Sch Affil: M-02401, L-02312
Specialty: CCM, D, DMP, P, U
Institution ID: 24-0002

New England Medical Center Hospitals
750 Washington St
Boston, MA 02111-9915
Med Sch Affil: M-02401
Specialty: D, PMH, OT, PS
Institution ID: 24-0378

Solomon Carter Fuller Mental Health Center
86 E Newton St
Boston, MA 02118
Med Sch Affil: M-02405
Specialty: P
Institution ID: 24-0755

St Elizabeth's Medical Center of Boston
736 Cambridge St
Boston, MA 02135-1111
Med Sch Affil: M-02407
Specialty: N, OBG, PS, U
Institution ID: 24-0211

Veterans Affairs Medical Center (Boston)
150 S Huntington Ave
Boston, MA 02130-4980
Med Sch Affil: M-02407, M-02405
Specialty: CCM, D, DR, GE, GS, HO, ID, IM, N, OPH, ORS, OTO, PM, PTH, PUD, RHE, RO, U
Institution ID: 24-0357

Braintree

Braintree Hospital
250 Pond St
Braintree, MA 02184
Specialty: PM
Institution ID: 24-0870

Brockton

Brockton Hospital
680 Centre St
Brockton, MA 02302-2305
Med Sch Affil: M-02405
Specialty: GS
Institution ID: 24-0325

Brockton-West Roxbury Veterans Affairs Medical Center
940 Belmont St
Brockton, MA 02301-5506
Med Sch Affil: M-02401
Specialty: CCM, CD, GS, HSO, IM, IMG, MPD, NM, ORS, PS, PTH, U, U
Institution ID: 24-0172

Cardinal Cushing General Hospital
235 N Pearl St
Brockton, MA 02301
Med Sch Affil: L-02407
Specialty: GS
Institution ID: 24-0814

Burlington

Lahey Clinic
41 Mall Rd
Burlington, MA 01805
Med Sch Affil: L-02407, L-02401, L-02407
Specialty: D, PS, OB, OTO, OTO, PTH, U
Institution ID: 24-0163

Cambridge

Cambridge Hospital
1435 Cambridge St
Cambridge, MA 02139
Med Sch Affil: M-02401, L-02407
Specialty: HSP
Institution ID: 24-0367

Mount Auburn Hospital
390 Mount Auburn St
Cambridge, MA 02238
Med Sch Affil: M-02401
Specialty: GS, HSP, PS, VS
Institution ID: 24-0375

Framingham

MetroWest Medical Center
Framingham Union Campus
115 Lincoln St
Framingham, MA 01701
Med Sch Affil: L-02416, L-02405
Specialty: PS
Institution ID: 24-0182

Lawrence

Lawrence General Hospital
One General St
Lawrence, MA 01841
Specialty: FP
Institution ID: 24-0330

Malden

Malden Hospital
100 Hospital Rd
Malden, MA 02148-3591
Med Sch Affil: M-02405
Specialty: OBG
Institution ID: 24-0188

Newton Lower Falls

Newton-Wellesley Hospital
204 Washington St
Newton Lower Falls, MA 02162
Med Sch Affil: M-02407
Specialty: GS, HSO, OB, PS
Institution ID: 24-0448

Somerville

Somerville Hospital
230 Highland Ave
Somerville, MA 02143
Specialty: CHP
Institution ID: 24-0874

Springfield

Baystate Medical Center
759 Chestnut St
Springfield, MA 01199-9509
Med Sch Affil: M-02407, L-02412, G-02405
Specialty: ORS
Institution ID: 24-0009

Shriners Hospital for Crippled Children (Springfield)
515 Carew St
Springfield, MA 01104-2396
Med Sch Affil: G-02405
Specialty: ORS
Institution ID: 24-0888

Stoneham

New England Memorial Hospital
5 Woodland Rd
PO Box 102
Stoneham, MA 01801-0102
Specialty: CHP
Institution ID: 24-0740

Stoughton

New England Sinai Hospital and Rehabilitation Center
150 York St
Stoughton, MA 02072
Specialty: PM
Institution ID: 24-0835
Wellesley
Charles River Hospital
208 Grove St
Wellesley, MA 02181
Specialties: CHP
Institution ID: 24-0749

Worcester
Medical Center of Central Massachusetts
119 Belmont St
Worcester, MA 01605-2982
Med Sch Affil: M-02416
Specialties: EM, FP, GS, IMG, NPM, OBG, ORS, PTH, U
Institution ID: 24-0113

St Vincent Hospital
35 Winthrop St
Worcester, MA 01606-4593
Med Sch Affil: M-02416
Specialties: EM, FP, GE, GS, N, NS, OBG, ORS, TS, U
Institution ID: 24-0361

University of Massachusetts Medical Center
55 Lake Ave N
Worcester, MA 01655
Med Sch Affil: M-02415, G-02301, G-02312
Specialties: CD, NS
Institution ID: 24-0724

University of Massachusetts Medical School
55 Lake Ave N
Worcester, MA 01655
Med Sch Affil: M-02416, L-02312
Specialties: GPM, OM
Institution ID: 24-0501

Worcester City Hospital
26 Queen St
Worcester, MA 01610
Specialties: CCA
Institution ID: 24-0140

Michigan
Allen Park
Veterans Affairs Medical Center (Allen Park)
Southfield & Outer Dr
Allen Park, MI 48101-5199
Med Sch Affil: M-02507
Specialties: AL, CD, D, END, GE, GS, ID, IM, IDG, MFD, N, NFP, ON, OBG, ORS, OT, PS, PUD, RNU, U
Institution ID: 25-0108

Ann Arbor
St Joseph Mercy Hospital (Catherine McAuley Health System)
PO Box 986
RHH Ste B212
Ann Arbor, MI 48106
Med Sch Affil: M-02501
Specialties: EM, MFD, ORS, PS, SPS
Institution ID: 25-0487

University of Michigan Hospitals
Office of Clinical Affairs
201 Med Inn Box 0805
5600 E Medical Center Dr
Ann Arbor, MI 48109-0826
Med Sch Affil: M-02501
Specialties: ORG
Institution ID: 25-0256

Veterans Affairs Medical Center (Ann Arbor)
2210 Fuller Rd
Ann Arbor, MI 48106
Med Sch Affil: M-02501
Specialties: CD, D, DR, END, GE, GS, HEM, ID, IM, IMG, MFD, N, NFP, NM, ON, OBG, ORS, OT, PS, PUG, PS, RNU, SPS, TS, U, VEB, VS
Institution ID: 25-0489

Chelsea
Chelsea Community Hospital
775 S Main St
Chelsea, MI 48118
Med Sch Affil: L-02501
Specialties: FP
Institution ID: 25-0507

Detroit
American Red Cross Blood Serv-Southeastern Michigan Region
100 Mack Ave
PO Box 33353
Detroit, MI 48232-3351
Specialties: BBK
Institution ID: 25-0550

Children's Hospital of Michigan
3801 Beaubien Blvd
Detroit, MI 48201-3196
Med Sch Affil: M-02507
Specialties: AL, CCP, CHN, D, EM, NPM, NS, OMO, OPH, ORS, OT, OD, PCD, PS, PS, PS, PS, PS, PTH, RNR
Institution ID: 25-0456

Detroit Psychiatric Institute
1151 Taylor St
Detroit, MI 48202
Med Sch Affil: M-02507
Specialties: F
Institution ID: 25-0521

Detroit Receiving Hospital and University Health Center
4201 St Antoine Blvd
Detroit, MI 48201
Med Sch Affil: M-02507
Specialties: AL, CCM, CD, D, DR, EM, KMF, END, GE, GS, ID, IM, MEM, MFD, MPM, N, NFR, NS, OAR, OM, ON, ORS, OTO, PS, PTH, PUD, RNU, TS, TY
Institution ID: 25-0431

Grace Hospital
9671 W Outer Dr
Detroit, MI 48205
Med Sch Affil: M-02507
Specialties: DR, EM, FP, GS, IM, MFD, OBG, PS, RO, TY
Institution ID: 25-0291

Harper Hospital
3860 John R St
Detroit, MI 48203
Med Sch Affil: M-02507
Specialties: CCM, CD, CHN, D, DR, END, GE, GS, HSP, ID, IM, MEM, N, NFP, NR, NS, OMO, ON, OT, P, PCD, PS, PTH, PUD, RNU, RNR, SPS, TS, U, U, VS
Institution ID: 25-0413

Hutzel Hospital
4707 St Antoine Blvd
Detroit, MI 48804
Med Sch Affil: M-02507
Specialties: MFD, NFP, OAR, OBG, OMO, OPH, ORS, OSM, PCD, PTH, RNU, TY
Institution ID: 25-0405

Lafayette Clinic
851 E Lafayette
Detroit, MI 48207
Specialties: P
Institution ID: 25-0475

Rehabilitation Institute
261 Mack Blvd
Detroit, MI 48201
Med Sch Affil: M-02507
Specialties: MPM, PM, PMP
Institution ID: 25-0210

Samaritan Health Center
5555 Conner Ave
Detroit, MI 48213
Specialties: GS
Institution ID: 25-0165

Sinai Hospital
6767 W Outer Dr
Detroit, MI 48235-3869
Med Sch Affil: M-02507
Specialties: ORS
Institution ID: 25-0114

East Lansing
Michigan State University Clinical Center
Human Health Programs
D132 Pea Hall
East Lansing, MI 48824-1316
Med Sch Affil: M-02512
Specialties: IM, MPO, ONS, ORS, P
Institution ID: 25-0632

Michigan State University College of Human Medicine
Sarra Baralay
Dean's Office
A-110 E Pea Hall MSU
East Lansing, MI 48824-1316
Med Sch Affil: M-02512
Specialties: DR
Institution ID: 25-0502

Ferndale
Kingswood Hospital
10000 W Eight Mile Rd
Ferndale, MI 48220
Specialties: P
Institution ID: 25-0838

Flint
Genesys Regional Medical Center-St Joseph Campus
302 Kenmington Ave
Flint, MI 48506-3000
Med Sch Affil: M-02512
Specialties: DR
Institution ID: 25-0489

Hurley Medical Center
One Hurley Plaza
Flint, MI 48506-5983
Med Sch Affil: M-02512, G-02501
Specialties: DR, ORS
Institution ID: 25-0394

McLaren Regional Medical Center
401 S Ballenger Hwy
Flint, MI 48532-3609
Med Sch Affil: M-02512
Specialties: DR, GS
Institution ID: 25-0412
Grand Rapids
Bodgett Memorial Medical Center
1840 Wealthy SE
Grand Rapids, MI 49506-2968
Med Sch Affl: M-02512
Specialty: Internal Medicine
Institution ID: 25-4849

Butternworth Hospital
100 Michigan
Grand Rapids, MI 49503
Med Sch Affl: M-02512
Specialty: Internal Medicine
Institution ID: 25-4844

Pine Rest Christian Hospital
300 S 8th St
Grand Rapids, MI 49501-0165
Med Sch Affl: M-02512
Specialty: Internal Medicine
Institution ID: 25-4844

St Mary's Health Services
200 Woodside St
Grand Rapids, MI 49503
Med Sch Affl: M-02512
Specialty: Internal Medicine
Institution ID: 25-4844

Grosse Pointe Farms
Cottage Hospital of Grosse Pointe
159 Kercheval Ave
Grosse Pointe Farms, MI 48236-3602
Specialty: Emergency Medicine
Institution ID: 25-4848

Kalamaazoo
Borgess Medical Center
1512 Gull Rd
Kalamazoo, MI 49001-1640
Med Sch Affl: M-02512, L-02501
Specialty: Emergency Medicine, OB/GYN, OB/GYN, OB/GYN
Institution ID: 25-4848

Bronson Methodist Hospital
One Healthcare Plaza
Kalamazoo, MI 49007
Med Sch Affl: M-02512
Specialty: Emergency Medicine, OB/GYN, OB/GYN, OB/GYN
Institution ID: 25-4848

Lansing
Michigan Capital Medical Center
401 W Greenlawn
Lansing, MI 48910-2819
Med Sch Affl: M-02512
Specialty: Emergency Medicine, OB/GYN, OB/GYN, OB/GYN
Institution ID: 25-4848

Michigan Capital Medical Center-Pennsylvania Campus
401 W Greenlawn
Lansing, MI 48910
Specialty: Emergency Medicine, OB/GYN, OB/GYN, OB/GYN
Institution ID: 25-4848

St Lawrence Hospital and HealthCare Services
1210 W Saginaw St
Lansing, MI 48915-1900
Med Sch Affl: M-02512
Specialty: Gastroenterology, Hematology, Internal Medicine, Medical Parasitology
Institution ID: 25-4848

St Lawrence Hospital and HealthCare Services
1210 W Saginaw
Lansing, MI 48915-1900
Specialty: Internal Medicine
Institution ID: 25-4848

Milford
Huron Valley Hospital
1601 E Commerce Rd
Milford, MI 48381-1271
Specialty: Family Medicine
Institution ID: 25-4848

Northville
Hawthorn Center Hospital
15711 Haggerty Rd
Northville, MI 48137
Med Sch Affl: L-02501
Specialty: Pediatrics
Institution ID: 25-4848

Pontiac
St Joseph Mercy Community HealthCare System
900 Woodward Pontiac, MI 48341-2855
Med Sch Affl: M-02507
Specialty: Pediatrics
Institution ID: 25-4848

Saginaw
Saginaw General Hospital
1477 N Harrison St
Saginaw, MI 48638
Med Sch Affl: M-02512
Specialty: Family Medicine, General Internal Medicine
Institution ID: 25-4848

St Luke's Hospital
700 Cooper Ave
Saginaw, MI 48638
Med Sch Affl: M-02512
Specialty: Family Medicine, General Internal Medicine
Institution ID: 25-4848

St Mary's Medical Center
830 S Jefferson St
Saginaw, MI 48601
Med Sch Affl: M-02512
Specialty: Family Medicine, General Internal Medicine
Institution ID: 25-4848

Southfield
Providence Hospital
16001 W 9 Mile Rd
PO Box 2043
Southfield, MI 48077
Med Sch Affl: M-02507, G-02501
Specialty: OBGYN, Ob/Gyn, OBGYN
Institution ID: 25-4848

Troy
William Beaumont Hospital-Troy
44201 Dequindre Rd
Troy, MI 48098
Specialty: Emergency Medicine, Family Medicine, OB/GYN, OB/GYN, OB/GYN
Institution ID: 25-4848

Minnesota
Duluth
St Mary's Medical Center
407 E Third St
Duluth, MN 55806
Med Sch Affl: M-02507
Specialty: Family Medicine
Institution ID: 25-4848

Fergus Falls
Lake & Island Mental Health Center
120 S Acaste Ave
Fergus Falls, MN 56537
Specialty: Psychiatry
Institution ID: 25-4848

Maplewood
HealthEast St John's Northeast Hospital
5575 Beam Ave
Maplewood, MN 55119-1127
Med Sch Affl: G-02504
Specialty: Family Medicine
Institution ID: 25-4848

Minneapolis
Abbott Northwestern Hospital
800 E 28th Street
Minneapolis, MN 55407-3700
Med Sch Affl: L-02504, G-02504
Specialty: Internal Medicine, OB/GYN, OB/GYN, OB/GYN
Institution ID: 25-4848

Children's Health Care-Minneapolis
3525 Chicago Ave S
Minneapolis, MN 55404-0976
Med Sch Affl: L-02504
Specialty: Pediatrics, Pediatrics, Pediatrics, Pediatrics
Institution ID: 25-4848

Fairview Riverside Medical Center
4540 Riverside Ave
Minneapolis, MN 55454-1400
Med Sch Affl: G-02504
Specialty: Family Medicine, OB/GYN, OB/GYN
Institution ID: 25-4848

Hennepin County Medical Center
701 Park Ave S
Minneapolis, MN 55415-1833
Med Sch Affl: G-02504
Specialty: Family Medicine, OB/GYN, OB/GYN, OB/GYN
Institution ID: 25-4848

Memorial Blood Centers of Minnesota
2904 Park Ave S
Minneapolis, MN 55404
Med Sch Affl: G-02504
Specialty: Internal Medicine
Institution ID: 25-4848
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<th>Participating Institutions</th>
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<th>Missouri</th>
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<tr>
<td>Methodist Hospital</td>
<td>6500 Excelsior Blvd</td>
<td>Rochester Methodist Hospital</td>
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<tr>
<td>PO Box 666</td>
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<td>Shriners Hospital for Crippled Children (Twin Cities Unit)</td>
<td>2025 E River Rd</td>
<td>St Mary's Hospital of Rochester</td>
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<td>2737 Chicago Ave S</td>
<td>Gillette Children's Hospital</td>
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<td>University of Minnesota Hospital and Clinic</td>
<td>Box 197 Mayo Bldg Rm A-304</td>
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<td>Veterans Affairs Medical Center (Minneapolis)</td>
<td>3301 Chicago Ave N</td>
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<td>Robbinsdale</td>
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892
University and Children's Hospital
One Hospital Dr DC018
Columbia, MO 65212
Med Sch Affil: M-02803
Specialty: AN, CCHS, CD, CHP, J, DR, END, FP, FPG, GE, GS, HEM, IE, IM, M, NE, NEP, NM, NPM, NR, NS, OBG, ON, ORS, OTO, P, PCC, PD, PM, P, PTH, RHU, TS, U, VS
Institution ID: 28-0176

University of Missouri-Columbia School of Medicine
MA204 Medical Sciences Bldg
One Hospital Dr
Columbia, MO 65212
Specialty: CD
Institution ID: 28-0709

Jefferson City
Missouri Department of Health
1728 E Elm
PO Box 570
Jefferson City, MO 65102-0570
Specialty: PH
Institution ID: 28-0816

Riverside Hospital and Counseling Center
1314 W Edgewood Dr
Jefferson City, MO 65101
Specialty: CHP
Institution ID: 28-8172

Kansas City
Baptist Medical Center
660 Rockhill Rd
Kansas City, MO 64132-1197
Med Sch Affil: M-02846
Specialty: OSM
Institution ID: 28-0451

Children’s Mercy Hospital
2401 Gillham Rd
Kansas City, MO 64108-9608
Med Sch Affil: M-02846, G-00096
Specialty: AJ, CHN, NPM, NS, OPH, ORS, PD, PDE, PDR, PDS, PHO, PN, PS, PTH
Institution ID: 28-0426

Menorah Medical Center
4049 Rockhill Rd
Kansas City, MO 64110
Med Sch Affil: M-02846
Specialty: NEP, NS
Institution ID: 28-0855

St Luke’s Hospital
4400 Wornall Rd
Kansas City, MO 64111-8906
Med Sch Affil: M-02846
Specialty: AN, CD, DR, ID, IM, MPD, ORS, OSM, PCC, PS, PTH
Institution ID: 28-0337

Trinity Lutheran Hospital
3020 Baltimore
Kansas City, MO 64108
Med Sch Affil: M-02846
Specialty: HO
Institution ID: 28-0180

Truman Medical Center-East
7800 Lears Summit Rd
Kansas City, MO 64139
Med Sch Affil: M-02846
Specialty: FP, FPG, MPD
Institution ID: 28-8012

Truman Medical Center-West
2091 Holmes St
Kansas City, MO 64108-2340
Med Sch Affil: M-02846
Specialty: AN, CD, DR, EM, J, IM, N, NEP, NM, NPM, NR, NS, OBG, ON, ORS, OTO, P, PCC, PD, PM, PS, PTH, RHU, TS, U, VS
Institution ID: 28-0435

Veterans Affairs Medical Center (Kansas City)
4811 Linwood Blvd
Kansas City, MO 64128-2306
Med Sch Affil: M-01902
Specialty: GS, IM, M, NEP, NS, OPH, ORS, OTO, P, PM, PTH, TS, U
Institution ID: 28-0418

Western Missouri Mental Health Center
600 E 22nd St
Kansas City, MO 64108-2020
Med Sch Affil: M-02846
Specialty: P
Institution ID: 28-0453

Springfield
Cox Medical Center South
Lester E Cox Medical Center South
3861 S National
Springfield, MO 65807-3801
Specialty: PP
Institution ID: 28-8169

St Louis
Anheuser-Busch Eye Institute
3665 Vista Ave
St Louis, MO 63110
Med Sch Affil: G-02834
Specialty: OPH
Institution ID: 28-7025

Barnes Hospital
One Barnes Hospital Plaza
St Louis, MO 63110
Med Sch Affil: M-02802
Specialty: AI, HSP, IMG, VIR
Institution ID: 28-0410

Cardinal Glennon Children's Hospital
1465 S Grand Blvd
St Louis, MO 63104
Med Sch Affil: M-02834
Specialty: AI, AN, CHN, CHP, DR, GS, MM, MPD, NP, NPM, NS, OBG, OTO, PD, PDP, PDR, PDS, PG, PS, PTH, RHU, RNK, TS, U
Institution ID: 28-0444

Deaconess Hospital
6150 Oakland Ave
St Louis MO 63119-3207
Med Sch Affil: M-02834
Specialty: OBG, OTO
Institution ID: 28-0425

Jewish Hospital of St Louis
216 S Kings Hwy Blvd
St Louis, MO 63110
Med Sch Affil: M-02802
Specialty: DR, END, GS, OBG, OTO, P, PCC, PTH, RO, TS
Institution ID: 28-0414

Malcolm Blaisd Mental Health Center
5400 Arsenal St
St Louis, MO 63139
Med Sch Affil: M-02802
Specialty: P
Institution ID: 28-0414

Mallinckrodt Institute of Radiology
510 S Kingshighway
St Louis, MO 63110
Med Sch Affil: G-02802
Specialty: DR, NR, PDR, RMN, RO, VIR
Institution ID: 28-0421

Shriners Hospital for Crippled Children (St Louis)
2001 S Lindbergh Blvd
St Louis, MO 63131-3507
Specialty: ORS, OSM
Institution ID: 28-0164

St John's Mercy Medical Center
616 S New Ballas Rd
St Louis, MO 63141-0221
Med Sch Affil: M-02834, G-02803
Specialty: CCM, CCHS, CRB, GS, OTO, PCC, RCR, RNK, U, VS
Institution ID: 28-0231

St Louis Children's Hospital
One Children’s Pl
St Louis, MO 63110-1077
Med Sch Affil: M-02802
Specialty: AI, APM, CCP, CCHS, CHN, DR, NS, OP, ORS, OSS, OTO, PDP, PS, RO, SFS, TS, VIR
Institution ID: 28-0414

St Louis Regional Medical Center
5535 Delmar Blvd
St Louis, MO 63112-0112
Med Sch Affil: M-02802, L-02803
Specialty: CD, GS, IM, M, OBG, OSM, OTO, PS, SFS
Institution ID: 28-0250

St Louis University Hospital
3635 Vista Ave at Grand Blvd
PO Box 15250
St Louis, MO 63110-0250
Med Sch Affil: M-02834
Specialty: AI, ALI, AN, CCM, CCHS, CD, CHN, CRS, D, DR, END, GE, GS, H, ID, IM, IMG, MPD, N, NEP, NM, NP, NS, OBG, OTO, P, PCC, PDP, PS, PST, RHU, RNK, TS, U
Institution ID: 28-0107

St Luke’s Hospital
235 S Woods Blvd
St Louis, MO 63107
Med Sch Affil: M-02803, L-02802
Specialty: OBG
Institution ID: 28-0203

St Mary’s Health Center
600 Clayton Rd
St Louis, MO 63117
Med Sch Affil: M-02834
Specialty: GE, GS, MPD, OBG, ORS, PS, PST, U
Institution ID: 28-0442

Veterans Affairs Medical Center (St Louis)
90 Jefferson Barracks
St Louis, MO 63125-4189
Med Sch Affil: M-02834, M-02802
Specialty: AN, CD, DR, GE, GS, ID, IM, IMG, MM, MPD, N, NEP, NM, NP, OBG, OSM, ORS, OT, P, PST, TS, U
Institution ID: 28-0404

Washington University School of Medicine
660 S Euclid Ave
St Louis, MO 63110-1083
Med Sch Affil: M-02802
Specialty: DS
Institution ID: 28-0440
Nebraska

Grand Island
St Francis Medical Center
2620 W Paukney Ave
PO Box 9894
Grand Island, NE 68802
Med Sch Affil: G-02005
Specialty: FP
Institution ID: 30-7049

Kearney
Good Samaritan Hospital
31st St and Central Ave
PO Box 1990
Kearney, NE 68848
Med Sch Affil: G-05005
Specialty: FP
Institution ID: 30-7044

Lincoln
Bryan Memorial Hospital
1600 S 48th St
Lincoln, NE 68506
Med Sch Affil: L-03005
Specialty: FP
Institution ID: 30-8329

Lincoln General Hospital
2500 S 10th St
Lincoln, NE 68502-2739
Med Sch Affil: L-03005
Specialty: FP
Institution ID: 30-8332

St Elizabeth Community Health Center
555 S 78th St
Lincoln, NE 68520
Med Sch Affil: L-05005
Specialty: FP
Institution ID: 30-9178

Veterans Affairs Medical Center (Lincoln)
600 S 78th St
Lincoln, NE 68516-2109
Med Sch Affil: L-03005, G-03005
Specialty: GS, ORS
Institution ID: 30-9115

Offutt AFB
Ehrling Bergquist Hospital
2551 Capshart Rd
Offutt AFB, NE 68113
Med Sch Affil: M-03005, G-03005
Specialty: AI, FP
Institution ID: 30-9708

Omaha
AMI St Joseph Center for Mental Health
710 Dorrance
Omaha, NE 68108-1137
Med Sch Affil: M-03006
Specialty: CHE, P
Institution ID: 30-9712

AMI St Joseph Hospital at Creighton Univ Medical Center
601 N 30th St
Omaha, NE 68131
Med Sch Affil: M-03005, G-03005
Specialty: AI, CD, CRS, DR, FF, GS, ID, IM, N, OBG, ORS, PD, PTB, PUD
Institution ID: 30-9709

Archbishop Bergan Mercy Medical Center
7500 Mercy Blvd
Omaha, NE 68124
Med Sch Affil: M-03005
Specialty: OBG
Institution ID: 30-6452

Bishop Clarkson Memorial Hospital
44th St at Dewey Ave
Omaha, NE 68010-1018
Med Sch Affil: L-03005
Specialty: PTH
Institution ID: 30-6453

Boys Town National Research Hospital
555 N 30th St
Omaha, NE 68131
Specialty: MFD, OT0
Institution ID: 30-8005

Childrens Memorial Hospital
8301 Dodge St
Omaha, NE 68114-4114
Med Sch Affil: M-03005, M-03005
Specialty: MFS, NS, PD, PG, PHO
Institution ID: 30-8305

Creighton/Nebraska University Health Foundation
California at 24th St
Omaha, NE 68178
Med Sch Affil: M-03005
Specialty: END
Institution ID: 30-9582

Methodist Hospital
3023 Dodge St
Omaha, NE 68114
Med Sch Affil: M-03005
Specialty: FP, NS, U
Institution ID: 30-9394

University of Nebraska Medical Center
600 S 42nd St
Omaha, NE 68198-4266
Med Sch Affil: M-03005
Specialty: ID, P
Institution ID: 30-9715

Veterans Affairs Medical Center (Omaha)
4101 Woolworth Ave
Omaha, NE 68105-3012
Med Sch Affil: M-03005, M-03005
Specialty: CD, DR, GE, GS, HI, ID, IM, MDF, NM, OPH, ORS, OT0, P, PTB, PUD, U
Institution ID: 30-9447

Nevada

Reno
Ioannis A Lougaris Veterans Affairs Medical Center
1000 Locust St
Reno, NV 89509
Med Sch Affil: M-03010
Specialty: FP, GS, IM, P
Institution ID: 31-0110

Las Vegas
University Medical Center of Southern Nevada
1800 W Charleston Blvd
Las Vegas, NV 89102-2388
Med Sch Affil: M-03010
Specialty: P
Institution ID: 31-0100

Womens Hospital
2025 E Sahara Ave
Las Vegas, NV 89109
Specialty: OBG
Institution ID: 31-0112

New Hampshire

Concord
Concord Hospital
200 Pleasant St
Concord, NH 03301
Specialty: FP
Institution ID: 32-8002

New Hampshire Hospital
106 Pleasant St
Concord, NH 03301
Specialty: P
Institution ID: 32-3338

Lebanon
Dartmouth-Hitchcock Medical Center
Lebanon, NH 03766
Med Sch Affil: M-03001
Specialty: APH, OT0
Institution ID: 33-9312

Manchester
Veterans Affairs Medical Center (Manchester)
718 Smyth Rd
Manchester, NH 03104-4098
Med Sch Affil: L-03001, G-02001
Specialty: GS
Institution ID: 32-0772

New Jersey

Atlantic City
Atlantic City Medical Center
1925 Pacific Ave
Atlantic City, NJ 08401
Med Sch Affil: G-04109
Specialty: ORS, P
Institution ID: 33-0168
Browns Mills
Deborah Heart and Lung Center
500 Trenton Rd
Browns Mills, NJ 08015-1799
Med Sch Affil: L-04101, G-03306, G-03305
Specialty: CCM, CD, TS
Institution ID: 39-0613

Camden
Cooper Hospital-University Medical Center
One Cooper Plaza
Camden, NJ 08103-1489
Med Sch Affil: M-03306, L-04101, L-04107, G-04101
Specialty: PM
Institution ID: 39-0588

Our Lady of Lourdes Medical Center
1600 Haddon Ave
Camden, NJ 08105-1111
Med Sch Affil: G-04101
Specialty: IM
Institution ID: 39-0186

West Jersey Health System
1000 Atlantic Ave
Camden, NJ 08104
Med Sch Affil: G-04102
Specialty: OBG
Institution ID: 39-0719

East Orange
Dept of Veterans Affairs Medical Center (East Orange)
S Center St and Tremont Ave
East Orange, NJ 07019-1065
Med Sch Affil: M-03306
Specialty: AJ, CD, CIN, D, END, GE, GS, HEM, ID, IM, MDP, N, NER, ON, OPH, OBG, OTO, P, PM, PTH, RHH, TS, U, VS
Institution ID: 39-0187

Edison
JFK Medical Center
65 James St
Attn: Medical Staff Office
Edison, NJ 08818-9169
Med Sch Affil: G-03306
Specialty: CCM, MDF, PD
Institution ID: 39-0613

Elizabeth
Elizabeth General Medical Center
925 E Jersey St
Elizabeth, NJ 07201
Med Sch Affil: G-03306
Specialty: CCM, MDF, PD
Institution ID: 39-0445

St Elizabeth Hospital
225 Williamstown St
Elizabeth, NJ 07207-0696
Specialty: IM
Institution ID: 39-0417

Englewood
Englewood Hospital
350 Eagle St
Englewood, NJ 07631
Med Sch Affil: L-04101, L-04547
Specialty: CCM, CD, MFB, OBG, PCC
Institution ID: 39-0583

Hackensack
Hackensack Medical Center
20 Prospect Ave
Hackensack, NJ 07601
Med Sch Affil: M-03306
Specialty: GS, OBG, OTO, P, PM, PTH
Institution ID: 39-0219

Jersey City
Jersey City Medical Center
50 Baldwin Ave
Jersey City, NJ 07304-3189
Med Sch Affil: G-03305
Specialty: OPH, OBG
Institution ID: 39-0416

Livingston
St Barnabas Medical Center
94 Old Short Hills Rd
Livingston, NJ 07039-5672
Med Sch Affil: M-03306
Specialty: NER, OTO, P, PTH
Institution ID: 39-0416

Lyons
Veterans Affairs Medical Center (Lyons)
Valley Rd
Lyons, NJ 07943-0988
Med Sch Affil: M-03306, G-03306
Specialty: VPG, GE, P
Institution ID: 39-0132

Morristown
Morristown Memorial Hospital
100 Madison Ave
PO Box 1056
Morristown, NJ 07962-1056
Med Sch Affil: M-03306, L-03306
Specialty: OBG, OM
Institution ID: 39-0236

Neptune
Jersey Shore Medical Center
1845 Cortez Ave
Bay 33
Neptune, NJ 07754-0397
Med Sch Affil: M-03306
Specialty: GS
Institution ID: 39-0220

New Brunswick
Robert Wood Johnson University Hospital
One Robert Wood Johnson Pl
PO Box 2001
New Brunswick, NJ 08903-2001
Med Sch Affil: M-03306
Specialty: AN, AP, CCM, CD, CHP, OE, END, GE, GS, HEM, ID, IM, MDP, N, NER, OBG, OTO, P, PM, PTH, RHH, TS, U, VS
Institution ID: 39-0141

St Peter's Medical Center
233 Easton Ave
New Brunswick, NJ 08901-0691
Med Sch Affil: M-03306
Specialty: DR, END, GE, GS, HEM, ID, NEP, NER, OBG, OTO, P, PM, PTH
Institution ID: 39-0107

Newark
Children's Hospital of New Jersey
18th St
Newark, NJ 07107-2147
Specialty: AI, CCP, CIN, DR, MDP, PD, PTH, RHH, TS
Institution ID: 39-0176

Newark Beth Israel Medical Center
201 Lyons Ave
Newark, NJ 07112
Med Sch Affil: M-03306
Specialty: CCM, CD, GE, GS, HEM, ID, IM, MGP, NER, ON, PCC, PD, PTH
Institution ID: 39-0424

Newark Eye and Ear Infirmary (United Hospitals Med Ctr)
15 S 9th St
Newark, NJ 07107
Specialty: OPH, OTO
Institution ID: 39-0421

Orthopedic Center (United Hospitals Medical Center)
96 Park Ave
Newark, NJ 07104
Specialty: OBG
Institution ID: 39-0127

St James Hospital of Newark (Cathedral Health Services Inc)
156 Jefferson St
Newark, NJ 07105-1791
Specialty: OBG
Institution ID: 39-0753

St Michael's Medical Center (Cathedral Health Services Inc)
University Heights
2683 Martin Luther King Jr Blvd
Newark, NJ 07102
Med Sch Affil: L-04202, G-03306
Specialty: CCM, HEM, ID, IM, MDP, ON, RHH, TS, PTH
Institution ID: 39-0199

UMDNJ-Community Mental Health Center of Newark
215 S Orange Ave
Newark, NJ 07113-2770
Med Sch Affil: M-03305
Specialty: CHP
Institution ID: 39-0415

UMDNJ-University Hospital
Graduate Medical Education Office
185 S Orange Ave B100
Newark, NJ 07103-2174
Med Sch Affil: M-03306
Specialty: AI, AN, AP, CCM, CD, CIN, CHP, DR, END, GE, GS, HEM, ID, IM, MGP, N, NER, OBG, ON, OTO, P, PM, PTH, RHH, TS, U, VS
Institution ID: 39-0274

Orange
Hospital Center at Orange
188 South Orange Ave
Orange, NJ 07010-0901
Med Sch Affil: M-03305
Specialty: OBG
Institution ID: 39-0128

Paterson
St Joseph's Hospital and Medical Center
700 Main St
Paterson, NJ 07503-2641
Med Sch Affil: L-03306, L-04306
Specialty: CD, GE, GS, HEM, ID, IM, ON, PUD, RHH
Institution ID: 39-0519
Perth Amboy
Raritan Bay Medical Center-Perth Amboy Division
630 New Brunswick Ave
Perth Amboy, NJ 08861-3686
Med Sch Affl: M-03306
Specialty: OB/GYN
Institution ID: 83-0144

Piscataway
UMDNJ-Community Mental Health Center at Piscataway
671 Hoos Ln
Piscataway, NJ 08854
Med Sch Affl: M-03306
Specialty: GS
Institution ID: 83-0717

UMDNJ-Robert Wood Johnson Medical School
675 Hoos Ln
Piscataway, NJ 08854-5635
Med Sch Affl: M-03306, L-02112
Specialty: GS
Institution ID: 83-0532

Plainfield
Muhlenberg Regional Medical Center
Park Ave and Randolph Rd
Plainfield, NJ 07061-3389
Med Sch Affl: M-03306
Specialty: OB/GYN
Institution ID: 83-0137

Princeton
Medical Center at Princeton
253 Wipperoon Dr
Princeton, NJ 08540-3213
Med Sch Affl: M-03306
Specialty: GS, OB/GYN
Institution ID: 83-0142

Summit
Overlook Hospital
59 Beaumont Ave
PO Box 330
Summit, NJ 07901-0220
Med Sch Affl: M-03501, G-03005
Specialty: GS, OBGYN
Institution ID: 83-0240

Teaneck
Holy Name Hospital
713 Teaneck Rd
Teaneck, NJ 07666
Specialty: TV
Institution ID: 83-0566

Trenton
Greater Trenton Community Mental Health Center
PO Box 1365
Trenton, NJ 08697
Specialty: P
Institution ID: 83-8016

West Orange
Kessler Institute for Rehabilitation
1189 Pleasant Valley Way
West Orange, NJ 07084-2499
Med Sch Affl: M-03005
Specialty: PM
Institution ID: 83-0726

Woodbury
Underwood-Memorial Hospital
580 N Broad St
Woodbury, NJ 08096
Med Sch Affl: L-04102
Specialty: GS
Institution ID: 83-7079

New Mexico
Albuquerque
Carrie Tingley Hospital
1177 University Blvd NE
Albuquerque, NM 87102-1716
Med Sch Affl: G-03041
Specialty: OB/GYN
Institution ID: 84-0000

Loveland Medical Center
5400 Gibson Blvd SE
Albuquerque, NM 87108
Med Sch Affl: L-03401
Specialty: OB/GYN
Institution ID: 84-0196

Office of the Medical Investigator
University of New Mexico Health Sciences Center
Albuquerque, NM 87131-5601
Med Sch Affl: G-03041
Specialty: OB/GYN
Institution ID: 84-0508

Univ of New Mexico Children's Psychiatric Hospital
1001 Yale Blvd NE
Albuquerque, NM 87131
Med Sch Affl: M-03401
Specialty: OB/GYN
Institution ID: 84-0512

University Hospital
2211 Lomas Blvd NE
Albuquerque, NM 87106-2545
Med Sch Affl: M-03041
Specialty: OB/GYN
Institution ID: 84-0511

Veterans Affairs Medical Center: (Albuquerque)
2100 Ridgecrest Dr SE
Albuquerque, NM 87108
Med Sch Affl: M-03401
Specialty: OB/GYN
Institution ID: 84-0512

New York
Albany
Capital District Psychiatric Center
75 New Scotland Ave
Albany, NY 12206-3474
Med Sch Affl: M-03503
Specialty: OB/GYN
Institution ID: 83-0815

Child's Hospital
25 Hackett Blvd
Albany, NY 12203-5499
Med Sch Affl: G-03503
Specialty: OB/GYN
Institution ID: 35-0515

St Peter's Hospital
315 S Manning Blvd
Albany, NY 12208
Med Sch Affl: M-03503
Specialty: OB/GYN
Institution ID: 83-0513

University of Albany School of Public Health
Executive Park S
Stuyvesant Place
Albany, NY 12203-3727
Specialty: MPH
Institution ID: 83-0606

Veterans Affairs Medical Center (Albany)
113 Holland Ave
Albany, NY 12208
Med Sch Affl: M-03503
Specialty: OB/GYN
Institution ID: 83-0606

Bay Shore
Southside Hospital
Montauk Hwy
Bay Shore, NY 11706
Med Sch Affl: L-03548
Specialty: OB/GYN
Institution ID: 83-5656

Beacon
Fishkill Correctional Facility-NY State Dept of Correction
PO Box 307
Beacon, NY 12508
Specialty: OB/GYN
Institution ID: 83-0624

Bronx
Albert Einstein College of Medicine of Yeshiva University
Jack and Pearl Besnick Campus
1300 Morris Park Ave
Bronx, NY 10461
Med Sch Affl: M-03546
Specialty: OB/GYN
Institution ID: 83-0745

Bronx Children's Psychiatric Center
1000 Waters Pl
Bronx, NY 10461
Specialty: OB/GYN
Institution ID: 83-0839
New York

Brooklyn Municipal Hospital Center
Pelham Pkwy & Eastchester Rd
Bronx, NY 10461
Med Sch Affil: M-03546
Specialty: An, AN, CC, CD, CHN, CHP, CPP, D, DR, EM, END, GE, GS, HEM, ID, IM, N, NEP, NM, NPM, NS, ORG, ON, ORL, ORS, OTO, P, PD, PDE, PM, PMF, PN, PS, PTH, PUD, RH, TS, U
Institution ID: 35-0179

Brooklyn Psychiatric Center
1500 Watson Pl
Bronx, NY 10461
Med Sch Affil: M-03546
Specialty: P
Institution ID: 35-0642

Lincoln Medical and Mental Health Center
234 E 146th St
Bronx, NY 10451
Med Sch Affil: M-03546
Specialty: An, CCS, D, DR, GE, GS, HEM, ID, N, NEP, NPM, OPH, OTO, PCC, PG, PM, PTH, U
Institution ID: 35-0437

Montefiore Medical Center-Henry and Lucy Moses Division
111 E 210th St
Bronx, NY 10467-5901
Med Sch Affil: M-03546
Specialty: An, AN, CA, CCM, CCP, CD, CHN, CHP, D, END, FF, GE, GS, HEM, CD, IM, IMG, N, NEP, NPM, NS, ON, OPH, ORL, ORS, OTO, PCP, PDR, PDE, PM, PS, PTH, PUD, BNU, RO, TS, U, V, VR, VS
Institution ID: 35-0526

Montefiore Medical Center-Weiler Hospital
1925 Eastchester Rd
Bronx, NY 10461-2273
Med Sch Affil: M-03546
Specialty: An, AN, CD, CHN, D, DB, END, GE, GS, IM, MS, NP, NPM, OPH, ON, ORL, ORS, OTO, PCC, PDE, PM, PN, PS, PTH, RO, TS, U
Institution ID: 35-0543

North Central Bronx Hospital
3424 Kosuce Ave
Bronx, NY 10467
Med Sch Affil: M-03546
Specialty: T, EN, PD, PP, GS, IM, NPM, OBG, OPH, ORS, PDE, PM, PS, PTH, U
Institution ID: 35-0784

Our Lady of Mercy Medical Center
600 E 223rd St
Bronx, NY 10466-3897
Med Sch Affil: M-03550
Specialty: EM, HEM, OPH, PD, U
Institution ID: 35-0401

Veterans Affairs Medical Center (Bronx)
130 W Kingsbridge Rd
Bronx, NY 10468
Med Sch Affil: M-03547
Specialty: D, DR, END, HO, IM, NEP, NM, OPH, OTO, PCC, PM, PS, PTH, U
Institution ID: 35-0247

Brooklyn

Brookdale Hospital Medical Center
Linden Blvd at Brookdale Plaza
Brooklyn, NY 11212-3188
Med Sch Affil: M-03508
Specialty: CD, GE, ORS, PDC, PDE
Institution ID: 35-0307

Brooklyn Hospital Center
121 DeKalb Ave
Brooklyn, NY 11201
Specialty: OPH
Institution ID: 35-0202

Catholic Medical Center (St Mary's Hospital)
170 Buffalo Ave
Brooklyn, NY 11231-2421
Specialty: GS, OBG, ORS
Institution ID: 35-0395

Coney Island Hospital
2601 Ocean Pkwy
Brooklyn, NY 11235
Med Sch Affil: L-03508
Specialty: AN, END, GS, OBG, OPH, ORS, OTO, P, PD, PDE, PDE, PFD, PFD, PHS, PHO, PS, PTH, PUD, RHU, TS, U
Institution ID: 35-0469

Kings County Hospital Center
451 Clarkson Ave
Brooklyn, NY 11203-2987
Med Sch Affil: M-03508
Specialty: AL, AN, APM, CCA, CCM, CD, CHN, CHP, D, EN, FF, GE, GS, HEM, CD, IM, IMG, N, NEP, NPM, NS, OBG, OPH, ORS, OTO, P, PD, PDE, PDE, PFD, PFD, PHS, PHO, PS, PTH, PUD, RHU, TS, U
Institution ID: 35-0439

Long Island College Hospital
340 Remsen St
Brooklyn, NY 11201
Med Sch Affil: M-03508
Specialty: APM, CCA, GS, NPM, OPH, ORS, OTO, RO, U
Institution ID: 35-0482

Lutheran Medical Center
150 55th St
Brooklyn, NY 11230-3574
Med Sch Affil: M-03508
Specialty: GS, FTH, RO
Institution ID: 35-0449

Maimonides Medical Center
1402 Thither Ave
Brooklyn, NY 11219-6988
Med Sch Affil: M-03508
Specialty: OPH, PS, TS
Institution ID: 35-0406

New York Methodist Hospital
506 Sixth St
PO Box 159068
Brooklyn, NY 11215-9068
Med Sch Affil: M-03500, D-03508
Specialty: GE, PTH
Institution ID: 35-0267

SUNY HSC at Brooklyn College of Medicine
450 Clarkson Ave Box 87
Brooklyn, NY 11203
Specialty: U
Institution ID: 35-0602

University Hospital-SUNY Health Science Center at Brooklyn
455 Lexington Rd
PO Box 23
Brooklyn, NY 11203-2998
Med Sch Affil: M-03508
Specialty: AN, AN, APM, CCA, CCM, CD, CHN, CHP, D, DR, END, FF, GE, GS, HEM, ID, IM, N, NEP, NP, NPM, NS, ORG, OPH, ORS, OTO, P, PD, PDE, PDE, PFD, PFD, PHS, PHO, PM, PN, PS, PTH, PUD, RHU, TS, U
Institution ID: 35-0041

Veterans Affairs Medical Center (Brooklyn)
Office of Education (141)
Brooklyn VA Medical Center
800 Polk Pl
Brooklyn, NY 11209
Med Sch Affil: M-03506
Specialty: CCM, CD, D, EN, GE, GS, HEM, ID, IM, MFD, NEP, OPH, ORS, OTO, PS, PUD, RHU, TS, U
Institution ID: 35-0384

Woodhull Medical and Mental Health Center
270 Broadway Box BBU 360
Brooklyn, NY 11206-5963
Specialty: CG, DR, HEM, ON, PD, PUD
Institution ID: 35-0825

Wynfield Heights Medical Center
374 Steckholm St
Brooklyn, NY 11207
Med Sch Affil: L-03546
Specialty: P, PTH
Institution ID: 35-0412

Buffalo

Buffalo General Hospital
100 High St
Buffalo, NY 14203
Med Sch Affil: M-03506
Specialty: AI, AN, APM, CCA, CD, ORS, D, DR, EM, FP, GE, GPM, GS, HEM, IM, MS, MFD, MPM, N, NM, NP, NPM, ORS, OBG, OPH, ORS, OTO, PCC, PM, PTH, RO, TS, U, VS
Institution ID: 35-0482

Children's Hospital of Buffalo
210 Bryant St
Buffalo, NY 14222-2090
Med Sch Affil: M-03500
Specialty: AI, AN, CCA, CCP, CHN, CHP, N, NPM, NS, ORG, OPH, ORS, PDE, PS, PDE, PS, PHO, PN, TS, U
Institution ID: 35-0223

Dent Neurological Institutes of Millard Fillmore Hospital
3 Gates Circle
Buffalo, NY 14203
Specialty: N
Institution ID: 35-8082

Erie County Medical Center
463 Grider St
Buffalo, NY 14215
Med Sch Affil: M-03506
Specialty: AN, APM, CCA, CD, CHN, D, DR, EM, END, FF, GE, GS, HEM, HSO, ID, IM, MFD, MPM, N, NS, ORG, OPH, OTO, P, PCC, PM, PTH, RBU
Institution ID: 35-0143

Merry Hospital of Buffalo
265 Abbott Rd
Buffalo, NY 14220-1324
Med Sch Affil: L-03506
Specialty: IM, NM
Institution ID: 35-0125

Millard Fillmore Hospitals
3 Gates Circle
Buffalo, NY 14209-1120
Med Sch Affil: M-03506
Specialty: AN, CCA, CD, CHN, D, DR, EM, EN, FF, GE, GS, HEM, HSO, ID, IM, MFD, MPM, N, NS, ORG, OPH, OTO, PS, PCC, PM, PTH, RBU
Institution ID: 35-0393

Roswell Park Cancer Institute
Attn: Arthur Michalek MD
Educational Affairs Dept
Elm and Carlton Sts
Buffalo, NY 14263-3001
Med Sch Affil: M-03506
Specialty: AN, APM, CCA, CE, NM, ON, PHO, PTH, RO, TS
Institution ID: 35-0451
New York

Sisters of Charity Hospital
2157 Main St
Buffalo, NY 14214-9884
Med Sch Aff: M-03506
Specialty: IM, OB/G, OT
Institution ID: 35-0167

SUNY at Buffalo School of Medicine
345 Main St
Buffalo, NY 14214
Med Sch Aff: M-03506
Specialty: CHP
Institution ID: 35-0828

Veterans Affairs Medical Center (Buffalo)
3466 Bailey ave
Buffalo, NY 14215
Med Sch Aff: M-03506
Specialty: AN, CCA, CD, CHN, D, END, GE, GS, HEM, ID, IM, IMG, MDP, MPM, N, NEP, NM, NPS, ON, OPH, OHS, P, PCC, PM, PTH, HNU, RO, TS, U, VS
Institution ID: 35-0496

Canandaigua
Frederick Ferris Thompson Systems
350 Parrish St
Canandaigua, NY 14424
Specialty: FP
Institution ID: 35-7042

Castle Point
Veterans Affairs Medical Center (Castle Point)
Ronald F. Lipp (09)
Castle Point, NY 12511-9999
Specialty: GS
Institution ID: 35-0561

Cuba
Cuba Memorial Hospital
140 W Main St
Cuba, NY 14727-1368
Specialty: FP
Institution ID: 35-9940

East Meadow
Nassau County Medical Center
Attn: David Weirong, MD
Academic Affairs
2201 Hempstead Tpke
East Meadow, NY 11554-6400
Med Sch Aff: M-03549
Specialty: END, OHS, PDS, RHU
Institution ID: 35-0162

Elmhurst
Catholic Medical Center (St John's Queens Hospital)
90-02 Queens Blvd
Elmhurst, NY 11437-4941
Med Sch Aff: CD, GE, ID, IM, OB/G, OHS, PUD
Institution ID: 35-0172

Elmhurst Hospital Center-Mount Sinai
79-01 Broadway
Elmhurst, NY 11373
Med Sch Aff: M-03547
Specialty: AN, CCA, CCM, D, DR, EM, END, GE, GS, HO, ID, IM, MDP, NEP, NPM, NS, OB/G, OPH, OHS, OT, OTO, PCC, PM, PS, PTH, U
Institution ID: 35-0271

Flushing
Flushing Hospital Medical Center
45th Ave and Parsons Blvd
Flushing, NY 11355
Med Sch Aff: M-03546
Specialty: PTH
Institution ID: 35-0264

New York Hospital Medical Center of Queens
56-46 Main St
Flushing, NY 11355-5055
Med Sch Aff: M-03519
Specialty: OBG
Institution ID: 35-0349

Forest Hills
LaGuardia Hospital
102-01 66th Rd
Forest Hills, NY 11375-2029
Med Sch Aff: M-03520
Specialty: GS, U
Institution ID: 35-0658

Glen Oaks
Hillside Hospital (Long Island Jewish Medical Center)
75-58 263rd St
Glen Oaks, NY 11004
Specialty: P
Institution ID: 35-0299

Harrison
St Vincent's Hospital of New York-Westchester Branch
275 North St
Harrison, NY 10528
Med Sch Aff: M-03509
Specialty: P
Institution ID: 35-0490

Hauppauge
Suffolk County Department of Health Services
255 Indian Dr E
Hauppauge, NY 11788
Med Sch Aff: M-03548
Specialty: MPH, NP
Institution ID: 35-8621

Hawthorne
Westchester County Department of Health
10 Broadhurst Ave
Hawthorne, NY 10532
Specialty: GM
Institution ID: 35-8044

Jamaica
Catholic Medical Center (Mary Immaculate Hospital)
132-11 89th Ave
Jamaica, NY 11432-3868
Specialty: CD, FP, GE, GS, ID, IM, OB/G, OPH, OHS, PUD
Institution ID: 35-6472

Jamaica Hospital
5000 Var Wyck Expwy
Jamaica, NY 11418-2097
Med Sch Aff: M-03508, G-03520
Specialty: GS, OHS, PM
Institution ID: 35-6216

Queens Hospital Center
82-68 61st Ave
Jamaica, NY 11432-1294
Med Sch Aff: M-03547
Specialty: CCM, CD, CHN, DS, END, GE, GS, OPH, OT, PCC, PTH, RHU
Institution ID: 35-0230

Kingston
Benedictine Hospital
105 Mary's Ave
Kingston, NY 12401-5864
Med Sch Aff: M-03506
Specialty: FP
Institution ID: 35-0350

Manhasset
North Shore University Hospital
300 Community Dr
Manhasset, NY 11030-3876
Med Sch Aff: M-03520, M-03519, L-03512
Specialty: AI, ALI, GE, PS
Institution ID: 35-0447

Mineaio
Nassau County Department of Health
240 Old Country Rd
Mineola, NY 11501-4260
Specialty: MPH
Institution ID: 35-8263

Winthrop-University Hospital
Winthrop-University Hospital
250 First St
Mineola, NY 11501-3667
Med Sch Aff: M-03548
Specialty: CD, GE, GS, PS, U
Institution ID: 35-0375

Montrose
Franklin D Roosevelt Veterans Affairs Hospital
PO Box 10c
Montrose, NY 10548
Med Sch Aff: L-03500
Specialty: BHU
Institution ID: 35-0251

Mount Vernon
Mount Vernon Hospital
127 7th Ave
Mount Vernon, NY 10550-2996
Med Sch Aff: L-03509
Specialty: GPM
Institution ID: 35-0255

New Hyde Park
Schneider Children's Hosp (Long Island Jewish Med Ctr)
270-06 77th Ave
New Hyde Park, NY 11040
Med Sch Aff: M-03546
Specialty: AI, IPP, CHN, CHP, DR, NPM, OHS, PUD, PDS, PDE, PS, PTH
Institution ID: 35-8024

New Rochelle
New Rochelle Hospital Medical Center
16 Guion Pl
New Rochelle, NY 10802-5500
Med Sch Aff: M-03509
Specialty: AN
Institution ID: 35-0104

Graduate Medical Education Directory
New York

Bellevue Hospital Center
27th St and 1st Ave
New York, NY 10031

Med Soc Affil: M-03518, L-0212
Specialties: AN, CCA, CD, CHN, HSP, ID, IM, IMG, N, NEP, NF, NPF, NR, NS, OB, ON, OP, ORG, ORS, OS, OTH, OTO, P, PCC, PDC, PDR, PFR, PHO, PM, PS, PTH, RDR, RNU, RNR, RO, RS, U, VS
Institution ID: 35-0235

Beth Israel Medical Center
Beth Israel Medical Center
First Ave at 16th St
New York, NY 10003

Med Soc Affil: M-00509, G-03519
Specialties: END, OPH, U
Institution ID: 35-0410

Cabrini Medical Center
227 E 18th St
New York, NY 10003

Med Soc Affil: M-00509, M-03546
Specialties: DM, OPH, ORS, PM, PM, RU
Institution ID: 35-0294

Columbia University School of Public Health
600 W 166th St
New York, NY 10032

Med Soc Affil: G-03501
Specialties: MPH, PH
Institution ID: 35-0766

Cornell University Medical College
1300 York Ave
New York, NY 10021

Med Soc Affil: M-00509
Specialties: PTH
Institution ID: 35-0791

Goldwater Memorial Hospital
F D Roosevelt Island
New York, NY 10044

Med Soc Affil: G-03519
Specialties: FM
Institution ID: 35-0122

Harlem Hospital Center
500 Lenox Ave
New York, NY 10037-1003

Med Soc Affil: M-00501
Specialties: ORS, HO
Institution ID: 35-0195

Hospital for Joint Diseases Orthopedic Institute
Hospital for Joint Diseases
Bernard J Brown Center
101 17th St
New York, NY 10003

Med Soc Affil: M-00519
Specialties: DR, IMG, OSM, PM, RU
Institution ID: 35-0285

Hospital for Special Surgery
555 E 70th St
New York, NY 10021-1000

Med Soc Affil: M-00520
Specialties: DR, NS, OMG
Institution ID: 35-0459

The Institute for Urban Family Health
16 E 16th St
New York, NY 10003

Speciality: FP
Institution ID: 35-0485

Manhattan Eye Ear and Throat Hospital
210 E 64th St
New York, NY 10021

Med Soc Affil: L-03501, G-03519
Specialty: OT
Institution ID: 35-0967

Manhattan Psychiatric Center
600 E 126th St
Ward's Island
New York, NY 10036

Med Soc Affil: L-03510
Specialty: P
Institution ID: 35-0290

Memorial Sloan-Kettering Cancer Center
1275 York Ave
New York, NY 10021

Med Soc Affil: L-03500, L-03508, L-0232/2, G-03519
Specialties: AN, BBK, DRM, DR, GS, IN, N, NS, ON, OTO, PM, PS, RNR, RS, U, VBR
Institution ID: 35-0125

Metropolitan Hospital Center
1801 First Ave
New York, NY 10028

Med Soc Affil: M-03509
Specialties: AN, CCA, D, DR, GE, GS, HEM, ID, N, NPF, OBG, OPH, PCC, PM, U
Institution ID: 35-0183

Mount Sinai Medical Center
1 Gustave L Levy Pk
New York, NY 10029-0774

Med Soc Affil: M-03507
Specialty: AI
Institution ID: 35-0183

Mount Sinai Hospital Center
722 W 168th St
New York, NY 10032

Med Soc Affil: M-03501
Specialty: CCM
Institution ID: 35-0383

New York University Medical Center
550 First Ave
New York, NY 10016-1111

Med Soc Affil: M-03519, L-04109, L-02312
Specialty: BBK
Institution ID: 35-0450

North General Hospital
1378 Madison Ave
New York, NY 10029-0035

Med Soc Affil: L-03547
Specialty: ORS
Institution ID: 35-0008

Presbyterian Hospital in the City of New York
The Presbyterian Hospital
New York, NY 10023-3784

Med Soc Affil: M-03501
Specialty: BBK, DR, OPH
Institution ID: 35-0209

Rockefeller University Hospital
1230 York Ave
New York, NY 10021

Med Soc Affil: DMP
Institution ID: 35-0725

The Rogosin Institute
505 E 70th St
New York, NY 10021

Med Soc Affil: END
Institution ID: 35-0943

Rusk Institute of Rehabilitation Medicine
400 43rd St K R615
New York, NY 10016-1111

Med Soc Affil: PM
Institution ID: 35-0145

St Luke's-Roosevelt Hospital Center
1111 Amsterdam Ave
New York, NY 10025

Med Soc Affil: M-00501
Specialties: BBK, CD, NS, HSO
Institution ID: 35-0913

St Luke's-Roosevelt Hospital Center-Roosevelt Division
438 W 59th St
New York, NY 10019

Med Soc Affil: M-00501
Specialties: AI, CHP, CCR, DR, DR, GS, HEM, HSO, IM
Institution ID: 35-0125

St Luke's-Roosevelt Hospital Center-St Luke's Division
1111 Amsterdam Ave
New York, NY 10025

Med Soc Affil: M-00501, L-02312
Specialties: AN, CD, CHF, DR, DR, EM, END, GE, GS, HEM, ID, IM, IMG, NM, NR, OBG, ON, OPH, ORS, OTO, P, PCC, PDR, PFR, PFR, PFR, PFR, PHO, PM, PS, PTH, PUD, RU, RNR, RNS, RO, RS, U, VS
Institution ID: 35-0183

St Vincent's Hospital and Medical Center of New York
651 W 11th St
New York, NY 10011-3897

Med Soc Affil: M-03508, L-03508, G-03519
Specialties: BBK, CD, NS, OT
Institution ID: 35-0241

Veterans Affairs Medical Center (Manhattan)
423 E 22nd St
New York, NY 10010

Med Soc Affil: M-03518
Specialties: AN, CD, CHF, DR, DR, EM, END, GE, GS, HEM, ID, IM, IMG, NM, NR, OBG, ON, OPH, ORS, OTO, P, PCC, PM, PM, PTH, RDR, RU, RNU, RNR, RO, RS, U, VS
Institution ID: 35-0392

Northport

Veterans Affairs Medical Center (Northport)
Middleville Rd
Northport, NY 11768

Med Soc Affil: M-00548
Specialties: AL, AM, CCM, CD, D, DR, END, GE, GS, HO, ID, IM, IMG, NM, N, NEP, NF, ORS, OTO, P, PCC, PM, PS, PTH, RDR, RU, RNU, RNR, RO, RS, U, VS
Institution ID: 35-0441
Oceanside
South Nassau Communities Hospital
1445 Oceanside Rd
Oceanside, NY 11572
MedSchAffl L-003548
Specialty: NM
Institution ID: 35-02177

Olean
Olean General Hospital
515 Main St
Olean, NY 14760
Specialty: FP
Institution ID: 38-7213

Orangeburg
Rockland Children's Psychiatric Center
Convent Rd
Orangeburg, NY 10962
Specialty: CHP
Institution ID: 35-0042

Poughkeepsie
Vassar Brothers Hospital
Knaus Pk
Poughkeepsie, NY 12601
Specialty: FF
Institution ID: 35-0040

Rochester
Genesee Hospital
224 Alexander St
Rochester, NY 14607-4955
MedSchAffl M-00545
Specialty: CCA, CCM, CCS, GE, GS, IM, MPD, OB, OB/GYN, OT, FS, U
Institution ID: 35-00497

Highland Hospital of Rochester
1000 South Ave
Rochester, NY 14620-0986
MedSchAffl M-00545
Specialty: IM, OB/GYN, OB/GYN
Institution ID: 35-00497

Monroe Community Hospital
455 E Henrietta Rd
Rochester, NY 14620-4685
MedSchAffl M-00545
Specialty: AP, PM, HHU
Institution ID: 35-00497

Rochester General Hospital
1425 Portland Ave
Rochester, NY 14621-3066
MedSchAffl M-00545
Specialty: CCA, CCS, FF, GS, HEM, IM, IMG, MPD, ON, OP, OR, OT, VS
Institution ID: 35-00497

Rochester Psychiatric Center
1600 South Ave
Rochester, NY 14620
MedSchAffl L-003545
Specialty: CHP
Institution ID: 35-00497

St Mary’s Hospital
70 Genesee St
Rochester, NY 14611-3981
MedSchAffl M-00545
Specialty: GE, OP, PM
Institution ID: 35-00497

Strong Memorial Hospital of the University of Rochester
601 Elmwood Ave
Rochester, NY 14642
MedSchAffl M-00545
Specialty: FP
Institution ID: 35-00497

Rockville Centre
Mercy Medical Center
1000 N Village Ave
Rockville Centre, NY 11570
Specialty: OB/GYN
Institution ID: 35-0212

Schenectady
Ellis Hospital
1010 Nott St
Schenectady, NY 12308
MedSchAffl M-00545
Specialty: MPD, OB/GYN
Institution ID: 35-00474

Sunnyview Hospital and Rehabilitation Center
1290 Belmont Ave
Schenectady, NY 12308
MedSchAffl G-00545
Specialty: PM
Institution ID: 35-0042

Staten Island
Bayley Seton Hospital
15 Vanderbilt Ave
Staten Island, NY 10304-9500
MedSchAffl M-00545
Specialty: D, OP, PM
Institution ID: 35-00413

St Vincent’s Medical Center of Richmond
355 Bard Ave
Staten Island, NY 10310-1989
MedSchAffl M-00545, G-00546
Specialty: GS, HEM, NEP
Institution ID: 35-00458

Staten Island University Hospital
475 Seaview Ave
Staten Island, NY 10305
Specialty: GE
Institution ID: 35-00415

Stony Brook
University Hospital-SUNY at Stony Brook
Health Science Center: 5th Floor
Stony Brook, NY 11794-4410
MedSchAffl M-00545
Specialty: NM
Institution ID: 35-00560

Syosset
Syosset Community Hospital
221 Jericho Turnpike
Syosset, NY 11791
Specialty: OB/GYN
Institution ID: 35-0046

Syracuse
American Red Cross Blood Services-Greater Upstate NY Region
686 S Warren St
Syracuse, NY 13202-3368
MedSchAffl L-00515
Specialty: BBK
Institution ID: 35-0025

Community-General Hospital of Greater Syracuse
Broad Rd
Syracuse, NY 13215
MedSchAffl M-00515
Specialty: GSPH
Institution ID: 35-0054

Crouse-Irving Memorial Hospital
736 Irving Ave
Syracuse, NY 13210
MedSchAffl M-00515
Specialty: AN, BBK, CCM, CD, GS, HEM, ID, IM, N, NPM, NS, OB/GYN, OB/GYN, OB/GYN, OT, FSU, U
Institution ID: 35-0045

Richard H. Hughes Psychiatric Center
Box 27, University Station
Syracuse, NY 13210
MedSchAffl M-00515
Specialty: PM
Institution ID: 35-0045

St Camillus Health and Rehabilitation Center
813 Fay Rd
Syracuse, NY 13218-3308
Specialty: PM
Institution ID: 35-0045

St Joseph’s Hospital Health Center
361 Prospect Ave
Syracuse, NY 13203-1907
MedSchAffl M-00515
Specialty: EM
Institution ID: 35-00445

Veterans Affairs Medical Center (Syracuse)
860 Irving Ave
Syracuse, NY 13210
MedSchAffl M-00515
Specialty: AN, CD, DR, END, GE, GS, HEM, ID, IM, N, NEP, NS, OP, OR, OB/GYN, OT, FSU, U
Institution ID: 35-00183

Valhalla
Westchester County Medical Center
Valhalla Campus
Valhalla, NY 10595-1559
MedSchAffl M-00515
Specialty: AN, AP, PM, HHU
Institution ID: 35-00515

Syosset Community Hospital
221 Jericho Turnpike
Syosset, NY 11791
Specialty: OB/GYN
Institution ID: 35-0046

West Haverstraw
Helen Hayes Hospital
975 SW
West Haverstraw, NY 10993-1196
MedSchAffl G-00515
Specialty: OB/GYN
Institution ID: 35-0040

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Graduate Medical Education Directory
New York

**West Seneca**

**Western New York Children's Psychiatric Center**
1010 East and West Rd
West Seneca, NY 14224
S: CMH
Institution ID: 35-0095

**North Carolina**

**Ahoskie**

**Roanoke-Chowan Hospital**
500 S Academy St
PO Box 1385
Ahoskie, NC 27910
S: PP
Institution ID: 36-8013

**Asheville**

**Memorial Mission Hospital**
501 Biltmore Ave
Asheville, NC 28801
M: 1-800-358-0892
Institution ID: 36-0740

**Butner**

**John Umstead Hospital**
1001 St. John's Rd
Butner, NC 27509-1826
M: 1-800-358-0892
Institution ID: 36-0740

**Chapel Hill**

**Office of the Chief Medical Examiner**
Campus Box 7860
Chapel Hill, NC 27599-7860
S: MGH
Institution ID: 36-0514

**University of North Carolina School of Medicine**
Chapel Hill, NC 27599-7860
M: 1-888-569-0617
Institution ID: 36-0514

**University of North Carolina School of Public Health**
CS No 7400
150 Rosemary Hall
Chapel Hill, NC 27599-7400
S: GMH
Institution ID: 36-0502

**Charlotte**

**Carolinae Medical Center**
1000 Byltae Blvd
Charlotte, NC 28201
M: 1-800-358-0892
Institution ID: 36-0291

**Charlotte Institute of Rehabilitation**
1110 Byltae Blvd
Charlotte, NC 28203
S: FM
Institution ID: 36-8012

**Durham**

**Durham Regional Hospital**
3043 N Roxboro St
Durham, NC 27704-2763
M: 1-800-358-0892
Institution ID: 36-0440

**Veterans Affairs Medical Center (Durham)**
501 S. Drive
Durham, NC 27705-7705
M: 1-800-358-0892
Institution ID: 36-0473

**Goldboro**

**Cherry Hospital**
Box 1200
Goldboro, NC 27533
M: 1-800-358-0892
Institution ID: 36-0114

**Greenvile**

**Pitt Cnty Mental Hlth-Mental Retardation and Sub Abuse Ctr**
2300 Waynesboro Rd
Greenville, NC 27834
M: 1-800-358-0892
Institution ID: 36-0741

**Pitt County Memorial Hospital**
PO Box 628
2200 Waynesboro Rd
Greenville, NC 27835-6288
M: 1-800-358-0892
Institution ID: 36-0742

**Raleigh**

**Dorothea Dix Hospital**
820 S Boylan Ave
Raleigh, NC 27603-2176
M: 1-800-358-0892
Institution ID: 36-0740

**Wake Medical Center**
3000 Wade Ave
Raleigh, NC 27610
M: 1-800-358-0892
Institution ID: 36-0486

**Williamston**

**Martin General Hospital**
310 S. Byltae Blvd
PO Box 1128
Williamston, NC 27892
S: FM
Institution ID: 36-0414

Winston-Salem

**Forsyth Memorial Hospital**
3333 E 33rd St
Winston-Salem, NC 27103
M: 1-800-358-0892
Institution ID: 36-0424

**North Carolina**

**Bismarck**

**St Alexius Medical Center**
400 E Broadway
Bismarck, ND 58501-0001
M: 1-800-358-0892
Institution ID: 36-0108

**Fargo**

**Dakota Hospital**
1700 S University Dr
PO Box 6014
Fargo, ND 58108-6014
M: 1-800-358-0892
Institution ID: 36-0701

**St Luke's Hospitals**
720 Fourth St N
Fargo, ND 58102
M: 1-800-358-0892
Institution ID: 36-0701

**Veterans Affairs Medical and Regional Office Center (Fargo)**
2101 N Elm St
Fargo, ND 58102
M: 1-800-358-0892
Institution ID: 36-0701

**Minot**

**Trinity Medical Center**
PO Box 9280
Minot, ND 58702-0620
M: 1-800-358-0892
Institution ID: 36-0409

**Ohio**

**Akron**

**Akron City Hospital (Summa Health System)**
535 E Market St
Akron, OH 44308-0600
M: 1-800-358-0892
Institution ID: 36-0215
Akron General Medical Center  
Att’r: Jane Huffman  
400 Wabash Ave  
Akron, OH 44307  
Med Sch Affil: M 03844, L-03840  
Speciality: P, PS  
Institution Id: 38-0124

Children’s Hospital Medical Center of Akron  
One Perkins Sq  
Akron, OH 44328-1062  
Med Sch Affil: M 03844  
Speciality: MFD, OPH, ORS, P, PCP, PS, PTH, U  
Institution Id: 38-04971

St Thomas Hospital (Summa Health System)  
444 N Main St  
Akron, OH 44310  
Med Sch Affil: M 03844  
Speciality: IM, MFD, P, TY  
Institution Id: 38-0147

Brecksville  
Veterans Affairs Medical Center  
(Cleveland)  
1800 Brecksville Rd  
Brecksville, OH 44141-3288  
Med Sch Affil: M 03886  
Speciality: AN, CD, D, END, GE, GS, ID, IM, IMB, N, NFB, NS, OMF, OPH, ORS, OTO, P, PM, PS, PUD, RHU, RNR, TS, U  
Institution Id: 38-0390

Canton  
Aultman Hospital  
2000 6th St SW  
Canton, OH 44710  
Med Sch Affil: M 03844  
Speciality: IM  
Institution Id: 38-0148

Timken Mercy Medical Center  
1320 Timken Mercy Dr NW  
Canton, OH 44708-3241  
Med Sch Affil: M 03844  
Speciality: UR, IM  
Institution Id: 38-0428

Cincinnati  
Bethesda Hospital Inc  
610 6th St  
Cincinnati, OH 45206-4975  
Med Sch Affil: L-03841, L-03840  
Speciality: 130, OHS  
Institution Id: 38-0464

Children’s Hospital Medical Center  
3333 Burnet Ave  
Cincinnati, OH 45223-3039  
Med Sch Affil: M 03841  
Speciality: AN, APM, CIP, N, NM, ORS, OTO, PDR, RHU, U  
Institution Id: 38-0482

Christ Hospital  
2129 Auburn Ave  
Cincinnati, OH 45219-2906  
Med Sch Affil: M 03841  
Speciality: DR, NS, ORG, U  
Institution Id: 38-0492

Drake Center  
161 W Galbraith Rd  
Cincinnati, OH 45216  
Med Sch Affil: L-03841  
Speciality: FPG  
Institution Id: 38-0568

Good Samaritan Hospital  
375 Dixmyth Ave  
Cincinnati, OH 45229-2419  
Med Sch Affil: M 03841  
Speciality: NS, ORS  
Institution Id: 38-0496

Jewish Hospital of Cincinnati  
3200 Burnet Ave Rm 555  
Cincinnati, OH 45229  
Med Sch Affil: L-03841  
Speciality: NM  
Institution Id: 38-0428

Providence Hospital  
2440 Kipling Ave  
Cincinnati, OH 45209  
Speciality: PF, GS  
Institution Id: 38-0535

University of Cincinnati College of Medicine  
231 Bethesda Ave  
Mail Location #22  
Cincinnati, OH 45267-0182  
Med Sch Affil: M 03841  
Speciality: OSM  
Institution Id: 38-0621

University of Cincinnati Hospital  
264 Goodman St  
Cincinnati, OH 45267-2079  
Med Sch Affil: M 03841, L-02012  
Speciality: AI, CHN, NFM  
Institution Id: 38-0405

Veterners Affairs Medical Center  
(Cincinnati)  
3200 Vine St  
Cincinnati, OH 45229-2213  
Med Sch Affil: M 03841  
Speciality: AI, CD, DMP, DR, END, GE, GS, HEM, ID, IM, N, NFB, ON, OPH, ORS, OTO, P, PM, PS, PUD, RHU, RNR, TS, U  
Institution Id: 38-0429

Cleveland  
American Red Cross Northern Ohio Region  
3747 Euclid Ave  
Cleveland, OH 44116-5201  
Speciality: BBR  
Institution Id: 38-0806

Cleveland Psychiatric Institute  
1708 Alton Ave  
Cleveland, OH 44106  
Speciality: P  
Institution Id: 38-0391

Cleveland Psychoanalytic Institute  
14338 Euclid Ave  
Cleveland, OH 44106  
Speciality: P  
Institution Id: 38-0807

Health Cleveland (Fairview General Hospital)  
16101 Lorain Ave  
Cleveland, OH 44111-5556  
Med Sch Affil: L-00886  
Speciality: PF, GS  
Institution Id: 38-0690

Health Cleveland (Lutheran Medical Center)  
2069 Franklin Blvd  
Cleveland, OH 44115-6856  
Speciality: IM  
Institution Id: 38-0265

MetroHealth Medical Center  
2500 MetroHealth Dr  
Cleveland, OH 44109-1998  
Med Sch Affil: M 03896  
Speciality: CCP: END, GS, HEM, HSD, N, NFB, NS, OMO, ON, OPH, ORS, OTO, PS, TS, U, VS  
Institution Id: 38-0173

Mount Sinai Medical Center of Cleveland  
Office of Medical Affairs  
One Mt Sinai Dr  
Cleveland, OH 44106-1188  
Med Sch Affil: M 03886  
Speciality: CD, PP, GS, PS  
Institution Id: 38-0169

St Vincent Charity Hospital and Health Center  
2351 E 22nd St  
Cleveland, OH 44115  
Med Sch Affil: L-03866  
Speciality: IM, OPH, PS  
Institution Id: 38-0411

University Hospitals of Cleveland  
1100 Euclid Ave  
Cleveland, OH 44106-2662  
Med Sch Affil: M 03896  
Speciality: BBR, ORS  
Institution Id: 38-0373

Columbus  
American Red Cross Central Ohio Region  
965 E Broad St  
Columbus, OH 43205  
Speciality: BBR  
Institution Id: 38-0663

Arthur G James Cancer Hospital and Research Institute  
300 W 10th Ave  
Columbus, OH 43210  
Med Sch Affil: M 03840  
Speciality: CCA, HO, ORG  
Institution Id: 38-0520

Children’s Hospital  
700 Children’s Dr  
Columbus, OH 43205-2068  
Med Sch Affil: M 03840  
Speciality: BBR, CCA, CCP, HSO, MFD, N, NFM, NS, ORS, OTO, PD, PDC, PDF, PDP, PDS, PHO, PN, PS, SP, SPS, TS, U  
Institution Id: 38-0491

Grant Medical Center  
111 S Grant Ave  
Columbus, OH 43215  
Med Sch Affil: M 03840  
Speciality: GE, GS, GHO, PM  
Institution Id: 38-0457

Mount Carmel East Hospital  
6001 Broad St  
Columbus, OH 43213  
Speciality: GS  
Institution Id: 38-0476

Mount Carmel Medical Center  
Dept of Medical Education  
793 W State St  
Columbus, OH 43222-1500  
Med Sch Affil: M 03840  
Speciality: P, PM, PS, SPS  
Institution Id: 38-0245
Ohio

Ohio State University College of Medicine
373 W Keh Ave
Columbus, OH 43210-1228
Med Sch AffIL: M-03840
Specialty: MHI
Institution ID: 38-0176

Ohio State University Medical Center
410 W 10th Ave
Columbus, OH 43210
Med Sch AffIL: M-03840
Specialty: P
Institution ID: 38-0123

Park Medical Center
1421 E Broad St
Columbus, OH 43205
Specialty: FP
Institution ID: 38-0584

Riverside Methodist Hospitals
Medical Education Dept
3355 Olentangy River Rd
Columbus, OH 43214
Med Sch AffIL: M-03840
Specialty: EM, FAO, N, NS, OSB, OSM, P, FM, PS, SPS, S
Institution ID: 38-0383

Veterans Affairs Outpatient Clinic
404 Clinic Dr
Columbus, OH 43210
Specialty: DP
Institution ID: 38-0764

Dayton

Children's Medical Center
One Children's Plaza
Dayton, OH 45404-1815
Med Sch AffIL: M-03843
Specialty: GH, D, GS, OBS, PD, PS, TY
Institution ID: 38-0456

Good Samaritan Hospital and Health Center
2221 Philadelphia Dr
Dayton, OH 45408-1091
Med Sch AffIL: M-03845
Specialty: CD, GH, EM, GS, HD, ID, IM, MPD, P
Institution ID: 38-0315

Miami Valley Hospital
1 Wyoming St
Dayton, OH 45408-6793
Med Sch AffIL: M-03845
Specialty: GS, ID, IM, MPD, OBG, OBS, TY
Institution ID: 38-0431

St Elizabeth Medical Center
601 Edwin C Motes Blvd
Dayton, OH 45408-1405
Med Sch AffIL: M-03845
Specialty: GH, D, GS, PS
Institution ID: 38-0398

Veterans Affairs Medical Center (Dayton)
4100 W Third St
Dayton, OH 45428
Med Sch AffIL: M-03845, L-03840
Specialty: CD, D, GE, GS, HO, ID, IM, MPD, OBS, PS
Institution ID: 38-0453

Dayton (Kettering)
Kettering Medical Center
3355 Southern Blvd
Dayton (Kettering), OH 45429-1298
Med Sch AffIL: M-03845
Specialty: EM, GS, P
Institution ID: 38-0615

Mayfield Heights
Meridia Hillcrest Hospital
6780 Mayfield Rd
Mayfield Heights, OH 44124
Specialty: GS, IM
Institution ID: 38-0483

Sylvania
Flower Hospital
5300 Harrow Rd
Sylvania, OH 43560
Med Sch AffIL: M-03843
Specialty: AN, PM
Institution ID: 38-0382

Toledo
Mercy Hospital of Toledo
2202 Jefferson Ave
Toledo, OH 43624-1181
Med Sch AffIL: M-03842
Specialty: EN, ED, PM
Institution ID: 38-0010

St Vincent Medical Center
2213 Cherry St
Toledo, OH 43606-2681
Med Sch AffIL: M-03843
Specialty: BI, FP, GS, HSP, IM, MPD, OA, OBG, ON,
OBS, F, PM, PMP, PS, TY
Institution ID: 38-0189

Toledo Hospital
2142 N Cove Blvd
Toledo, OH 43606-3665
Med Sch AffIL: M-03843
Specialty: AN, CD, EM, GS, HP, IM, MPD, OBG, OBS,
PD, FM, PMP, TY
Institution ID: 38-0218

Toledo Mental Health Center
630 S Detroit Ave
Toldeo, OH 43609
Med Sch AffIL: M-03843
Specialty: P
Institution ID: 38-0583

Westerville
St Ann's Hospital of Columbus
500 S Cleveland Ave
Westerville, OH 43081-8865
Med Sch AffIL: L-03840
Specialty: OBG
Institution ID: 38-0921

Worthington
Harding Hospital
445 E Granville Rd
Worthington, OH 43085-3195
Med Sch AffIL: M-03840
Specialty: P
Institution ID: 38-0114

Wright-Patterson AFB
USAF Medical Center (Wright-Patterson)
4911 Sugar Maple Dr
Wright-Patterson AFB, OH 45433-6230
Med Sch AffIL: M-03845, M-03840
Specialty: D, EM, GE, GS, MPD, OBG, P, FD
Institution ID: 38-0380

Youngstown
Northside Medical Center
345 Oak Hill Ave
PO Box 690
Youngstown, OH 44510-0690
Med Sch AffIL: M-03844
Specialty: AN, D, FP, GS, IM, MPD, PTH, TY
Institution ID: 38-0406

Southside Medical Center
Western Reserve Care System
345 Oak Hill Ave
PO Box 690
Youngstown, OH 44506-0690
Med Sch AffIL: M-03844
Specialty: AN, D, GS, IM, MPD, PTH, TY
Institution ID: 38-0239

Tod Children's Hospital
Western Reserve Care System
345 Oak Hill Ave
PO Box 690
Youngstown, OH 44506-0890
Med Sch AffIL: M-03844
Specialty: GS, PD, TY
Institution ID: 38-0754

Enid
St Mary's Hospital
305 S Fifth St
PO Box 232
Enid, OK 73702
Med Sch AffIL: G-03801
Specialty: FP
Institution ID: 38-0489

Muskogee
Veterans Affairs Medical Center (Muskogee)
Norton Heights Dr
Muskogee, OK 74401
Med Sch AffIL: M-03801
Specialty: GS, IM, MPD
Institution ID: 38-0721

Oklahoma City
Baptist Medical Center of Oklahoma
3308 NW Expressway
Oklahoma City, OK 73112-4484
Med Sch AffIL: G-03801
Specialty: EM, OTO, PTH, TY
Institution ID: 38-0479

Bone and Joint Hospital
1111 N Dewey Ave
Oklahoma City, OK 73103-2615
Med Sch AffIL: G-03801
Specialty: ORS
Institution ID: 38-0924

Children's Hospital of Oklahoma
PO Box 26207
Oklahoma City, OK 73125
Med Sch AffIL: M-03802
Specialty: AN, CHP, D, DMP, DR, EM, GS, MPD, N, NM,
NP, NS, NP, OBS, OTO, P, PD, PE, PH, PS, PTH, TS, TY, U, VIB
Institution ID: 39-0130
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<tr>
<td>HCA Presbyterian Hospital</td>
<td>700 NE 13th St</td>
<td>Oklahoma City, OK 73104-5070</td>
<td>405-232-3111</td>
<td>405-232-3120</td>
<td>HCA Presbyterian Hospital</td>
<td>OK</td>
<td>Pediatrics, Internal Medicine, Neonatology, Cardiology</td>
<td>39-0321</td>
<td>Greeley Medical Group, Inc.</td>
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<tr>
<td>Mayo Clinic</td>
<td>4550 Table Rock Rd</td>
<td>Rochester, MN 55901-2899</td>
<td>507-284-5000</td>
<td>507-284-5120</td>
<td>Mayo Clinic</td>
<td>MN</td>
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<td>St Francis Hospital</td>
<td>5611 S Yale Ave</td>
<td>Tulsa, OK 74136</td>
<td>918-742-7424</td>
<td>918-742-7430</td>
<td>St Francis Hospital</td>
<td>OK</td>
<td>Pediatrics, Internal Medicine, Surgery</td>
<td>39-0390</td>
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<tr>
<td>St John Medical Center</td>
<td>1823 S Utica Ave</td>
<td>Tulsa, OK 74104</td>
<td>918-741-0000</td>
<td>918-741-0010</td>
<td>St John Medical Center</td>
<td>OK</td>
<td>Pediatrics, Internal Medicine, Surgery</td>
<td>39-0390</td>
<td>St John Medical Center</td>
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<td>University Hospital of South Texas</td>
<td>5300 S Medical Dr</td>
<td>San Antonio, TX 78229</td>
<td>210-822-1000</td>
<td>210-822-1100</td>
<td>University Hospital of South Texas</td>
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<td>Pediatrics, Internal Medicine, Surgery</td>
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<td>University Hospital of South Texas</td>
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<tr>
<td>University of Missouri-Columbia</td>
<td>601 Hospital Dr</td>
<td>Columbia, MO 65212</td>
<td>573-882-1234</td>
<td>573-882-1235</td>
<td>University of Missouri-Columbia</td>
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<td>Pediatrics, Internal Medicine, Surgery</td>
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<td>University of Washington</td>
<td>1959 N.E. Pacific St</td>
<td>Seattle, WA 98109</td>
<td>206-543-1000</td>
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<td>University of Wisconsin-Madison</td>
<td>1500 Shady Oak Rd</td>
<td>Madison, WI 53706</td>
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<td>Fort Worth, TX 76101</td>
<td>817-737-4600</td>
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<tr>
<td>Pawnee Valley Community Hospital</td>
<td>800 W Pawnee Ave</td>
<td>Pawnee, OK 73651</td>
<td>580-562-3100</td>
<td>580-562-3101</td>
<td>Pawnee Valley Community Hospital</td>
<td>OK</td>
<td>Pediatrics, Internal Medicine, Surgery</td>
<td>39-0400</td>
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<td>San Antonio, TX 78229</td>
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<td>Idaho</td>
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Greensburg
Westmoreland Hospital
532 W Pittsburgh St
Greensburg, PA 15601
Specialty: TS
Institution ID: 41-0292

Harrisburg
Harrisburg Hospital
111 S Front St
Harrisburg, PA 17101-2099
Med Sch Affl: M-04114
Specialty: GY, OB/GYN, OBGYN, PS
Institution ID: 41-0356

Polyclinic Medical Center
3601 N Third St
Harrisburg, PA 17110
Med Sch Affl: M-04114
Specialty: DR, FD, PS
Institution ID: 41-0463

Lancaster
Lancaster General Hospital
555 N Duke St
PO Box 9556
Lancaster, PA 17604-3555
Med Sch Affl: M-04118, L-04114, L-04101
Specialty: U
Institution ID: 41-0677

Lebanon
Veterans Affairs Medical Center (Lebanon)
1700 S Lincoln Ave
Lebanon, PA 17042-7597
Med Sch Affl: M-04114
Specialty: OPH, U
Institution ID: 41-7070

Monroeville (Pittsburgh)
Forbes Regional Hospital
2570 Harmar Rd
Monroeville (Pittsburgh), PA 15145
Med Sch Affl: M-04112
Specialty: DR
Institution ID: 41-0524

Orefield
KidsPeace National Center for Kids in Crisis
5300 KidsPeace Dr
Orefield, PA 18069
Specialty: CHP
Institution ID: 41-8028

Philadelphia
Albert Einstein Medical Center
5500 Old York Rd
Philadelphia, PA 19141-3006
Med Sch Affl: M-04113
Specialty: GE, N, PCC, FM
Institution ID: 41-0650

American Red Cross Blood Services-Penn-Jersey Region
Munger Blood Center
700 Spring Garden St
Philadelphia, PA 19123-3694
Specialty: BBK
Institution ID: 41-8000

Belmont Center for Comprehensive Treatment
4200 Monument Ave
Philadelphia, PA 19131
Med Sch Affl: L-04113
Specialty: GH/P
Institution ID: 41-0283

Chestnut Hill Hospital
8235 Germantown Ave
Philadelphia, PA 19118-2769
Med Sch Affl: M-04102
Specialty: OB/GYN
Institution ID: 41-0358

Children's Hospital of Philadelphia
One Children's Center
34th St and Civic Center Blvd
Philadelphia, PA 19104
Med Sch Affl: M-04101, L-04106, G-04107, G-04102
Specialty: AN, APN, CCA, D, DR, HSO, NM, MS, ORS, OT, PS, PTH, RNK, TS, U
Institution ID: 41-0169

Children's Seashore House
3405 Civic Center Blvd
Philadelphia, PA 19146
Med Sch Affl: L-04101
Specialty: PM
Institution ID: 41-0625

Episcopal Hospital
100 E Lehigh Ave
Philadelphia, PA 19123
Med Sch Affl: M-04107, L-04106
Specialty: PUD
Institution ID: 41-0434

Fox Chase Cancer Center
7701 Burholme Ave
Philadelphia, PA 19111-3497
Med Sch Affl: M-04113, L-04109, L-04107
Specialty: CCA, SS, HEM, ON, TS, U
Institution ID: 41-0629

Frankford Hospital (Frankford Campus)
Red Lion and Knighti Rds
Philadelphia, PA 19114
Specialty: TY
Institution ID: 41-0604

Frankford Hospital (Torresdale Campus)
Red Lion and Knights Rd
Philadelphia, PA 19124
Med Sch Affl: M-04107, G-04101
Specialty: GS, OBGYN, OBGYN, TY
Institution ID: 41-0166

Friends Hospital
4641 Roosevelt Blvd
Philadelphia, PA 19125-2989
Med Sch Affl: L-04102
Specialty: P
Institution ID: 41-7107

Germantown Hospital and Medical Center
One Penn Blvd
Philadelphia, PA 19144-1498
Med Sch Affl: L-04113, L-04107, L-04101
Specialty: DR, IM
Institution ID: 41-0496

Graduate Hospital
One Graduate Plaza
1500 Lombard St
Philadelphia, PA 19146-1465
Med Sch Affl: M-04113, L-04101, L-04107, G-04106
Specialty: D, N, NM, OT0
Institution ID: 41-0144

Hahnemann University Hospital
New College Blvd, MS 490
Broad and Vine Sts MS490
Philadelphia, PA 19102-1100
Med Sch Affl: M-04108, L-04113
Specialty: OT0
Institution ID: 41-0454

Hospital of the University of Pennsylvania
3400 Spruce St
Philadelphia, PA 19104
Med Sch Affl: M-04101
Specialty: AI, CHN, NPM
Institution ID: 41-0166

Jefferson Park Hospital
Frost Rd and Fairmont Pk
Philadelphia, PA 19131
Med Sch Affl: L-04102
Specialty: PCC
Institution ID: 41-0816

Medical College of Pennsylvania Hospital
Medical College of PA Hospital
3300 Henry Ave
Philadelphia, PA 19129
Med Sch Affl: M-04107, L-04107, G-04107
Specialty: P
Institution ID: 41-0415

Mercy Catholic Medical Center-Fitzgerald Mercy Division
64th St and Cedar Ave
Philadelphia, PA 19143
Med Sch Affl: G-04101
Specialty: DR, GS, HSO, IM, PCC, TY
Institution ID: 41-0414

Mercy Catholic Medical Center-Misericordia Division
64th St and Cedar Ave
Philadelphia, PA 19143
Med Sch Affl: G-04107
Specialty: DR, EM, GS, IM, PCC
Institution ID: 41-0458

Methodist Hospital
2301 S Broad St
Philadelphia, PA 19148
Med Sch Affl: M-04102
Specialty: EM, GS, OB/GYN, ORS
Institution ID: 41-0306

Moss Rehabilitation Hospital
1200 W Tabor Rd
Philadelphia, PA 19141-3009
Med Sch Affl: L-04113
Specialty: ORS, PM, RNU
Institution ID: 41-0416

Pennsylvania Hospital
600 Spruce St
Philadelphia, PA 19107
Med Sch Affl: M-04102, M-04101, G-04113
Specialty: D, ID, NPM, NS, DAR, ORS, OSM, OT0, P, U
Institution ID: 41-0255

Philadelphia Child Guidance Center
34th St and Civic Center Blvd
Philadelphia, PA 19104
Med Sch Affl: L-04101
Specialty: P
Institution ID: 41-0127

Presbyterian Medical Center of Philadelphia
51 N 30th St
Philadelphia, PA 19104
Med Sch Affl: M-04101
Specialty: GS, OPH
Institution ID: 41-0323
Scheie Eye Institute
51 36th St
Philadelphia, PA 19104
Med Soc Aff: M-04101
Specialty: OPH
Institution ID: 41-6632

Shriners Hospital for Crippled Children (Philadelphia)
6000 Roosevelt Blvd
Philadelphia, PA 19152-9999
Med Soc Aff: G-04113, G-04106, G-04107
Specialty: OP, ORS
Institution ID: 41-6610

St Agnes Medical Center
1500 E Broad St
Philadelphia, PA 19145-3089
Med Soc Aff: L-04107
Specialty: GS, PS
Institution ID: 41-6223

St Christopher's Hospital for Children
Eric Ave at Friend St
Philadelphia, PA 19134-1096
Med Soc Aff: M-04113, M-04107, G-04106, G-04102
Specialty: CCA, CTP, NS, ORS, OT, PS, TS, U
Institution ID: 41-6589

Temple University Hospital
Broad and Ontario Sts
Philadelphia, PA 19140-3616
Med Soc Aff: M-04113
Specialty: CRH, NP, NPM, PTH
Institution ID: 41-6415

Thomas Jefferson University Hospital
111 S 11th St
Philadelphia, PA 19107-6966
Med Soc Aff: M-04102, L-04107
Specialty: DR
Institution ID: 41-6224

University of Pennsylvania School of Medicine
36th and Hamilton Walk
Philadelphia, PA 19104
Med Soc Aff: M-04101
Specialty: OPH
Institution ID: 41-6551

Veterans Affairs Medical Center (Philadelphia)
University and Woodland Aves
Philadelphia, PA 19104
Med Soc Aff: M-04101
Specialty: AN, APM, CCM, D, PS, ID, IM, IMG, N, NM, NS, OPH, OT, P, PCC, PTH, RHI, RNR, BO, U, VFT
Institution ID: 41-6286

Wills Eye Hospital
900 Walnut St
Philadelphia, PA 19107-5585
Med Soc Aff: M-04102
Specialty: NS
Institution ID: 41-6494

Pittsburgh

Allegheny General Hospital
320 E North Ave
Pittsburgh, PA 15212-4772
Med Soc Aff: M-04107
Specialty: OPH, OT, PS
Institution ID: 41-6466

Children's Hospital of Pittsburgh
One Children's Pl
3700 Fifth Ave at DeSoto St
Pittsburgh, PA 15213-2883
Med Soc Aff: M-04112
Specialty: AJ, CEC, CHN, D, DS, HMP, HSR, NF, NS, ORS, OT, PCF, PD, PDC, PSE, PDR, PFDR, PDR, RHR, PS, PTH, TS, U
Institution ID: 41-6161

Harmarville Rehabilitation Center
PO Box 11460
Grove Run Rd
Pittsburgh, PA 15228-0450
Specialty: IM
Institution ID: 41-6740

Magee-Womens Hospital
300 Halsted St
Pittsburgh, PA 15212-3190
Med Soc Aff: M-04112
Specialty: NP, NPM, OPC, PCC, PD, PTH, TY
Institution ID: 41-6208

Mercy Hospital of Pittsburgh
1400 Locust St
Pittsburgh, PA 15212-6166
Med Soc Aff: M-04112, L-04102
Specialty: EM, ORS, PS
Institution ID: 41-6196

Montefiore University Hospital (UPMC)
200 Lothrop St
Pittsburgh, PA 15212-3582
Med Soc Aff: M-04112
Specialty: AN, APM, CCA, CCM, CS, CD, CHN, CHP, D, DMP, DR, EM, EN, GS, HS, HSM, HSP, ID, IM, IMG, N, NM, OP, OR, ORS, OT, OYO
Institution ID: 41-6248

Presbyterian-University Hospital/UPMC
200 Lothrop St
Pittsburgh, PA 15212-3882
Med Soc Aff: M-04112
Specialty: AN, APM, CCA, CCM, CS, CD, CHN, CHP, D, DMP, DR, EM, EN, GS, HS, HSM, HSP, ID, IM, IMG, N, NM, OP, OR, ORS, OT, OYO
Institution ID: 41-6041

St Margaret Memorial Hospital
810 Freepoint Rd
Pittsburgh, PA 15215-3396
Med Soc Aff: M-04112, L-04114
Specialty: ORS, PS
Institution ID: 41-6324

University Health Center of Pittsburgh
Graduate Medical Education Office
121 Meyran Ave
200 Locbler Blvd
Pittsburgh, PA 15216-0960
Med Soc Aff: M-04112
Specialty: PO
Institution ID: 41-6024

Veterans Affairs Medical Center (Pittsburgh)
Pittsburgh, VA Medical Center
University Drive C
Pittsburgh, PA 15240-1001
Med Soc Aff: M-04112
Specialty: CCM, CD, EN, DR, GE, GS, HEM, HSO, ID, IM, IMG, N, NF, NP, NS, OAR, ON, ORH, ORS, OT, OYO, P, PCC, PTH, RHI, RNR, U
Institution ID: 41-6296

Western Pennsylvania Hospital
4800 Friendship Ave
Pittsburgh, PA 15224-1783
Med Soc Aff: M-04112
Specialty: EM, PS
Institution ID: 41-6122

Western Psychiatric Institute and Clinic/UPMC
3611 O'Hara St
Pittsburgh, PA 15213-3593
Med Soc Aff: M-04112
Specialty: CHX, P, TY
Institution ID: 41-6462

Reading

Reading Hospital and Medical Center
PO Box 10852
Reading, PA 19612-0852
Med Soc Aff: M-04113, L-04114, L-04101
Specialty: GS
Institution ID: 41-6396

Reading Rehabilitation Hospital
Morgantown Rd RB:1 PO Box 256
Reading, PA 19607
Specialty: FM
Institution ID: 41-6202

Scranton

Community Medical Center
1832 Mulberry St
Scranton, PA 18510-2386
Specialty: IM, PUD
Institution ID: 41-6716

Mercy Hospital
Adm St
745 Jefferson Ave
Scranton, PA 18510
Med Soc Aff: M-04113
Specialty: IM
Institution ID: 41-6717

Moses Taylor Hospital
700 Quincy Ave
Scranton, PA 18510-1970
Med Soc Aff: M-04113
Specialty: IM
Institution ID: 41-6718

Upland

Crozer-Chester Medical Center
One Medical Center Blvd
PO Box 1, Ste 300
Upland, PA 19066
Med Soc Aff: M-04109, G-04102, G-04101
Specialty: GE, GS, IM, OBG, P, PCC, PS, VS
Institution ID: 41-6611

Delaware County Memorial Hospital
Center-Chester Medical Center
One Medical Center Blvd
Upland, PA 19066
Med Soc Aff: L-04107, G-04113
Specialty: OBG
Institution ID: 41-6567

Wilkes-Barre

Veterans Affairs Medical Center (Wilkes-Barre)
1111 East End Blvd
Wilkes-Barre, PA 18711-0025
Med Soc Aff: G-04113, G-04109
Specialty: OPH
Institution ID: 41-6517

Wilkes-Barre General Hospital
Auburn and N River St
Wilkes-Barre, PA 18764
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*Teaching Institutions*
**Participating Institutions**

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<td>Five Richard Medical Pk</td>
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<td>Williams Jennings Bryan Dorn Veterans Hospital</td>
<td>6430 Garners Ferry Rd</td>
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<td>3812 E Louise Ave</td>
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<td>McKennan Hospital</td>
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<td>PO Box 5045</td>
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<td>Royal C Johnson Veterans Affairs Medical Center</td>
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<td>Sioux Valley Hospital</td>
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<td>Southeastern Mental Health Center</td>
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<td>Tennessee</td>
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<td>Johnson City</td>
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<td>Campbell Foundation-University of Tennessee</td>
<td>503 Madison Ave</td>
<td>Memphis, TN 38104-2653</td>
<td>campus.utmem.edu</td>
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<td>Med Sch Affil: M 04706</td>
<td>Specialty: HS, ORS</td>
<td>Institution ID: 47-0401</td>
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<td>LeBonheur Children's Medical Center</td>
<td>50 N Dunlap Ave</td>
<td>Memphis, TN 38105-2883</td>
<td>lebonheur.org</td>
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<td>Med Sch Affil: M 04706</td>
<td>Specialty: AI, CUP, CHF, CHF, DR, MDP, ORS, PD, PDC, PDE, PD, PDE, PHT, RUH, TS, TV, U, UP</td>
<td>Institution ID: 47-0816</td>
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<td>Methodist Hospital-Central Unit</td>
<td>1265 Union Ave</td>
<td>Memphis, TN 38105-3415</td>
<td>methodisthospital.com</td>
<td>Med Sch Affil: M 04706</td>
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Tennessee

Regional Medical Center at Memphis
877 Jefferson Ave
Memphis, TN 38103-6999
Med Sch Affl: M-04706
Specialties: AN, CCM, CCH, CD, CHN, DHR, END, GE, GS, HEM, ID, IM, MG, MPD, N, NPE, NPM, NS, OB, OBG, ON, OPH, ORS, OT, OT, P, P, PD, PS, PTH, PUD, RHI, ST, U, VHR
Institution ID: 47-04241

St Francis Hospital
6005 Park Ave Ste 600
Memphis, TN 38119
Med Sch Affl: M-04706
Specialty: FP
Institution ID: 47-04783

St Joseph Hospital
220 Overton Ave
Memphis, TN 38101
Specialty: CHP
Institution ID: 47-04375

St Jude Children's Research Hospital
332 N Lauderdale St
Memphis, TN 38105-6318
Med Sch Affl: M-04706
Specialties: AL, MDP, PF, PDR, PDS, PHO
Institution ID: 47-04842

University of Tennessee College of Medicine
956 Court Ave PO Box 19A
Memphis, TN 38163-9999
Med Sch Affl: M-04706, L-04707
Specialty: PC, IM
Institution ID: 47-04747

University of Tennessee Medical Center
951 Court Ave
Memphis, TN 38163
Med Sch Affl: M-04706
Specialties: AN, AI, CCM, CD, CHN, DHR, END, GE, GS, HEM, ID, IM, MG, MPD, N, NPE, NS, ON, OPH, ORS, OT, P, PF, PTH, PUD, RHI, ST, U, VHR
Institution ID: 47-02629

Veterans Affairs Medical Center (Memphis)
1300 Jefferson Ave
Memphis, TN 38104
Med Sch Affl: M-04706
Specialties: AI, CCM, CD, CHN, DHR, END, GE, GS, HEM, ID, IM, MG, MPD, N, NPE, NS, ON, OPH, ORS, OT, P, PF, PTH, PUD, RHI, ST, U, VHR
Institution ID: 47-02629

Mountain Home
Veterans Affairs Medical Center (Mountain Home)
(Jonesboro City)
Mountain Home, TN 37684-5001
Med Sch Affl: M-04706
Specialties: CD, PP, GE, GS, HO, ID, IM, P, PTH, PUD
Institution ID: 47-04488

Murfreesboro
Alvin C York Veterans Affairs Medical Center
3400 Lebanon Rd
Murfreesboro, TN 37129
Med Sch Affl: M-04707
Specialty: FP, IM, P
Institution ID: 47-04801

Nashville
American Red Cross Blood Services-Tennessee Valley Region
2201 Charlotte Ave
PO Box 29391
Nashville, TN 37202-3917
Specialty: BK
Institution ID: 47-04020

Baptist Hospital
Department of Medicine
2000 Church St
Nashville, TN 37236-0001
Med Sch Affl: M-04706, L-04705
Specialties: OB, OTO, OT, PS, U
Institution ID: 47-01583

Metropolitan Nashville General Hospital
72 Hermitage Ave
Nashville, TN 37210-3110
Med Sch Affl: M-04707
Specialties: PC, P, IM, MPD, N, PS, PD, PS
Institution ID: 47-04086

Middle Tennessee Mental Health Institute
1501 Murfreesboro Rd
Nashville, TN 37217-9017
Specialty: P
Institution ID: 47-02682

St Thomas Hospital
420 Harding Rd
PO Box 380
Nashville, TN 37205
Med Sch Affl: M-04705
Specialties: GE, GS, HO, ID, NS, PTH, RHI, VS
Institution ID: 47-02682

Vanderbilt Child and Adolescent Psychiatric Hospital
1601 23rd Ave S
Nashville, TN 37212
Specialty: CHP
Institution ID: 47-02621

Veterans Affairs Medical Center (Nashville)
1310 24th Ave S
Nashville, TN 37212-2937
Med Sch Affl: M-04705
Specialties: D, DR, GE, GS, HO, ID, IM, MPD, N, NPE, NM, NS, OPH, ORS, OTO, P, PCC, PS, PTH, RHI, ST, U, VHR
Institution ID: 47-04601

Texas

Amarillo
Northwest Texas Health Care System
P O Box 1110
Amarillo, TX 79115
Med Sch Affl: M-04815
Specialty: FP, IM, OB, PD
Institution ID: 48-05664

St Anthony's Hospital
PO Box 950
Amarillo, TX 79176
Med Sch Affl: M-04815
Specialty: FP
Institution ID: 48-07005

Veterans Affairs Medical Center (Amarillo)
6010 Amarillo Blvd W
Amarillo, TX 79106-1902
Med Sch Affl: M-04815
Specialty: CHN, IM, N
Institution ID: 48-05854

Austin
Austin-Travis County Mental Health and Retardation Center
1409 Collier St
Austin, TX 78704
Specialty: PM
Institution ID: 48-06858

Brackenridge Hospital
601 E 15th St
Austin, TX 78701
Specialty: CHP, PP, IM, OB, PD
Institution ID: 48-08563

Central Texas Medical Foundation
Dept of Medical Education
601 E 15th St
Dallas, TX 75201
Med Sch Affl: M-04812
Specialty: GS, P
Institution ID: 48-02852

Big Spring
Veterans Affairs Medical Center (Big Spring)
3460 Gregg St
Big Spring, TX 79729
Med Sch Affl: M-04815
Specialty: OPH
Institution ID: 48-06557

Dallas
Baylor Institute for Rehabilitation
3066 Gaston Ave
Dallas, TX 75246-2018
Specialty: PM
Institution ID: 48-08030

Baylor University Medical Center
3500 Gaston Ave
Dallas, TX 75246-2086
Med Sch Affl: M-04812, L-02312
Specialties: OPH, PS, SPS, U
Institution ID: 48-05631

Chariton Methodist Hospital
3500 W Wheatland Rd
Dallas, TX 75237
Specialty: FP
Institution ID: 48-08575

Children's Medical Center of Dallas
1935 Motor St
Dallas, TX 75235
Med Sch Affl: M-04812
Specialties: AI, CME, CHI, CHP, D, END, NS, OMO, OTO, PD, PDC, PDR, PG, PSO, FN, FS, SPS, U
Institution ID: 48-02852

Dallas County Hospital District-Parkland Memorial Hospital
5501 Harry Hines Blvd
Dallas, TX 75235
Med Sch Affl: M-04812, L-02312
Specialties: AI, AN, APM, CPP, CCH, CD, CHN, CHI, CR, DR, D, DMP, DHR, END, GE, GS, HSP, HSP, ID, IM, N, NEP, NM, NP, NPM, NR, NS, OB, OB, OPH, ORS, OTO, PCC, PD, PDR, PG, PS, PTH, PHO, PHO, PS, P, PTH, RHI, RHR, SPS, SPS, ST, ST, U, VHR
Institution ID: 48-02852

Dallas County Mental Health and Mental Retardation Center
1341 Mockingbird Ln
Ste 1000-E
Dallas, TX 75247
Specialty: P
Institution ID: 48-08552
Dallast Rehabilitation Institute
9713 Harry Hines Blvd
Dallas, TX 75220
Specialties: PM
Institution ID: 48-0645

Presbyterian Hospital of Dallas
8200 Walnut Hill Ln
Dallas, TX 75231-4486
Med Sch Affil: L-04812
Specialties: OMO, P
Institution ID: 48-0619

St Paul Medical Center
5909 Harry Hines Blvd
Dallas, TX 75235-0001
Med Sch Affil: L-04812
Specialties: NS, OTO, TS
Institution ID: 48-0103

Texas Scottish Rite Hospital for Children
2222 Welborn St
Dallas, TX 75219-3683
Med Sch Affil: L-04815, G-04812
Specialties: APM, CHN, HSP, OP, ORS
Institution ID: 48-0941

Veterans Affairs Medical Center (Dallas)
4500 S Lancaster Rd
Dallas, TX 75216
Med Sch Affil: M-04812
Specialties: D, DR, END, GE, GS, HO, ID, IM, N, NEP, NM, NR, NS, OPH, ORS, OTO, P, PCC, PM, PS, PTE, RHI, SPS, TS, TY, U, VS
Institution ID: 48-0290

Zale-Lipshy University Hospital
5151 Harry Hines Blvd
Dallas, TX 75236-7786
Med Sch Affil: M-04812
Specialties: APM, D, DP, NS, P, PS, RNR, SPS, TS, VIB, VS
Institution ID: 48-8634

El Paso
RE Thomason General Hospital
4815 Claudina Ave
El Paso, TX 79905
Med Sch Affil: M-04815
Specialties: AN, EM, FT, GS, IM, OBG, ORS, OP, PD, TY
Institution ID: 48-0442

Texas Tech University Health Sciences Center at El Paso
4800 Alberto Ave
El Paso, TX 79907-2709
Med Sch Affil: M-04815, L-04802
Specialties: ORS
Institution ID: 48-0650

Fort Sam Houston
Brooke Army Medical Center
2410 Stetin Ave Bldg 1208
Fort Sam Houston, TX 78234-2290
Med Sch Affil: M-0312, L-04813
Specialties: COA, NPM, PS, U
Institution ID: 48-0277

Fort Worth
Cook-Fort Worth Children's Medical Center
1400 Cooper St
Fort Worth, TX 76104
Specialties: OB
Institution ID: 48-0503

Harris Methodist Fort Worth
1301 Pennsylvania Avenue
Fort Worth, TX 76104
Specialties: OBG, ORS
Institution ID: 48-04811

John Peter Smith Hospital (Tarrant County Hospital District)
1500 S Main St
Fort Worth, TX 76104-4917
Med Sch Affil: G-04812
Specialties: GS, OTO
Institution ID: 48-0114

Galveston
Shriners Burns Institute
815 Market St
Galveston, TX 77550-2725
Med Sch Affil: G-04802
Specialties: PS
Institution ID: 48-8001

Houston
AMI Park Plaza Hospital
1313 Herman Dr
Houston, TX 77004
Specialties: TF
Institution ID: 48-8059

Cullen Bayou Place Depelchin Children's Center
4815 Dickinson St
Houston, TX 77007
Med Sch Affil: L-04804
Specialties: CRP
Institution ID: 48-8041

Diagnostic Center Hospital
6447 Main St
Houston, TX 77030
Specialties: OSM
Institution ID: 48-8049

Gulf Coast Regional Blood Center
1400 La Cantera
Houston, TX 77054-1892
Specialties: BRB
Institution ID: 48-8042

Harris County Hospital District-Ben Taub General Hospital
1594 Taub Loop
Houston, TX 77009-6000
Med Sch Affil: M-04804, L-02312
Specialties: AN, BRB, CD, D, DR, END, FT, GE, GS, HEM, HMP, HSP, ID, IM, MFD, N, NEP, NM, NP, NPM, NS, OBG, ON, OP, OPH, ORS, OTO, OPTG, P, PCC, PFP, PD, PCP, PM, PS, PTE, RHI, RO, TS, TY, U
Institution ID: 48-8033

Harris County Psychiatric Center
2820 S MacGregor
PO Box 20249
Houston, TX 77225-0249
Med Sch Affil: M-04814
Specialties: P
Institution ID: 48-8044

Hermann Children's Hospital at Houston
6411 Fannin
Houston, TX 77030-4188
Specialties: MPD, NPM, PD, PHO, PN
Institution ID: 48-0813

Hermann Hospital
6411 Fannin
Houston, TX 77030-4188
Med Sch Affil: M-04814
Specialties: AN, APM, OA, CCS, CD, CHN, CRN, D, DMP, DR, EM, END, FT, GE, GS, HEM, ID, IM, MPD, N, NEP, OBG, OPH, ORS, OSM, OTO, P, PCC, PFP, PHO, PTH, RHI, RNR, TS, TY, U
Institution ID: 48-04859

Institute for Rehabilitation and Research
1333 Moursund
Houston, TX 77030
Med Sch Affil: M-04804
Specialties: PM
Institution ID: 48-05681

Lyndon B. Johnson General Hospital
5656 Kelly St
Houston, TX 77006
Med Sch Affil: M-04814
Specialties: CD, DR, EM, END, FT, GE, GS, HEM, ID, IM, N, NEP, NP, ORS, OTO, PS, PCC, PDP, PM, PS, PTH, RHI, RNR, TS, TY, U
Institution ID: 48-8045

Memorial Hospital System
7737 SW Freeway, Ste 200
Houston, TX 77074
Med Sch Affil: M-04814
Specialties: FF
Institution ID: 48-0443

Methodist Hospital
6555 Fannin St
Houston, TX 77030-8879
Med Sch Affil: M-04804
Specialties: AL, AN, APM, BKB, COM, CD, D, DR, END, GE, GS, HEM, HMP, HSP, ID, IM, MPD, N, NEP, NP, NS, ON, OP, OPH, ORS, OSM, OTO, OTG, P, PCC, PDP, PM, PS, PTH, RNR, RO, TS, TY, U, VS
Institution ID: 48-0172

Shriners Hospital for Crippled Children (Houston)
1402 N MacGregor Dr
Houston, TX 77010-1998
Med Sch Affil: G-04814
Specialties: CHN, OP, ORS
Institution ID: 48-0528

St Joseph Hospital
1019 LaBranch
Houston, TX 77002
Med Sch Affil: M-04814
Specialties: DR, MFD, ORS, U
Institution ID: 48-0296

St Luke's Episcopal Hospital
PO Box 20269
Houston, TX 77225-0269
Med Sch Affil: M-04804, L-04815, L-04814
Specialties: CD, DR, FT, RPS, IM, MPD, NM, PM, PS, TS, TY
Institution ID: 48-0395

Texas Children's Hospital
6291 Fannin St
Houston, TX 77030-2339
Med Sch Affil: M-04814, L-04814
Specialties: AL, APM, COA, CHN, CHE, DR, HMP, MPD, NM, NP, NPM, OP, OGS, PD, PCC, PFP, PD, PNM, PHO, PM, PS, PTH, TS, U, UP
Institution ID: 48-0445

Texas Heart Institute
PO Box 20345
MC 3-116
Houston, TX 77225-0345
Med Sch Affil: L-04815, L-04814, L-04802, M-04803
Specialties: CD, MFD
Institution ID: 48-0629
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<th>University of Texas M D Anderson Cancer Center</th>
<th>Participating Institutions</th>
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<td>1111 Holcombe Blvd</td>
<td><strong>Reese AFB</strong></td>
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<tr>
<td>Houston, TX 77030</td>
<td><strong>US Air Force Hospital (Reese)</strong></td>
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<td>Reese AFB, TX 79459</td>
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<td><strong>University of Texas Mental Sciences Institute</strong></td>
<td><strong>San Antonio</strong></td>
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<td>1200 Runnels</td>
<td><strong>Audie L Murphy Memorial Veterans Hospital (San Antonio)</strong></td>
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<tr>
<td>Houston, TX 77030</td>
<td>7400 Merton Minter Blvd</td>
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<td>Speciality: OM</td>
<td>San Antonio, TX 78284-5799</td>
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<td><strong>University of Texas School of Public Health</strong></td>
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<td>PO Box 90186</td>
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<td><strong>Veterans Affairs Medical Center (Houston)</strong></td>
<td><strong>Community Guidance Center of Bexar County</strong></td>
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<td>2602 Holcombe Blvd</td>
<td>2185 Babcock Rd</td>
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<td><strong>Lackland AFB</strong></td>
<td><strong>Nix Medical Center</strong></td>
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<td><strong>Wilford Hall USAF Medical Center (SG)</strong></td>
<td>414 Navarro St</td>
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<td>WDC/MC/T</td>
<td>San Antonio, TX 78205</td>
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<td>2300 Bergquist St, Ste 1</td>
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<td><strong>Orthopaedic Surgery and Athletic Medicine PA</strong></td>
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<td>Speciality: APM, EM, NM, PCH, TS</td>
<td>8042 Wurzbach, Ste 540</td>
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<td>Institution ID: 48-097</td>
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<td><strong>Lubbock</strong></td>
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<td><strong>St Mary of the Plains Hospital</strong></td>
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<td>4000 24th St</td>
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<td><strong>Texas Tech University Health Sciences Center at Lubbock</strong></td>
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<td>3601 - 4th Street</td>
<td><strong>San Antonio Warm Springs Rehabilitation Hospital</strong></td>
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<td><strong>University Medical Center</strong></td>
<td><strong>Santa Rosa Health Care Corporation</strong></td>
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<tr>
<td>602 Indiana Ave</td>
<td>519 W Houston St</td>
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<td>PO Box 5080</td>
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<td><strong>Odessa</strong></td>
<td><strong>Southwest Neuropsychiatric Institute</strong></td>
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<td>Medical Center Hospital</td>
<td>8535 Torn Slick Dr</td>
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<tr>
<td>PO Drawer 7239</td>
<td>San Antonio, TX 78229</td>
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<td>500 W 4th</td>
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<td>San Antonio, TX 78229</td>
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<td><strong>St Luke’s Lutheran Hospital</strong></td>
<td>Speciality: OSM</td>
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<tr>
<td>7300 Floyd Curl Dr</td>
<td>Institution ID: 48-8050</td>
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<tr>
<td>Box 20100</td>
<td><strong>University Health Center-Downtown</strong></td>
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<tr>
<td>San Antonio, TX 78229</td>
<td>University Health System Bexar Cty</td>
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<td>Med Sch Affil: L-04813</td>
<td>4502 Medical Dr</td>
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<td>Speciality: RSO, OSM</td>
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<td><strong>Olin E Tresguer Veterans Center</strong></td>
<td><strong>Orthopaedic Surgery and Athletic Medicine PA</strong></td>
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<tr>
<td>1901 S 1st St</td>
<td>8042 Wurzbach, Ste 540</td>
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<td><strong>Terrell State Hospital</strong></td>
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<td>1200 E Erin St</td>
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1600 Eighth St.
Wichita Falls, TX 76301
Med Sch Affl: G-0312
Specialty: FP
Institution ID: 49-6054

Utah
Salt Lake City
Associated Regional and University Pathologists
500 Chipeta Way
Salt Lake City, UT 84108
Specialty: PIP
Institution ID: 49-6016

Children's Center
1855 Medical Circle
Salt Lake City, UT 84112
Specialty: CHP
Institution ID: 49-6011

FHP of Utah Hospital
3450 S State
Salt Lake City, UT 84115
Specialty: PP
Institution ID: 49-6018

HCA St Mark's Hospital
1200 E 3900 S
Salt Lake City, UT 84124
Specialty: PTH
Institution ID: 49-6041

Holy Cross Hospital
1500 E South Temple
Salt Lake City, UT 84102-1569
Med Sch Affl: L-0401
Specialty: FF, GS, OBS, OTO, PS
Institution ID: 49-6049

LDS Hospital
88th Ave and C St
Salt Lake City, UT 84143-1001
Med Sch Affl: M-0401, L-02012
Specialty: CCM, GS, OBG, OBS, PTH, PUD, TS, U
Institution ID: 49-6049

Primary Children's Medical Center
150 N Medical Dr.
Salt Lake City, UT 84113-1100
Med Sch Affl: M-0401
Specialty: CCP, CHN, CHP, GS, MPD, NP, NPM, NS, OP, OBS, OTO, FDP, PHS, PS, PTH, TS, U
Institution ID: 49-6015

Shriners Hospital for Crippled Children (Intermountain Unit)
Fairfax Ave and Virginia St
Salt Lake City, UT 84103-4399
Med Sch Affl: G-0401
Specialty: OP, ORS
Institution ID: 49-6031

University Counseling Center
426 Student Services Bldg
University of Utah
Salt Lake City, UT 84112
Specialty: P
Institution ID: 49-6015

University of Utah Neuropsychiatric Institute
501 Chipeta Way
Salt Lake City, UT 84108
Med Sch Affl: L-0401
Specialty: P
Institution ID: 49-6014

University of Utah School of Medicine
50 N Medical Dr
Salt Lake City, UT 84132
Med Sch Affl: M-0401
Specialty: OM
Institution ID: 49-6051

Valley Mental Health
586 S 900 E, Ste 420
Salt Lake City, UT 84121
Specialty: CHP, P
Institution ID: 49-6014

Veterans Affairs Medical Center (Salt Lake City)
550 Foothill Dr
Salt Lake City, UT 84148-0001
Med Sch Affl: M-0401
Specialty: CD, D, DVS, END, GE, GS, HEM, ID, IM, IMG, MPD, N, NIP, NP, NR, NS, ON, OPH, OMS, OOS, OTO, P, PIP, PM, PS, PTH, PUD, RHG, SNS, TS, U, VIR
Institution ID: 49-6051

Vermont
Brattleboro
Brattleboro Retreat
75 Linden St
Brattleboro, VT 05301
Med Sch Affl: M-60281
Specialty: CHP
Institution ID: 50-7002

Colchester
Fanny Allen Hospital
101 College Pkwy
Colchester, VT 05446
Med Sch Affl: L-60002
Specialty: U
Institution ID: 50-4045

White River Junction
Veterans Affairs Medical Center (White River Junction)
1 N Hartland Rd
White River Junction, VT 05009
Med Sch Affl: L-02012
Specialty: D, ENO, GE, GS, HO, ID, IM, IMG, MP, N, OBS, P, PDC, PS, PTH, RHG, U, VS
Institution ID: 50-0240

Virginia
Alexandria
Alexandria Hospital
4039 Seminary Rd
Alexandria, VA 22304
Med Sch Affl: L-02012, G-01001
Specialty: EM
Institution ID: 51-6041

Mount Vernon Hospital
2501 Parker's Ln
Alexandria, VA 22306
Specialty: PM
Institution ID: 51-6015

Arlington
Arlington Hospital
1701 N George Mason Dr
Arlington, VA 22205-5989
Med Sch Affl: M-01005, L-02113
Specialty: SS, NTO, OBS, ORS
Institution ID: 51-6001

Nirschl Orthopedic Clinic
1715 N George Mason Dr Ste 504
Arlington, VA 22205
Specialty: OSM
Institution ID: 51-6023

Blackstone
Blackstone Family Practice Center
820 S Main St
Blackstone, VA 23814
Specialty: FP
Institution ID: 51-6001

Charlottesville
University of Virginia Medical Center
McKinnon Hall Rd 1044
Jefferson Park Ave
Charlottesville, VA 22908
Med Sch Affl: M-05101
Specialty: CD, ID, OBG, PUD
Institution ID: 51-0124

Danville
Danville Regional Medical Center
142 S Main St
Danville, VA 24541
Med Sch Affl: L-05901
Specialty: U
Institution ID: 51-0185

Fairfax
American Medical Laboratories
11091 Main St
Fairfax, VA 22030-0188
Specialty: PTH
Institution ID: 51-0922

Falls Church
Fairfax Hospital
3200 Gallows Rd
Falls Church, VA 22046
Med Sch Affl: M-01005, L-02312, L-01001, G-01004, G-01003
Specialty: AP, CCM, COM, GS, OBG, OBS, P, POC, PD, PS
Institution ID: 51-0492

Hampton
Veterans Affairs Medical Center (Hampton)
Hampton, VA 23667
Med Sch Affl: M-05107
Specialty: D, GS, IM, N, OPH, P, PM, PTH, U
Institution ID: 51-0908

Newport News
Riverside Regional Medical Center
500 J Cople Morris Blvd
Newport News, VA 23601-1975
Med Sch Affl: L-05107, G-05104, G-02312
Specialty: FP
Institution ID: 51-0108
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Veterans Affairs Medical Center (Seattle)  
1660 S Columbian Way  
Seattle, WA 98108  
Med Sch Aff: M:05404  
Specialty: APM, CD, DR, END, GS, IM, IMG, N, NEP, NM, NS, OPH, ORS, OTO, P, PM, PS, PTH, RHU, RN, TS, U, VIB, VS  
Institution ID: 54-0362  
Virginia Mason Medical Center  
Housenstaff Affairs (HT-MED)  
925 Seneca St  
Seattle, WA 98101  
Med Sch Aff: L:05404  
Specialty: AI, U  
Institution ID: 54-0364  
Spokane  
Deaconess Medical Center  
800 W Fifth Ave  
PO Box 248  
Spokane, WA 99203-0048  
Med Sch Aff: L:05404  
Specialty: FP, IM  
Institution ID: 54-0392  
Sacred Heart Medical Center  
101 W 8th Ave  
PO Box 2855  
Spokane, WA 99209-0555  
Med Sch Aff: M:05404  
Specialty: FP, P  
Institution ID: 54-0402  
Shriners Hospitals for Crippled Children (Spokane)  
PO Box 2472  
Spokane, WA 99209-2472  
Specialty: ORS  
Institution ID: 54-0418  
Tacoma  
Mary Bridge Children's Hospital and Health Center  
311 S St.  
PO Box 5290  
Tacoma, WA 98405  
Med Sch Aff: M:05404  
Specialty: FP  
Institution ID: 54-0418  
Veterans Affairs Medical Center (Tacoma)  
American Lake VAMC  
Tacoma, WA 98403  
Specialty: IMG  
Institution ID: 54-0500  
Yakima  
St Elizabeth Medical Center  
110 S Ninth Ave  
Yakima, WA 98902  
Specialty: FP  
Institution ID: 54-0500  
West Virginia  
Charleston  
Charleston Area Medical Center  
PO Box 1547  
Charleston, WV 25323-1547  
Med Sch Aff: M:05501  
Specialty: CD, D, P, PTH, PYN  
Institution ID: 55-0369  
Kanawha-Charleston Health Department  
108 Lee St E  
PO Box 827  
Charleston, WV 25323  
Specialty: OM  
Institution ID: 55-0361  
Clarksburg  
Louis A Johnson Veterans Affairs Medical Center  
One Medical Center Drive  
Clarksburg, WV 26301-4199  
Med Sch Aff: L:05501  
Specialty: GS, OPH, OTO, U  
Institution ID: 55-0749  
Huntington  
Cabell Huntington Hospital  
1440 Hal Greer Blvd  
Huntington, WV 25701-0105  
Med Sch Aff: M:05602  
Specialty: CD, END, GS, ID, IM, IMG, OBG, PD, PTH, PUD, TY  
Institution ID: 55-0179  
St Mary's Hospital  
2800 First Ave  
Huntington, WV 25703-1217  
Med Sch Aff: M:05602  
Specialty: CD, END, GS, ID, IM, IMG, MFDP, PTH, PUD, TY  
Institution ID: 55-0200  
Veterans Affairs Medical Center (Huntington)  
1540 Spring Valley Dr  
Huntington, WV 25704-0000  
Med Sch Aff: M:06002  
Specialty: CD, END, GS, ID, IM, IMG, MFDP, PTH, PUD, TY  
Institution ID: 55-0742  
Martinsburg  
Veterans Affairs Medical Center (Martinsburg)  
Charles Town Rd  
Martinsburg, WV 25401-0206  
Med Sch Aff: M:05601  
Specialty: OPH  
Institution ID: 55-0210  
Morgantown  
Monongalia General Hospital  
1000 J D Anderson Dr  
Morgantown, WV 26506  
Med Sch Aff: L:05601  
Specialty: ORS, TS  
Institution ID: 55-0745  
West Virginia University Hospitals  
PO Box 8006  
Morgantown, WV 26506-8006  
Med Sch Aff: M:05601  
Specialty: OM, TS  
Institution ID: 55-0426  
Wheeling  
Ohio Valley Medical Center  
2000 Eoff St  
Wheeling, WV 26003  
Med Sch Aff: L:05601  
Specialty: U  
Institution ID: 55-0425  
Wisconsin  
Appleton  
St Elizabeth Hospital  
1506 S Orenada St  
Appleton, WI 54915-1397  
Med Sch Aff: G:05606  
Specialty: FP  
Institution ID: 56-07001  
Eau Claire  
Sacred Heart Hospital  
900 W Chalmers Ave  
Eau Claire, WI 54701  
Med Sch Aff: G:05606  
Specialty: FP  
Institution ID: 56-07176  
Madison  
American Red Cross Blood Services  
Badger-Hawkeye Region  
4860 Sheboygan Ave  
PO Box 5196  
Madison, WI 53705-0005  
Specialty: Bnk  
Institution ID: 56-08173  
HCA Parkway Hospital  
6901 Research Park Blvd  
Madison, WI 53711  
Specialty: CHP  
Institution ID: 56-0819  
Mendota Mental Health Institute  
201 Troy Dr  
Madison, WI 53704-1699  
Med Sch Aff: G:06005  
Specialty: CHP  
Institution ID: 56-0819  
Meriter Hospital  
202 South Park St  
Madison, WI 53715-1599  
Med Sch Aff: M:06006  
Specialty: CHN, NS, OBG, ORS, OTO, P, PD, PS, PTH, U  
Institution ID: 56-0818  
St Marys Hospital Medical Center  
707 S Milw St  
Madison, WI 53715-0450  
Med Sch Aff: L:05605  
Specialty: ORS, ORS, PS, TS, U  
Institution ID: 56-0819  
University of Wisconsin Hospital and Clinics  
260 Highland Ave H4821  
Madison, WI 53792-3510  
Med Sch Aff: M:06005  
Specialty: P  
Institution ID: 56-0819  
William S Middleton Veterans Hospital  
Attn: Chief of Staff  
2500 Overlook Terrace  
Madison, WI 53705  
Med Sch Aff: M:05606  
Specialty: AI, A, A, CCA, CD, D, DR, END, GR, GS, HEM, ID, IM, IMG, N, NEP, NM, NS, ON, OPH, ORS, OTO, P, FCC, PTH, RHU, TS, U, VIB  
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Graduate Medical Education Directory
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<td>Marshfield Clinic-St Joseph's Hospital</td>
<td>1000 N Oak Ave</td>
<td>Marshfield, WI 54449-5777</td>
<td>M-05605</td>
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<td>Blood Center of Southeastern Wisconsin</td>
<td>1791 W Wisconsin Ave</td>
<td>Milwaukee, WI 53201</td>
<td>G-05606</td>
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<td>Children's Hospital of Wisconsin</td>
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<td>Milwaukee, WI 53226</td>
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<td>Froedtert Memorial Lutheran Hospital</td>
<td>9200 W Wisconsin Ave</td>
<td>Milwaukee, WI 53226</td>
<td>M-05606</td>
<td>CCH, CCM, CCS, CHN, D, DR, END, GS, HEM, ID, IM, MD, N, NEP, NM, NS, ON, OPH, ONS, OTO, P, FS, PTH, PUD, RNU, RO, TS, U, VIR</td>
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<td>John Doyne Hospital</td>
<td>8701 W Watertown Plank Rd</td>
<td>Milwaukee, WI 53225</td>
<td>M-05605</td>
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<td>56-0144</td>
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<td>Medical College of Wisconsin</td>
<td>8701 W Watertown Plank Rd</td>
<td>Milwaukee, WI 53226</td>
<td>M-05606</td>
<td>GPM, OM</td>
<td>56-0461</td>
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<td>Milwaukee County Mental Health Complex</td>
<td>9455 Watertown Plank Rd</td>
<td>Milwaukee, WI 53226-3559</td>
<td>M-05606</td>
<td>P</td>
<td>56-0461</td>
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<tr>
<td>St Joseph's Hospital</td>
<td>5000 W Chambers St</td>
<td>Milwaukee, WI 53210</td>
<td>G-05605</td>
<td>GE</td>
<td>56-0370</td>
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<tr>
<td>St Luke's Medical Center</td>
<td>PO Box 2901</td>
<td>Milwaukee, WI 53201-2901</td>
<td>G-05606</td>
<td>CCM, PM</td>
<td>56-0383</td>
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<td>St Mary's Hospital of Milwaukee</td>
<td>2323 N Lake Dr</td>
<td>Milwaukee, WI 53211</td>
<td>G-05606</td>
<td>FP</td>
<td>56-0140</td>
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<tr>
<td>St Michael Hospital</td>
<td>2400 W Villard Ave</td>
<td>Milwaukee, WI 53208</td>
<td>G-05606</td>
<td>FP</td>
<td>56-0140</td>
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<tr>
<td>Oshkosh</td>
<td>Mercy Medical Center of Oshkosh</td>
<td>PO Box 1100</td>
<td>G-05606</td>
<td>P</td>
<td>56-0140</td>
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<tr>
<td>Wauwatosa</td>
<td>Milwaukee Psychiatric Hospital-Dewey Center</td>
<td>1220 Dewey Ave</td>
<td>M-05606</td>
<td>CHP</td>
<td>56-0400</td>
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</table>
Appendix A
Combined Specialty Programs

Combined specialty programs have been approved by each respective specialty board; resident physicians completing the program are accepted for board certification. Neither the Accreditation Council for Graduate Medical Education (ACGME) nor the Residency Review Committees accredit combined programs; they accredit each specialty program separately. Information in the combined program list was provided by specialty boards. Requests for information about the guidelines for these programs should be directed to the specialty boards at the address listed in Appendix B. Applicants to combined specialty programs are encouraged to review requirements for admission to the certification process of each board in Appendix B of this directory.

Internal Medicine/Emergency Medicine
The American Board of Internal Medicine and the American Board of Emergency Medicine offer dual certification for candidates who have completed at least 2 and a half years of suitable accredited training in each specialty. A combined residency consists of 5 years of balanced education in the two disciplines. It is strongly recommended that the participating residencies be in the same academic health center.

To meet eligibility for dual certification, the resident must satisfactorily complete 60 months of combined education, which must be verified by the directors of both programs. The certifying examinations cannot be taken until all 5 years are satisfactorily completed.

Internal Medicine/Neurology
The American Board of Internal Medicine and the American Board of Psychiatry and Neurology offer dual certification for candidates who have completed 5 years of combined training suitable to both boards. A combined residency in internal medicine and neurology must include at least 5 years of coherent education integral to residencies in the two disciplines. It is strongly recommended that the participating residencies be in the same institution.

To meet eligibility for dual certification, the resident must satisfactorily complete 60 months of training, which must be verified by the directors of both programs. The written certifying examinations cannot be taken until all required years in both specialties are satisfactorily completed.

Internal Medicine/Pediatrics
The American Board of Internal Medicine and the American Board of Pediatrics offer dual certification in internal medicine and pediatrics. A combined residency must include at least 2 years in each specialty, for a total of 4 years of coherent training integral to residencies in the two disciplines. The participating residencies should be in the same academic health center. Continuity clinics in each specialty should be provided throughout the 4 years.

To meet eligibility requirements for dual certification, the resident must satisfactorily complete 48 months of combined education, and clinical competence in both specialties must be verified by the directors of both programs. The certifying examinations cannot be taken until all required years in both specialties are satisfactorily completed.

Internal Medicine/Physical Medicine and Rehabilitation
The American Board of Internal Medicine and the American Board of Physical Medicine and Rehabilitation offer dual certification for candidates who have completed at least 2 and a half years of suitable accredited training in each specialty. A combined residency must include at least 5 years of coherent training integral to resi-
encies in the two disciplines. It is strongly recommended that the participating residencies be in the same institution.

To meet eligibility requirements for dual certification, the resident must satisfactorily complete 60 months of combined education, which must be verified by the directors of both programs. The written certifying examinations cannot be taken until required training in a specialty has been satisfactorily completed. The certifying examination in internal medicine cannot be taken prior to the fall of the fifth year in the combined program.

Internal Medicine/Psychiatry

The American Board of Internal Medicine and the American Board of Psychiatry and Neurology offer dual certification in internal medicine and psychiatry. A combined residency must include at least 5 years of coherent education integral to residencies in the two disciplines. Participating residencies must be in the same institution.

To meet eligibility requirements for dual certification, the resident must satisfactorily complete 60 months of combined education, which must be verified by the directors of both programs. The written certifying examinations cannot be taken until all required years in both specialties are satisfactorily completed.

Neurology/Physical Medicine and Rehabilitation

The American Board of Psychiatry and Neurology and the American Board of Physical Medicine and Rehabilitation offer dual certification in neurology and physical medicine and rehabilitation. A combined residency must include 5 years of combined education. This combined training must follow a year in a residency program that meets the requirements for neurology and should be completed in the same institution. All required years in both specialties must be satisfactorily completed prior to admission to the certifying examinations of each board.

Pediatrics/Emergency Medicine

The American Board of Pediatrics and the American Board of Emergency Medicine offer dual certification for candidates who fulfill the requirements of both boards by completing joint training in 5 years. All 5 years should be completed in the same combined program; exceptions must be approved in advance by both boards. Applicants may not take the certifying examinations until all required years in both specialties have been completed.

Pediatrics/Physical Medicine and Rehabilitation

The American Board of Pediatrics and the American Board of Physical Medicine and Rehabilitation permit applicants interested in pediatric rehabilitation to qualify for admission to the certifying examinations of both boards by completing a 5-year combined program. All 5 years should be completed at one academic institution; exceptions must be approved in advance by both boards.

Applicants may not take the certifying examinations until all required years in both specialties have been completed.

Pediatrics/Psychiatry/Child and Adolescent Psychiatry

The American Board of Pediatrics, the American Board of Psychiatry and Neurology, Inc., and the Committee on Certification in Child and Adolescent Psychiatry have developed a committee that is overseeing training via a different format. This is a five year curriculum with 24 months of pediatrics, 18 months of adult psychiatry, and 18 months of child and adolescent psychiatry. Completion of the program will satisfy the training requirement for certification in all three areas. Applicants pursuing training in these programs may not take the certifying examinations until all training has been completed. Credit for training via this route may be obtained only by training in one of these programs.

Psychiatry/Neurology

The American Board of Psychiatry and Neurology has established guidelines for combined training in Psychiatry and Neurology. A combined residency must include postgraduate year one (PGY1) training that is acceptable to neurology plus a minimum of 5 years of combined residency training. The five years of residency training are usually taken at one approved institution but may be taken at no more than two approved institutions.

Surgery/Plastic Surgery

Combined specialty programs in general surgery and plastic surgery operate in an integrated format whereby residents are matched directly into plastic surgery out of medical school; some plastic surgery rotations may be included during the first 3 years of general surgery. Upon completion of the combined program, physicians are eligible for certification by the American Board of Plastic Surgery.
Internal Medicine/Emergency Medicine

Delaware

Wilmington

The Medical Center of Delaware Program
The Medical Center of Delaware

Program Director:
Charles L Reese IV, MD
Medical Center of Delaware
Wilmington Hospital
Box 1068
Wilmington, DE 19899
222-428-2172

Length: 5 Year(s)  Total Positions: 8  (GYI: 2)
Program ID: 805-49-44-019

Illinois

Chicago

University of Illinois College of Medicine at Chicago Program*
University of Illinois College of Medicine at Chicago

Program Director:
Craig A Rosenberg, MD
Ste 1600
MC 722
1740 W Taylor St
Chicago, IL 60612
312-996-4160

Length: 5 Year(s)  Total Positions: 2  (GYI: 2)
Program ID: 805-16-44-012

Indiana

Indianapolis

Methodist Hospital of Indiana Program (Not recruiting for 1995)
Methodist Hospital of Indiana

Program Director:
Carey D Chisholm, MD
Richard W Campbell, MD
Methodist Hospital of Indiana
Emergency Medicine and Trauma Ctr
1701 N Senate Blvd
Indianapolis, IN 46252
317-929-3650

Length: 5 Year(s)  Total Positions: 3  (GYI: 0)
Program ID: 805-17-44-007

Louisiana

New Orleans

Louisiana State University Medical Center Program*
Louisiana State University School of Medicine
Medical Center of Louisiana at New Orleans LSU Division
Medical Center of Louisiana University Hospital Campus

Program Director:
Steven Weiss, MD
Charles W Hinton, MD
Louisiana State University Medical Center
1541 Tulane Ave
New Orleans, LA 70112-2822

Length: 5 Year(s)
Program ID: 805-21-44-015

Maryland

Baltimore

University of Maryland Program*
University of Maryland Medical System
Mercy Medical Center

Program Director:
Jonathan Oshaker, MD
University of Maryland School of Medicine
22 S Greene St Rm N3E10
Baltimore, MD 21201-1096

Length: 5 Year(s)
Program ID: 805-23-44-014

Michigan

Detroit

Henry Ford Hospital Program
Henry Ford Hospital

Program Director:
Bruce M Thompson, MD
Internal Medicine/Emergency Medicine
Henry Ford Hospital
2766 W Grand Blvd
Detroit, MI 48202
313-876-1052

Length: 5 Year(s)  Total Positions: 10  (GYI: 2)
Program ID: 805-25-44-009

Wayne State University Program
Wayne State University School of Medicine
Detroit Receiving Hospital and University Health Center
Harper Hospital

Program Director:
Brooks D Hock, MD
Detroit Receiving Hospital
University Health Center
4201 St Antoine
Detroit, MI 48201-2194
313-745-2030

Length: 5 Year(s)  Total Positions: 8  (GYI: 2)
Program ID: 805-25-44-004

New York

New Hyde Park

Albert Einstein College of Medicine at Long Island Jewish Medical Center Program
Long Island Jewish Medical Center

Program Director:
Ronnie Alejandron, MD
Joseph LaMantia, MD
Long Island Jewish Medical Center
270-05 76th Ave
New Hyde Park, NY 11042
718-470-7541

Length: 5 Year(s)  Total Positions: 10  (GYI: 2)
Program ID: 805-35-44-011

New York

Beth Israel Medical Center Program
Beth Israel Medical Center
Mount Sinai Medical Center

Program Director:
Adrienne M Fleckman, MD
Kai M Stummann, MD
Beth Israel Medical Center
Dept of Medicine
First Ave at 16th St
New York, NY 10065
212-496-4012

Length: 5 Year(s)  Total Positions: 10  (GYI: 2)
Program ID: 805-36-44-003

Pennsylvania

Pittsburgh

Allegheny General Hospital/Medical College of Pennsylvania Program
Allegheny General Hospital

Program Director:
Marcus L Martin, MD
Mary Louise Kundrat, MD
Dept of Emergency Medicine
Allegheny General Hospital
320 E North Ave
Pittsburgh, PA 15212-9866
412-659-4005

Length: 5 Year(s)  Total Positions: 10  (GYI: 2)
Program ID: 805-41-44-006

* Updated information not provided.
Combined Specialty Programs in Internal Medicine/Neurology

**Internal Medicine/Neurology**

**California**

**Los Angeles**
University of Southern California School of Medicine Program*  
Los Angeles County-USC Medical Center  
Program Director:  
Leslie P. Weiner, MD  
Richard L. Tanner, MD  
University of Southern California School of Medicine  
1010 San Pablo St Ste 646  
Los Angeles, CA 90033  
Length: 5 Year(s)  
Program ID: 845-05-44-006

**Stony Brook**  
SUNY at Stony Brook Program*  
University Hospital-SUNY at Stony Brook Veterans Affairs Medical Center (Northport)  
Program Director:  
Douglas L. Brand, MD  
James N. Doria, MD  
SUNY at Stony Brook School of Medicine  
Health Science Center  
Stony Brook, NY 11794-8121  
516 444-4650  
Length: 5 Year(s)  
Program ID: 845-35-44-004

**North Carolina**

**Durham**
Duke University Program  
Duke University Medical Center  
Veterans Affairs Medical Center (Durham)  
Program Director:  
Joel C. Morganstern, MD  
Ralph Corey MD  
Duke University Medical Center  
Department of Neurology  
PO Box 3394  
Durham, NC 27710  
919-684-6017  
Length: 5 Year(s)  
Total Positions: 2 (GYI: 2)  
Program ID: 845-88-44-008

**Louisiana**

**New Orleans**
Tulane University Medical Center Program*  
Tulane University School of Medicine  
Medical Center of Louisiana at New Orleans-Tulane Division  
Tulane University Hospital and Clinics  
Veterans Affairs Medical Center-Tulane Service (New Orleans)  
Program Director:  
William G. Steinmann, MD  
Dobbs G. Elliot, MD  
Tulane University Med Ctr  
Dept of Med S/L16  
1430 Tulane Ave  
New Orleans, LA 70112-3699  
Length: 5 Year(s)  
Program ID: 845-21-44-005

**New York**

**Buffalo**
SUNY at Buffalo Graduate Medical-Dental Education Consortium Program*  
Erie County Medical Center  
Buffalo General Hospital  
Program Director:  
Michael E Cohen, MD  
James P Nolan, MD  
State University of New York at Buffalo School of Medicine  
219 Bryant St  
Buffalo, NY 14222  
716 898-4814  
Length: 5 Year(s)  
Program ID: 845-05-44-001

**Morgantown**
West Virginia University School of Medicine Program  
West Virginia University Hospitals  
Program Director:  
Russell A. Kahlke, MD  
Ludwig Gutmann, MD  
West Virginia University School of Medicine  
Health Sciences Center North  
Department of Medicine  
Morgantown, WV 26506-9168  
304 293-4123  
Length: 5 Year(s)  
Total Positions: 1 (GYI: 1)  
Program ID: 845-65-44-002

**Arkansas**

**Little Rock**
University of Arkansas for Medical Sciences Program  
University Hospital of Arkansas  
Arkansas Children's Hospital  
John L. McClellan Memorial Veterans Hospital  
Program Director:  
Robert W. Bradley Jr, MD  
Robert H. Pifer, MD  
University of Arkansas for Medical Sciences  
4501 W Markham  
Little Rock, AR 72205-7189  
501 588-5102  
Length: 4 Year(s)  
Total Positions: 16 (GYI: 3)  
Program ID: 840-64-44-002

* Updated information not provided.
Combined Specialty Programs in Internal Medicine/Pediatrics

California

Loma Linda

Loma Linda University Program
Loma Linda University Medical Center
Jerry L. Pettis Memorial Veterans Hospital
Loma Linda University Community Hospital
Riverside General Hospital-University Medical Center
Program Director:
Roy V. Jutze, MD
Richard Chinnock, MD
Loma Linda University Medical Center
Int Med/Ped/Comb. Medical Program
PO Box 2090
Loma Linda, CA 92354
909 824-4636
Length: 4 Year(s) Total Positions: 8 (GYI: 2)
Program ID: 800-06-44-003

Los Angeles

Cedars-Sinai Medical Center Program
Cedars-Sinai Medical Center
Program Director:
Lee T. Miller, MD
Cedars-Sinai Medical Center Program
Medicine/Pediatrics Combined Fgn
8700 Beverly Blvd Rm 4310
Los Angeles, CA 90048-5689
310 855-4467
Length: 4 Year(s) Total Positions: 11 (GYI: 4)
Program ID: 800-06-44-004

Los Angeles County-USC Medical Center Program
Los Angeles County-USC Medical Center
Program Director:
Lawrence M. Opas, MD
LaVerne Leichtman, MD
Los Angeles County-USC Medical Center
Women's & Children's Hospital
1340 N Mission Rd Rm L-016
Los Angeles, CA 90033-1084
213 226-3901
Length: 4 Year(s) Total Positions: 32 (GYI: 6)
Program ID: 800-06-44-005

San Diego

University of California (San Diego) Medical Center Program
University of California (San Diego) Medical Center
Program Director:
Richard E. Bender, MD
Shawn Harrity, MD
USCD Medical Center
Dept of Pediatrics
300 W Arbor Dr
San Diego, CA 92165-4454
619 543-5981
Total Positions: 1 (GYI: 3)
Program ID: 800-06-44-009

University of California (San Diego) Program
University of California (San Diego) Medical Center
Program Director:
Shawn Harrity, MD
Sheehyn Smith, MD
200 W Arbor Dr
San Diego, CA 92183
Length: 4 Year(s)
Program ID: 800-06-44-100

Connecticut

Bridgeport

Yale University (Bridgeport) Program
Bridgeport Hospital
Program Director:
Michael J. Smith, MD
Bridgeport Hospital
267 Grant St
Bridgeport, CT 06610-2870
203 334-8465
Length: 4 Year(s) Total Positions: 16 (GYI: 4)
Program ID: 800-06-44-006

Delaware

Wilmington

The Medical Center of Delaware Program
Program Director:
Louis E. Bartonhersky, MD MPH
Virginia U. Collier, MD
The Medical Center of Delaware
Dept of Pediatrics
PO Box 6001
Newark, DE 19714
302 732-4711
Length: 4 Year(s) Total Positions: 8 (GYI: 2)
Program ID: 800-09-44-009

Florida

Gainesville

University of Florida Program*
(University of Florida College of Medicine)
Shands Hospital at the University of Florida
Program Director:
Craig S. Kitchens, MD
Joel M. Andrea, MD
Univ of Florida Health Science Center
Dept of Medicine
PO Box 100277
Gainesville, FL 32610-0277
Length: 4 Year(s)
Program ID: 800-11-44-107

Miami

University of Miami-Jackson Memorial Medical Center Program
University of Miami-Jackson Memorial Medical Center
Veterans Affairs Medical Center (Miami)
Program Director:
Mark A Galbreath, MD
R Rodney Howell, MD
Jackson Memorial Hospital Dept of Internal Medicine
1611 NW 12th Ave
Miami, FL 33136
305 566-6228
Length: 4 Year(s) Total Positions: 12 (GYI: 4)
Program ID: 800-11-44-596

Illinois

Chicago

Cook County Hospital Program*
Cook County Hospital
Program Director:
Maurice Lemoin, MD
Phillip Ziring, MD
Cook County Hospital
1955 W Harrison St
Chicago, IL 60612
312 633-6702
Length: 4 Year(s) Total Positions: 142 (GYI: 63)
Program ID: 800-16-44-011

Rush-Presbyterian-St Luke's Medical Center Program*
Rush-Presbyterian-St Luke's Medical Center
Program Director:
Richard Abrams, MD
Samuel Gofil, MD
Dept of Internal Medicine
Rush-Presbyterian-St Luke's Med Ctr
1653 W Congress Pkwy
Chicago, IL 60612-3833
Length: 4 Year(s)
Program ID: 800-10-44-103

University of Chicago Program
University of Chicago Hospitals
Mercy Hospital and Medical Center
Walter Reed Children's Hospital at the University of Chicago
Program Director:
Eva Waite, MD
University of Chicago Hospitals and Clinics
5841 S Maryland, MC1057
Chicago, IL 60637-1470
312 702-4902
Length: 4 Year(s) Total Positions: 8 (GYI: 2)
Program ID: 800-16-44-012

University of Illinois Program*
University of Illinois College of Medicine at Chicago
Michael Reese Hospital and Medical Center
University of Illinois Hospital and Clinics
Veterans Affairs Westside Medical Center (Chicago)
Program Director:
Gail D. Williamson, MD
University of Illinois Medical Center
840 S Wood St, M/4 787
Chicago, IL 60612
312 996-7704
Length: 4 Year(s) Total Positions: 11 (GYI: 4)
Program ID: 800-16-44-013

Maywood

Loyola University Program
Loyola University Chicago Medical Center
Program Director:
Robert C. Lichtenberg, MD
Marion B. Brooks, MD
Loyola University Chicago Medical Center
3140 S First Ave
Maywood, IL 60153
708 216-5838
Length: 4 Year(s) Total Positions: 15 (GYI: 4)
Program ID: 800-16-44-014

* Updated information not provided.
Combined Specialty Programs in Internal Medicine/Pediatrics

Peoria
University of Illinois College of Medicine at Peoria Program
St Francis Medical Center
Program Director:
Richard L. Hornbacher, MD
University of Illinois College of Medicine at Peoria
Saint Francis Medical Center
530 NE Glen Oak
Peoria, IL 61605
800-589-7307
Length: 4 Year(s) Total Positions: 11 (GYT: 6)
Program ID: 800-16-44-015

Springfield
Southern Illinois University Program
Southern Illinois University School of Medicine
Memorial Medical Center
St John's Hospital
Program Director:
David E Steward, MD
Randy A Kienstra, MD
Southern Illinois University School of Medicine
PO Box 16230
Springfield, IL 62794-9230
217-782-0193
Length: 4 Year(s) Total Positions: 10 (GYT: 4)
Program ID: 800-16-44-016

Indiana
Indianapolis
Indiana University Medical Center Program
Indiana University Medical Center
Richard L. Roudebush Veterans Affairs Medical Center
William N Wishard Memorial Hospital
Program Director:
Richard L. Schreiner, MD
D Craig Brater, MD
Riley Hospital for Children
702 Barnhill Dr, RM 5600
Indianapolis, IN 46202-5625
317-274-7810
Length: 4 Year(s) Total Positions: 12 (GYT: 10)
Program ID: 800-16-44-018

Methodist Hospital of Indiana Program
Methodist Hospital of Indiana
Program Director:
Richard W Campbell, MD
Charlene E Graves, MD
Methodist Hospital of Indiana
165 21st St
PO Box 1367
Indianapolis, IN 46206-1367
317-938-8506
Length: 4 Year(s) Total Positions: 8 (GYT: 3)
Program ID: 800-17-44-017

Kansas
Kansas City
University of Kansas Medical Center Program
University of Kansas School of Medicine
University of Kansas Medical Center
Program Director:
Norton J Greenberger, MD
Trihuvan S Vyas, MD
University of Kansas Medical Center
Department of Medicine
5801 Rainbow Blvd
Kansas City, KS 66160-7259
913-384-9200
Length: 4 Year(s) Total Positions: 12 (GYT: 6)
Program ID: 800-19-44-087

Kentucky
Lexington
University of Kentucky Medical Center Program
University of Kentucky Medical Center
Veterans Affairs Medical Center (Lexington)
Program Director:
Robert Broughton, MD
Robert W Lightfoot Jr, MD
University of Kentucky Medical Center
Kentucky Clinic Med/Peds Program
Office of Education: J511
Lexington, KY 40506-0254
606-255-1003
Length: 4 Year(s) Total Positions: 18 (GYT: 6)
Program ID: 800-29-44-019

Louisville
University of Louisville Program
University of Louisville School of Medicine
Rosary Children's Hospital (Alliant Health System)
University of Louisville Hospital
Veterans Affairs Medical Center (Louisville)
Program Director:
Charlene K Mitchell, MD
University of Louisville
School of Medicine
Dept of Medicine
Louisville, KY 40292
502-852-7832
Length: 4 Year(s) Total Positions: 16 (GYT: 4)
Program ID: 800-29-44-020

Louisiana
New Orleans
Louisiana State University Program
Louisiana State University School of Medicine
Childrens Hospital Medical Center of Louisiana at New Orleans LSU Division
Program Director:
Charles Hilton, MD
LSU School of Medicine
1542 Tulane Ave
New Orleans, LA 70112
504-588-4600
Length: 4 Year(s) Total Positions: 37 (GYT: 13)
Program ID: 800-31-44-022

Tulane University Program
Tulane University School of Medicine
Medical Center of Louisiana at New Orleans
Veterans Affairs Medical Center-Tulane Service (New Orleans)
Program Director:
John E Lewy, MD
Tulane University School of Medicine
1400 Tulane Ave
New Orleans, LA 70112-2699
504-588-6416
Length: 4 Year(s) Total Positions: 16 (GYT: 4)
Program ID: 800-31-44-023

Shreveport
Louisiana State University (Shreveport) Program
Louisiana State University Medical Center-Shreveport
Program Director:
Joseph A Bocchial Jr, MD
Louisiana State University Med Ctr
PO Box 33802
Shreveport, LA 71130-3832
Total Positions: 1 (GYT: 1)
Program ID: 800-31-44-111

Maryland
Baltimore
University of Maryland Program
University of Maryland Medical System
Program Director:
Susan D Wolfish, MD
Carol Carracce, MD
University of Maryland Dept of Medicine
22 S Greene St, RM N3809
Baltimore, MD 21201-1605
410-328-2368
Length: 4 Year(s) Total Positions: 4 (GYT: 2)
Program ID: 800-29-44-095

Massachusetts
Boston
Brigham and Women's Hospital Program*
Brigham and Women's Hospital
Brockton-West Roxbury Veterans Affairs Medical Center
Program Director:
Marshall A Wolf, MD
David Nathan, MD
Brigham and Women's Hospital
75 Francis St
Boston, MA 02115
Length: 4 Year(s)
Program ID: 800-24-44-106

Massachusetts General Hospital Program*
Massachusetts General Hospital
Program Director:
Laurence J Ronan, MD
Massachusetts General Hospital
Children's Service
Pratt St
Boston, MA 02114
617-739-3900
Length: 4 Year(s)
Program ID: 800-24-44-084

*Updated information not provided.
Combined Specialty Programs in Internal Medicine/Pediatrics

Springfield
Baystate Medical Center Program
Baystate Medical Center
Program Director:
Samuel H Borden, MD
Baystate Medical Center
758 Chestnut St
Springfield, MA 01199
910 659-4235
Length: 4 Year(s) Total Positions: 28 (GYI: 8)
Program ID: 800-35-44-024

Michigan
Ann Arbor
University of Michigan Program 1
University of Michigan Hospitals - Veteran Affairs Medical Center (Ann Arbor)
Program Director:
Tatjana Yamada, MD
University Hospital
3101 Taubman Ctr, Box 0066
1500 E Medical Center Dr
Ann Arbor, MI 48109-0066
313 853-4105
Length: 4 Year(s) Total Positions: 15 (GYI: 4)
Program ID: 800-25-44-025

University of Michigan Program 2
University of Michigan Hospitals - St Joseph Mercy Hospital
Program Director:
Trung B Cui, MD
Eastern Michigan University
1815 W Huron Rd, Box 2118
Ann Arbor, MI 48109-2118
313 764-8888
Length: 4 Year(s) Total Positions: 8 (GYI: 3)
Program ID: 800-25-44-026

Detroit
St John Hospital and Medical Center Program
St John Hospital and Medical Center
Program Director:
Thomas S Piazza, MD
St John Hospital and Medical Center
3625 John R St
Detroit, MI 48201
313 445-3630
Length: 4 Year(s) Total Positions: 8 (GYI: 2)
Program ID: 800-25-44-029

Wayne State University Program
Children's Hospital of Michigan
Detroit Receiving Hospital and University Health Center
Grace Hospital
Hutzel Hospital
Veterans Affairs Medical Center (Allen Park)
Program Director:
Howard Schuhpler, MD
Wayne State University Hospitals
4800 St Antoine
UHC 5C
Detroit, MI 48201-2196
313 879-5026
Length: 4 Year(s) Total Positions: 7 (GYI: 7)
Program ID: 800-25-44-030

East Lansing
Michigan State University Program
Michigan State University - College of Human Medicine
Michigan State University - University Health Center
Sparrow Hospital
St Lawrence Hospital and HealthCare Services
Program Director:
Patrick C Alperts, MD
500 Clinical Center
Michigan State University
East Lansing, MI 48824-1915
517 353-5100
Length: 4 Year(s) Total Positions: 8 (GYI: 5)
Program ID: 800-25-44-038

Flint
Hurley Medical Center Program
Hurley Medical Center
Program Director:
Merrill A Switzer, MD
1000 University Blvd
Flint, MI 48502-5099
810 266-3250
Length: 4 Year(s) Total Positions: 15 (GYI: 4)
Program ID: 800-25-44-030

Grand Rapids
Butterworth Hospital/Michigan State University Program
Butterworth Hospital
Program Director:
Richard A Switzer, MD
Butterworth Hospital
1150 Iron Ave NE
Grand Rapids, MI 49503
616 329-3775
Total Positions: 15 (GYI: 4)
Program ID: 800-25-44-008

Kalamazoo
Michigan State University/Kalamazoo Center for Medical Studies Program
Kalamazoo Center for Medical Studies
Bronson Methodist Hospital
Program Director:
Thomas J O'Meara, MD
Michigan State University
Kalamazoo Ctr for Medical Studies
1900 Oakland Dr
Kalamazoo, MI 49008
616 337-5063
Length: 4 Year(s) Total Positions: 16 (GYI: 4)
Program ID: 800-25-44-009

Pontiac
St Joseph Mercy Hospital Program
St Joseph Mercy Community HealthCare System
Program Director:
Ronald Beres, MD
8200 Woodward Ave
Poniac, MI 48243-2885
313 888-3231
Length: 4 Year(s) Total Positions: 16 (GYI: 4)
Program ID: 800-25-44-002

Royal Oak
William Beaumont Hospital Program
William Beaumont Hospital
Program Director:
Jeffrey D Haile, MD
William Beaumont Hospital
901 W 13 Mile Rd
Royal Oak, MI 48073-6769
810 561-4469
Length: 4 Year(s) Total Positions: 16 (GYI: 4)
Program ID: 800-25-44-033

Minnesota
Minneapolis
University of Minnesota Program
University of Minnesota Hospitals and Clinic
Children's Health Care - Minneapolis
Children's Health Care - St Paul
Hennepin County Medical Center
St Paul Ramsey Medical Center
Veterans Affairs Medical Center (Minneapolis)
Program Director:
Michael Stinson, MD
300-1199
612 626-6646
Length: 4 Year(s) Total Positions: 31 (GYI: 18)
Program ID: 800-25-44-034

Mississippi
Jackson
University of Mississippi Program
University Hospital
Program Director:
Stephanie J Eldridge, MD
University of Mississippi Medical Center
2500 N State St
Jackson, MS 39216-4505
601 984-5615
Length: 4 Year(s) Total Positions: 5 (GYI: 2)
Program ID: 800-27-44-035

Missouri
Kansas City
University of Missouri-Kansas City School of Medicine Program
Children's Mercy Hospital
St Luke's Hospital
Truman Medical Center-East
Program Director:
Sharon M Heinemann, MD
George Reiss, MD
University of Missouri-Kansas City School of Medicine
Combined Int Med/Pediatrics
2411 Holmes
Kansas City, MO 64108
816 881-6212
Length: 4 Year(s) Total Positions: 11 (GYI: 4)
Program ID: 800-28-44-036

* Updated information not provided.
St Louis
St Louis University Group of Hospitals
Program
St Louis University School of Medicine
Cardinal Glennon Children's Hospital
St Louis University Hospital
St Mary's Health Center
Veterans Affairs Medical Center (St Louis)
Program Director:
Coy D Pitch, MD
St Louis University Hospital
1402 S Grand Blvd
St Louis, MO 63104
314 577-8700
Length: 4 Year(s) Total Positions: 17 (GYI: 4)
Program ID: 800-32-44-037

Newark
Newark Beth Israel Medical Center/Seton Hall University Program B
Newark Beth Israel Medical Center
Elizabeth General Medical Center
St Michael's Medical Center (Cathedral Health Services Inc.)
Program Director:
Julie A Titlebaum, MD
Leon Smith, MD
Newark Beth Israel Medical Center
305 Lyons Ave
Newark, NJ 07112
201 926-7040
Length: 4 Year(s) Total Positions: 13 (GYI: 6)
Program ID: 800-32-44-041
UMDNJ-New Jersey Medical School Program
UMDNJ-New Jersey Medical School
Children's Hospital of New Jersey
Dept of Veterans Affairs Medical Center (East Orange)
Newark Beth Israel Medical Center
UMDNJ-University Hospital
Program Director:
George M Lodii, MD
Susan Mautone, MD
University Hospital
150 Bergen St
Newark, NJ 07103
201 882-6666
Length: 4 Year(s) Total Positions: 6 (GYI: 1)
Program ID: 800-32-44-040

Paterson
Seton Hall University School of Graduate Medical Education Program A
St Joseph's Hospital and Medical Center
Program Director:
Nafqhat Rambharan, MD
St Joseph's Hospital and Medical Center
Community Medicine Department
703 Main St
Paterson, NJ 07503
201 877-3532
Length: 4 Year(s) Total Positions: 12 (GYI: 2)
Program ID: 800-32-44-042

New York
Albany
Albany Medical Center Program
Albany Medical Center Hospital
Ellis Hospital
St Peter's Hospital
Veterans Affairs Medical Center (Albany)
Program Director:
Paul Scrima, MD
William Penney, MD
Albany Medical Center A-88
Dept of Pediatrics
47 New Scotland Ave
Albany, NY 12208-3479
518 262-5623
Length: 4 Year(s) Total Positions: 16 (GYI: 4)
Program ID: 800-32-44-044

Brooklyn
Brookdale Hospital Medical Center Program
Brookdale Hospital Medical Center
Program Director:
Ira W Reiser, MD
T W Arrisskin, MD
Brookdale Hospital Medical Center
One Brookdale Plaza
Brooklyn, NY 11212
718 240-6025
Length: 4 Year(s) Total Positions: 4 (GYI: 2)
Program ID: 800-32-44-045
SUNY Health Science Center at Brooklyn Program*
University Hospital-SUNY Health Science Center at Brooklyn
Kings County Hospital Center
Veterans Affairs Medical Center (Brooklyn)
Program Director:
Stephen Kamholz, MD
SUNY Health Science Center at Brooklyn
Children's Medical Center
460 Clarkson Ave, Box 40
Brooklyn, NY 11203
718 270-1625
Length: 4 Year(s) Total Positions: 8 (GYI: 2)
Program ID: 800-32-44-046

Buffalo
SUNY at Buffalo Graduate Medical-Dental Education Consortium Program
Children's Hospital of Buffalo
Buffalo General Hospital
Erie County Medical Center
Veterans Affairs Medical Center (Buffalo)
Program Director:
Margaret McAloon, MD
103 Cary Hall
5415 Main St
Buffalo, NY 14214
716 829-2890
Length: 4 Year(s) Total Positions: 13 (GYI: 3)
Program ID: 800-32-44-049

New York
Mount Sinai School of Medicine Program
Mount Sinai School of Medicine
Elmhurst Hospital Center-Mount Sinai Services
Englewood Hospital
Mount Sinai Medical Center
Veterans Affairs Medical Center (Manhattan)
Program Director:
Lawrence O Smith, MD
Scott H Barnett, MD
Mount Sinai Hospital
One Gustave L Levy Pk
Box 1118
New York, NY 10029
212 450-5494
Length: 4 Year(s) Total Positions: 4 (GYI: 4)
Program ID: 800-32-44-105
New York Medical College Program A*
Metropolitan Hospital Center
Program Director:
Javier Logro, MD
Eliseo Sanches, MD
Metropolitan Hospital Center
1901 First Ave
New York, NY 10029
Length: 4 Year(s) Total Positions: 0
Program ID: 800-32-44-061

* Updated information not provided.
St Vincent's Hospital and Medical Center of New York Program
St Vincent's Hospital and Medical Center of New York Program
Program Director: Eric S.Bachow, MD
Peter E Scaglione, MD
St Vincent's Hospital and Medical Center of New York
152 W 11th St
New York, NY 10011
212 664-8300
Length: 4 Year(s) Total Positions: 10 (GTY: 3)
Program ID: 800-38-44-082

Rochester
University of Rochester Combined Internal Medicine/Pediatrics Program
Strong Memorial Hospital of the University of Rochester
Genesee Hospital
Rochester General Hospital
Program Director: Barbara L. Schuster, MD
John B. Brooks, MD
Strong Memorial Hospital
611 Elmwood Ave, Box 702
Rochester, NY 14642-8792
716 278-5427
Length: 4 Year(s) Total Positions: 17 (GTY: 4)
Program ID: 800-38-44-054

Stony Brook
SUNY at Stony Brook Program
University Hospital-SUNY at Stony Brook
Program Director: Douglas L. Brand, MD
Sharon Inkeles, MD
University at Stony Brook
School of Medicine
RSC 5-U 609
Stony Brook, NY 11794-8160
516 444-2665
Length: 4 Year(s) Total Positions: 4 (GTY: 2)
Program ID: 800-38-44-083

North Carolina
Chapel Hill
University of North Carolina Hospitals Program
University of North Carolina Hospitals
Program Director: Carole Lawton, MD
UNC School of Medicine
Old Clinic Bldg CB#7593
Chapel Hill, NC 27599-7593
919 966-3172
Length: 4 Year(s) Total Positions: 22 (GTY: 5)
Program ID: 800-38-44-055

Durham
Duke University Program
Duke University Medical Center
Veterans Affairs Medical Center (Durham)
Program Director: G. Ralph Corey, MD
Duke University Medical Center
Box 3013
Durham, NC 27710
919 668-3160
Length: 4 Year(s) Total Positions: 19 (GTY: 4)
Program ID: 800-38-44-056

Greenville
East Carolina University Program
Pitt County Memorial Hospital
Program Director: Dale A. Newton, MD
Dept of Pediatrics
38-139 Brody Medical Sciences Bldg
Greenville, NC 27858-4854
919 615-3041
Length: 4 Year(s) Total Positions: 12 (GTY: 3)
Program ID: 800-38-44-057

Ohio
Akron
Akron General Medical Center/Children's Hospital Medical Center Program
Akron General Medical Center
Children's Hospital Medical Center of Akron
Program Director: Joseph P. Myers, MD
John O. Crowe, MD
Akron General Medical Center
400 Walnut Ave
Akron, OH 44307
330 266-8140
Length: 4 Year(s) Total Positions: 8 (GTY: 2)
Program ID: 800-38-44-058
Children's Hospital Medical Center/St Thomas Hospital Medical Center Program
Children's Hospital Medical Center of Akron
St Thomas Hospital (Stata Health System)
Program Director: Ramesh D. Dasgupta, MD
John O. Crowe, MD
St Thomas Hospital Medical Center
44 N Main St
Akron, OH 44310
330 266-5045
Length: 4 Year(s) Total Positions: 5 (GTY: 2)
Program ID: 800-38-44-059

Cincinnati
University of Cincinnati Hospital Group Program
University of Cincinnati Hospital
Program Director: Gregory W. Reznick, MD
Michael J. Schwartz, MD
Univ of Cincinnati Med Ctr
251 Bethesda Ave
Cincinnati, OH 45267-0557
513 558-2590
Length: 4 Year(s) Total Positions: 21 (GTY: 7)
Program ID: 800-38-44-082

Cleveland
Cleveland Clinic Foundation Program
Cleveland Clinic Foundation
Program Director: Susan J. Rogers, MD
Michael J. McCarthy, MD
Cleveland Clinic Foundation
Dept of Int Medicine/Pediatrics
1900 Euclid Ave T222
Cleveland, OH 44115-5424
216 444-5600
Length: 4 Year(s) Total Positions: 13 (GTY: 4)
Program ID: 800-38-44-080

MetroHealth Medical Center Program
MetroHealth Medical Center
Program Director: Rita M. Korthals, MD
MetroHealth Medical Center
Dept of Medicine/Pediatrics
2500 MetroHealth Dr
Cleveland, OH 44109-3998
216 459-3162
Length: 4 Year(s) Total Positions: 16 (GTY: 4)
Program ID: 800-38-44-081

Columbus
Ohio State University Program
Ohio State University Medical Center
Children's Hospital
Program Director: Dwight A. Powell, MD
Robert R. Mack, MD
Children's Hospital
IM/Peds Residency Program ED 577
700 Children's Dr
Columbus, OH 43205
614 229-4460
Length: 4 Year(s) Total Positions: 6 (GTY: 6)
Program ID: 800-38-44-083

Dayton
Wright State University Program
Children's Medical Center
Good Samaritan Hospital and Health Center
Miami Valley Hospital
USAF Medical Center (Wright-Patterson)
Veterans Affairs Medical Center (Dayton)
Program Director: Gary M. Usery, MD PhD
Wright State University
Dept of Internal Medicine
PO Box 927
Dayton, OH 45401-0927
513 225-2010
Length: 4 Year(s) Total Positions: 12 (GTY: 4)
Program ID: 800-38-44-064

Toledo
Medical College of Ohio at Toledo Program
Medical College of Ohio Hospital
St Vincent's Medical Center
Toledo Hospital
Program Director: Donald T. Wasik, MD
Patrick J. Mulrow, MD
Medical College of Ohio
PO Box 10008
Toledo, OH 43696-0008
419 381-8384
Length: 4 Year(s) Total Positions: 12 (GTY: 4)
Program ID: 800-38-44-085

*Updated information not provided.
Youngstown
Western Reserve Care System/NEOUCOM Program
Tod Children's Hospital
Northside Medical Center
Southside Medical Center
Program Director:
Harvey Eisenberg, MD
Kurt Wegner, MD
Western Reserve Care System
345 Oak Hill Ave
Youngstown, OH 44501-0990
216 740-4706
Length: 4 Year(s) Total Positions: 16 (GYI: 4) Program ID: 800-39-44-086

Pennsylvania
Danville
Geisinger Medical Center Program
Geisinger Medical Center
Program Director:
Mark Speake, MD
Geisinger Medical Center
Danville, PA 17822
717 271-6787
Length: 4 Year(s) Total Positions: 16 (GYI: 4) Program ID: 800-41-44-086


Hershey
Milton S Hershey Medical Center of The Pennsylvania State University Program
Penn State University Hospital-Milton S Hershey Med Ctr
Program Director:
Barbara Ostrov, MD
Milton S Hershey Medical Center
PO Box 850 University Dr
Hershey, PA 17033
717 531-8882
Length: 4 Year(s) Total Positions: 10 (GYI: 4) Program ID: 800-44-44-081


Tennessee
Johnson City
East Tennessee State University Program
James H Quillen College of Medicine
Program Director:
Steven L Berk, MD
Fonzi O Ashlemburg, MD
Dept of Internal Medicine
East Tennessee State University
Box 70622
Johnson City, TN 37614-0622
615 298-4422
Length: 4 Year(s) Total Positions: 8 (GYI: 2) Program ID: 800-44-44-092


Memphis
University of Tennessee Program*
University of Tennessee College of Medicine
Le Bonheur Children's Medical Center
Regional Medical Center at Memphis
St Jude Children's Research Hospital
University of Tennessee Medical Center
Veterans Affairs Medical Center (Memphis)
Program Director:
Michael S Bronne, MD
University of Tennessee Memphis
850 Court Ave 1034
Memphis, TN 38163
901 528-5814
Length: 4 Year(s) Total Positions: 35 (GYI: 12) Program ID: 800-47-44-071


Nashville
Vanderbilt University Program
Vanderbilt University Medical Center
Metropolitan Nashville General Hospital
Veterans Affairs Medical Center (Nashville)
Program Director:
John M Leonard, MD
Ian M Bur, MD
Vanderbilt University Medical Center
D-3100 Med Ctr N
Nashville, TN 37232-2558
615 322-2065
Length: 4 Year(s) Total Positions: 16 (GYI: 4) Program ID: 800-47-44-070


Texas
El Paso
William Beaumont Army Medical Center Program
William Beaumont Army Medical Center
Program Director:
Ronald D Sajewinski, MD
Dept of Managed Care
William Beaumont Army Med Ctr
El Paso, TX 79908-5001
915 569-1665
Length: 4 Year(s) Total Positions: 8 (GYI: 2) Program ID: 800-48-44-073


Houston
Baylor College of Medicine Program
Baylor College of Medicine
Harris County Hospital District-Ben Taub General Hospital
Methodist Hospital
St Luke's Episcopal Hospital
Texas Children's Hospital
Veterans Affairs Medical Center (Houston)
Program Director:
Edward C Lynch, MD
Ralph Pegeen, MD
Baylor College of Medicine
6655 Fannin Mail Station B-501
Fondren-Brown Bldg.
Houston, TX 77030-2701
713 790-2217
Length: 4 Year(s) Total Positions: 18 (GYI: 6) Program ID: 800-49-44-074


University of Texas at Houston Program
University of Texas Medical School at Houston
Herman Children's Hospital at Houston
Hermann Hospital
St Joseph Hospital
St Luke's Episcopal Hospital
Texas Heart Institute
University of Texas M D Anderson Cancer Center
Program Director:
Mark A Parnie, MD
University of Texas Medical Center
Dept of Internal Medicine
MSB 1.160 6431 Fannin St
Houston, TX 77030
713 792-5981
Length: 4 Year(s) Total Positions: 29 (GYI: 10) Program ID: 800-49-44-075


Odessa
Texas Tech University Program
Texas Tech University Health Sciences Center at Odessa
Program Director:
Alfred N Karcickoff, MD
Texas Tech University Health Sciences Center
Dept of Internal Med & Pediatrics
800 W 4th St
Odessa, TX 79765
915 336-5270
Length: 4 Year(s) Total Positions: 8 (GYI: 8) Program ID: 800-48-44-076

* Updated information not provided.
Temple
Texas A&M College of Medicine-Scott and White Program
Scott and White Memorial Hospital
Program Director:
John K Klevias, MD
Susan F Voelz, MD
Texas A&M Scott and White Hospital
Graduate Medical Education
2001 S 31st St
Temple, TX 76508-0001
800-286-4463
Length: 4 Year(s) Total Positions: 9 (GYI: 3)
Program ID: 800-48-44083

Utah
Salt Lake City
University of Utah Program
University of Utah Medical Center
Primary Children's Medical Center
Veterans Affairs Medical Center (Salt Lake City)
Program Director:
Barry M Stults, MD
Lacy M Osborn, MD
University of Utah Medical Center
50 N Medical Dr
Salt Lake City, UT 84132
801-581-7896
Length: 4 Year(s) Total Positions: 1 (GYI: 0)
Program ID: 800-48-44091

Wisconsin
Richmond
Medical College of Virginia Program*
Medical College of Virginia Hospitals
Program Director:
Richard E Brookman, MD
Crag B Kaplan, MD
Medical College of Virginia
Dept of Pediatrics
MCV Box 151
Richmond, VA 23298-0151
804 786-9750
Length: 4 Year(s) Total Positions: 16 (GYI: 4)
Program ID: 800-51-44077

West Virginia
Charleston
West Virginia University (Charleston Division) Program
Charleston Area Medical Center
Program Director:
Kathleen V Pevrell, MD
Shawn A Chilling, MD
West Virginia University Health Sciences Center Charleston Division
Dept of Pediatrics
800 Pennsylvania Ave #304
Charleston, WV 25302
304 342-8272
Length: 4 Year(s) Total Positions: 8 (GYI: 2)
Program ID: 800-55-44078

Huntington
Marshall University School of Medicine Program
Marshall University School of Medicine
St Mary's Hospital
Veterans Affairs Medical Center (Huntington)
Program Director:
Kevin W Yingling, MD
Collins Gunshurt, MD
Marshall University School of Medicine
1801 6th Ave
Huntington, WV 25701
304 696-7242
Length: 4 Year(s) Total Positions: 8 (GYI: 2)
Program ID: 800-55-44098

Morgantown
West Virginia University Hospitals Program
West Virginia University Hospitals
Program Director:
William A Neal, MD
West Virginia University Hospital
Department of Pediatrics
P O Box 9214 HSC N
Morgantown, WV 26506-9214
304 293-4461
Length: 1 Year(s) Total Positions: 7 (GYI: 4)
Program ID: 800-56-44098

Wisconsin
Milwaukee
Medical College of Wisconsin Program
Medical College of Wisconsin Affiliated Hospitals Inc
Program Director:
Andrew J Norton, MD
Timothy A Schum, MD
Department of Medicine
Division of Educational Affairs
8700 W Wisconsin Ave Box 147
Milwaukee, WI 53226
414 328-7863
Length: 4 Year(s) Total Positions: 12 (GYI: 4)
Program ID: 800-56-44106

Illinois
Chicago
University of Illinois College of Medicine at Chicago Program
University of Illinois College of Medicine at Chicago
University of Illinois Hospital and Clinics
Veterans Affairs Northwest Medical Center (Chicago)
Program Director:
Baudwin Shahani, MD
Constance Schwab, MD
Univ of Illinois
Dept of Medicine
Box 6088
Chicago, IL 60680
Length: 5 Year(s)
Program ID: 819-16-44014

Louisiana
New Orleans
Louisiana State University Program
Louisiana State University School of Medicine
Medical Center of Louisiana at New Orleans-LSU Division
Program Director:
Joseph J Biundo Jr, MD
Charles W Hillson Jr, MD
Louisiana State University Medical Center
Section of Physical Med and Rehab
1542 Tulane Ave, Suite 602
New Orleans, LA 70112-3023
504-586-3173
Length: 5 Year(s) Total Positions: 7 (GYI: 2)
Program ID: 810-21-44002

Maryland
Baltimore
Sinai Hospital of Baltimore Program
Sinai Hospital of Baltimore
Program Director:
Patt Charon, MD
Gerald Felsenthal, MD
Sinai/Hospital of Baltimore
Medical Staff/Education Office
2001 W Belvedere Ave
Baltimore, MD 21210-3271
410 778-5625
Length: 5 Year(s) Total Positions: 10 (GYI: 2)
Program ID: 818-55-44011

* Updated information not provided.
Massachusetts

Newton Lower Falls

Tufts University Program
Newton-Wellesley Hospital
New England Medical Center Hospitals

Program Director:
Henry M. Yager, MD

Tufts Comb Internal Medicine/Physical Medicine & Rehab
Newton-Wellesley Hospital
2014 Washington St.
Newton, MA 02162
617 245-6467

Length: 5 Year(s)  Total Positions: 10 (GY: 2)
Program ID: 810-34-44-012

Michigan

Detroit

Wayne State University Program
Wayne State University School of Medicine
Detroit Receiving Hospital and University Health Center Rehabilitation Institute

Program Director:
Bruce M. Gans, MD
Bruce Gans, MD
Wayne State Univ Sch of Medicine
281 Mack Ave
Detroit, MI 48201

313 746-8692

Length: 5 Year(s)  Total Positions: 4 (GY: 2)
Program ID: 810-35-44-015

New York

Buffalo

State University of New York at Buffalo Program*

SUNY at Buffalo Grad Medical-Dental Education Consortium
Buffalo General Hospital
Erie County Medical Center
Veterans Affairs Medical Center (Buffalo)

Program Director:
K.H. Lee, MD
SUNY at Buffalo
Dept of Rehab Medicine (117)
3485 Bailey Ave
Buffalo, NY 14215
716 828-3374

Length: 5 Year(s)
Program ID: 910-35-44-020

Ohio

Cincinnati

University of Cincinnati Medical Center Program
University of Cincinnati Hospital

Program Director:
Mark J. Goddard, MD
Gregory W. Kranz, MD

University of Cincinnati Medical Center
Dept of Pyschr Med and Rehab
PO Box 70030
Cincinnati, OH 45267-0030
513 558-4954

Length: 5 Year(s)  Total Positions: 1 (GY: 1)
Program ID: 810-41-44-019

Cleveland

Case Western Reserve University Program
MetroHealth Medical Center

Program Director:
Michael J. McFarlane, MD
Shu Huang, MD
MetroHealth Medical Center
2500 MetroHealth Dr
Cleveland, OH 44109-1998
216 456-3856

Length: 5 Year(s)  Total Positions: 1 (GY: 1)
Program ID: 810-35-44-016

Pennsylvania

Philadelphia

Albert Einstein Medical Center Program
Albert Einstein Medical Center
Tulane University Hospital

Program Director:
Lisa B Wallenstein, MD
James T. Demopoulos, MD

Internal Medicine/Physical Medicine & Rehabilitation Program

Albert Einstein Medical Center
5401 Old York Rd Ste 383
Philadelphia, PA 19141-3023
215 456-6947

Length: 5 Year(s)  Total Positions: 8 (GY: 2)
Program ID: 810-41-44-013

Temple University Program
Temple University Hospital

Program Director:
Richard S. Eisbrodt, MD
James T. Demopoulos, MD
Temple University Hospital
5401 N Broad St
Parkinson Pavilion 8th Fl
Philadelphia, PA 19140
215 746-2772

Length: 5 Year(s)  Total Positions: 2 (GY: 2)
Program ID: 810-41-44-006

Pittsburgh

St Francis Medical Center Program
St Francis Medical Center

Program Director:
T. Michael White, MD
Ronald L. Zimmerman, MD

Dept of Internal Medicine
St Francis Medical Center
400 45th St
Pittsburgh, PA 15201
412 622-4388

Length: 5 Year(s)  Total Positions: 5 (GY: 1)
Program ID: 810-41-44-008

Texas

Houston

Baylor College of Medicine Program
Baylor College of Medicine

Program Director:
Edward C. Lynch, MD
G. G. Kevorkian, MD

Combined Internal Medicine/Physical Medicine and Rehab

6666 Fannin Mail Station B-001
Fannin Brown Bldg
Houston, TX 77030
703 790-3317

Length: 5 Year(s)  Total Positions: 1 (GY: 0)
Program ID: 810-44-44-009

* Updated information not provided.
Combined Specialty Programs in Internal Medicine/Psychiatry

**Internal Medicine/Psychiatry**

**Illinois**

**Springfield**

**Southern Illinois University Program**

Southern Illinois University School of Medicine
Memorial Medical Center
St John's Hospital

**Program Director:**
David E Steward, MD
Southern Illinois University School of Medicine
PO Box 18200
Springfield, IL 62794-9320
217 786-0193

Length: 5 Year(s)  Total Positions: 10  (GY: 2)
Program Id: 815-18-44-009

**Iowa**

**Iowa City**

**University of Iowa Hospitals and Clinics Program**

University of Iowa Hospitals and Clinics
Veterans Affairs Medical Center (Iowa City)

**Program Director:**
Roger G Kalhol, MD
University of Iowa Hospitals and Clinics
Dep: Psych and Int Medicine Gri2-1 GH
220 Hawkins Dr
Iowa City, IA 52242-1081
319 356-3181

Length: 5 Year(s)  Total Positions: 10  (GY: 2)
Program Id: 815-18-44-003

**Kansas**

**Kansas City**

**University of Kansas Medical Center Program**

University of Kansas School of Medicine
University of Kansas Medical Center
Veterans Affairs Medical Center (Kansas City)

**Program Director:**
William P Gabrielli Jr, MD PhD
University of Kansas Medical Center
Dep: Psychiatry
2301 Rainbow Blvd
Kansas City, KS 66160-7341
913 588-1300

Length: 5 Year(s)  Total Positions: 4  (GY: 2)
Program Id: 815-19-44-006

**Louisiana**

**New Orleans**

**Tulane University Program**

Tulane University School of Medicine
Medical Center of Louisiana at New Orleans-Tulane Division
Tulane University Hospital and Clinics
Veterans Affairs Medical Center Tulane Service (New Orleans)

**Program Director:**
Patrick T O'Neill, MD
Tulane University Medical Center
Dep: Psychiatry SL23
1840 Tulane Ave
New Orleans, LA 70112-3699
504 587-2102

Length: 5 Year(s)  Total Positions: 10  (GY: 2)
Program Id: 815-21-44-010

**Michigan**

**East Lansing**

**Michigan State University-East Lansing Program**

Michigan State University-East Lansing

**Program Director:**
Jed Magen, DO
Patrcial C Alguire, MD
Psychiatry Education
A-207 B Fee
East Lansing, MI 48824-4151

Program Id: 815-25-44-001

**New Hampshire**

**Lebanon**

**Dartmouth-Hitchcock Medical Center Program**

Mary Hitchcock Memorial Hospital
Veterans Affairs Medical Center (White River Junction)

**Program Director:**
Richard Comi, MD
Ronald Green, MD
Dartmouth-Hitchcock Medical Center
One Medical Center Dr
Lebanon, NH 03766

Length: 5 Year(s)  Program Id: 815-32-44-016

**New York**

**Bronx**

**Bronx-Lebanon Hospital Center Program**

Bronx-Lebanon Hospital Center

**Program Director:**
Nalini V Jethani, MD
Sridhar Chilimuri, MD
 Bronx-Lebanon Hospital Center
Dep: Psychiatry
1276 Fulton Ave
Bronx, NY 10456
718 901-4053

Total Positions: 4  (GY: 2)
Program Id: 815-35-44-016

**Brooklyn**

**State University of New York at Brooklyn Program**

University Hospital-SUNY Health Science Center at Brooklyn
Kings County Hospital Center

**Program Director:**
Eric Weitzner, MD
Jeanne Macrae, MD
SUNY Health Science at Brooklyn
Dept of Psych and Int Medicine
450 Clarkson Ave Box 1003
Brooklyn, NY 11203-2008
718 270-5802

Length: 5 Year(s)  Total Positions: 15  (GY: 3)
Program Id: 815-36-44-004

**Rochester**

**University of Rochester Program**

Strong Memorial Hospital of the University of Rochester

**Program Director:**
Yeates Conwell, MD
Laurence B Guitzmer, MD
University of Rochester Medical Center
300 Crittenden Blvd
Dept of Psychiatry
Rochester, NY 14642-8409
716 273-4665

Length: 5 Year(s)  Total Positions: 5  (GY: 2)
Program Id: 815-36-44-007

**North Carolina**

**Durham**

**Duke University Program**

Duke University Medical Center
Veterans Affairs Medical Center (Durham)

**Program Director:**
Tara A Grady, MD
Balbap Corey, MD
Duke University Medical Center
PO Box 2957
Durham, NC 27710
919 684-2258

Length: 5 Year(s)  Total Positions: 2  (GY: 2)
Program Id: 815-36-44-012

**Greenville**

**East Carolina University Program**

East Carolina University School of Medicine
Pitt County Memorial Hospital

**Program Director:**
James O Peden Jr, MD
East Carolina University School of Medicine
Dep: Psychiatry
388 PCMH-7A
Greenville, NC 27834
919 816-4623

Length: 5 Year(s)  Total Positions: 10  (GY: 2)
Program Id: 815-36-44-005

* Updated information not provided.
Pennsylvania

Philadelphia

Albert Einstein Medical Center Program
Albert Einstein Medical Center
Program Director:
Lisa B Wallenstein, MD
Frederick Miller, MD
Albert Einstein Medical Center
5401 Old York Rd, Ste 363
Philadelphia, PA 19141-3625
215 456-8947
Length: 5 Year(s) Total Positions: 5 (GYI: 2)
Program ID: 815-41-44-001

Pittsburgh

St Francis Health System Program
St Francis Medical Center
Program Director:
David J Lynn, MD
T Michael White, MD
St Francis Medical Center
400 45th St
Pittsburgh, PA 15201-1198
412 822-4786
Base Positions: 3 (GYI: 2)
Program ID: 815-41-44-015

Virginia

Charlottesville

University of Virginia Program
University of Virginia Medical Center
Program Director:
Catherine Leslie, MD
Department of Behavioral Med and Psychiatry
University of Virginia School of Medicine
Blue Ridge Hospital Drawer D
Charlottesville, VA 22901
824 954-5408
Length: 5 Year(s) Total Positions: 11 (GYI: 3)
Program ID: 815-51-44-012

Richmond

Medical College of Virginia-Commonwealth University Program
Medical College of Virginia-Commonwealth University
Program Director:
John B Uebel, MD
Craig B Kaplan, MD
Virginia Commonwealth University
Department of Psychiatry
Box 710
Richmond, VA 23298-0710
Program ID: 815-41-44-012

West Virginia

Charleston

West Virginia University Program
Charleston Area Medical Center
Program Director:
T O Dickey Jr, MD
James F Griffith, MD
Medicine/Psychiatry Residency Program
1000 Fuqua Rd
Charleston, WV 25301
304 343-7850
Length: 5 Year(s) Total Positions: 10 (GYI: 2)
Program ID: 815-41-44-014

Morgantown

West Virginia University Program*
West Virginia University Hospitals
Program Director:
James M Stevenson, MD
Rashida Khatoun, MD
Department of Behavioral Medicine and Psychiatry
Chesnut Ridge Hospital
300 Chestnut Ridge Rd
Morgantown, W 26006
304 293-2411
Length: 5 Year(s) Total Positions: 7 (GYI: 2)
Program ID: 815-56-44-006

Neurology/Physical Medicine and Rehabilitation

New York

Buffalo

SUNY at Buffalo Graduate Medical-Dental Education Consortium Program*
Erie County Medical Center
Buffalo General Hospital
Veterans Affairs Medical Center (Buffalo)
Program Director:
X R Lee, MD
82 Farber Hall
3455 Main St
Buffalo, NY 14214
716 882-9371
Length: 5 Year(s) Total Positions: 0 (GYI: 0)
Program ID: 850-35-44-001

*Updated information not provided.
Pediatrics/Emergency Medicine
Indiana

Indianapolis
Methodist Hospital of Indiana Program
Methodist Hospital of Indiana
Program Director:
Carey D. Chisholm, MD
Charlene E. Graves, MD
Methodist Hospital of Indiana
Emergency Medicine and Trauma Ctr
1701 N Senate Blvd
Indianapolis, IN 46202
317 929-3026
Length: 5 Year(s) Total Positions: 4 (GYI: 2)
Program ID: 825-17-44-005

Pediatrics/Physical Medicine and Rehabilitation
Colorado
Denver
University of Colorado Program
University of Colorado Health Sciences Center
Program Director:
Mary P. Glore, MD
Donna J. Blake, MD
University of Colorado Health Sciences Center
Dept of Pediatrics
1666 E 19th Ave B1208
Denver, CO 80210
303 861-6788
Length: 5 Year(s) Total Positions: 1 (GYI: 1)
Program ID: 833-07-44-001

Michigan
Ann Arbor
University of Michigan Program
University of Michigan Hospitals
Program Director:
M. Catherine Sprenz, MD
University of Michigan Medical Center
Dept of Phys Med & Rehab 0042
500 E Medical Center Dr
Ann Arbor, MI 48109-0042
313 763-7201
Length: 5 Year(s) Total Positions: 19 (GYI: 0)
Program ID: 833-35-44-015

Detroit
Children's Hospital of Michigan Program
Children's Hospital of Michigan Rehabilitation Institute
Program Director:
Edward Terbrunski, MD
Bruce M. Gans, MD
Children's Hospital of Michigan
3901 Beaubien Blvd
Detroit, MI 48201-2186
313 745-5555
Length: 5 Year(s) Total Positions: 6 (GYI: 2)
Program ID: 833-25-44-009

Minnesota
Minneapolis
University of Minnesota Hospitals Program*
University of Minnesota Medical School
University of Minnesota Hospital and Clinic
Program Director:
Dennis D. Dykestra, MD
University of Minnesota Hospitals
Dept of Phys Med & Rehab 0042
420 Delaware St SE, Box 297
Minneapolis, MN 55455
612 624-4513
Length: 5 Year(s) Total Positions: 8 (GYI: 2)
Program ID: 833-35-44-001

* Updated information not provided.
Combined Specialty Programs in Pediatrics/Physical Medicine and Rehabilitation

Buffalo
SUNY at Buffalo Graduate Medical-Dental Education Consortium Program
Children’s Hospital of Buffalo
Program Director: R H Lee, MD
VA Medical Center
3406 Bailey Ave
Buffalo, NY 14215
716 852-1974
Length: 5 Year(s)
Total Positions: 1 (GYI: 0)
Program ID: 835-35-44-009

New Hyde Park
Schneider Children’s Hospital Program
Schneider Children’s Hospital (Long Island Jewish Med Ctr)
Program Director: Peter Badell, MD
VA Medical Center
Div of Rehabilitation Medicine
270-45 76th Ave, CH066
New Hyde Park, NY 11040
718 470-2090
Length: 5 Year(s)
Total Positions: 2 (GYI: 1)
Program ID: 835-35-44-006

New York
New York University Institute of Rehabilitation Medicine Program
Rusk Institute of Rehabilitation Medicine
Program Director: Howard Tinkle, MD
Rusk Institute
400 E 34th St, Ste 100
New York, NY 10016-4801
212 242-4340
Length: 5 Year(s)
Total Positions: 2 (GYI: 2)
Program ID: 835-35-44-013

Ohio
Cincinnati
University of Cincinnati Hospital Group Program
Program Director: Mark L Goddard, MD
University of Cincinnati Medical Center
P.O. Box 670530
Cincinnati, OH 45267-0530
513 558-7535
Length: 5 Year(s)
Total Positions: 5 (GYI: 1)
Program ID: 835-35-44-012

Columbus
Ohio State University Program*
Children’s Hospital
Program Director: John Mahan, MD
Paul Kaplan, MD
Columbus Children’s Hospital
700 Children’s Dr
Columbus, OH 43205
Length: 5 Year(s)
Total Positions: 0
Program ID: 835-36-44-010

Toledo
Medical College of Ohio at Toledo Program
Medical College of Ohio Hospital
St Vincent Medical Center
Toledo Hospital
Program Director: Donald T Wask, MD
Greg Nomanatzis, MD
Medical College of Ohio at Toledo
PO Box 10008
Toledo, OH 43699
419 381-5374
Length: 5 Year(s)
Total Positions: 2 (GYI: 2)
Program ID: 835-38-44-011

Pennsylvania
Philadelphia
University of Pennsylvania Program
Hospital of the University of Pennsylvania
Program Director: Keith M Robinson, MD
Hospital of the University of Pennsylvania
53 West Gates Blvd
3600 Spruce St
Philadelphia, PA 19104-4283
215 848-5674
Length: 5 Year(s)
Total Positions: 5 (GYI: 1)
Program ID: 835-41-44-016

Texas
Houston
Baylor College of Medicine Program
Baylor College of Medicine
Program Director: Ralph D. Feigin, MD
C. George Kurzrok, MD
Baylor College of Medicine
Dept of Pediatrics
One Baylor Plaza
Houston, TX 77030
713 790-1170
Length: 5 Year(s)
Total Positions: 5 (GYI: 1)
Program ID: 835-44-44-007

Wisconsin
Milwaukee
Medical College of Wisconsin Program
Medical College of Wisconsin Affiliated Hospitals Inc.
Program Director: Gerda E. Klingbeil, MD
Medical College of Wisconsin
8700 W Wisconsin Ave
Milwaukee, WI 53226
Length: 5 Year(s)
Total Positions: 0
Program ID: 835-56-44-014

Pediatrics/Psychiatry/ Child and Adolescent Psychiatry
Kentucky
Lexington
University of Kentucky Medical Center Program
University Hospital Albert B. Chandler Medical Center
Charter Ridge Hospital
Program Director: H Otto Kaak, MD
Annenberg 200
Univ of Kentucky Medical Center
Dept of Psychiatry
Lexington, KY 40536-0080
859 382-4100
Length: 5 Year(s)
Total Positions: 10 (GYI: 2)
Program ID: 830-39-44-001

Hawaii
Honolulu
University of Hawaii Program
University of Hawaii at Monona Kapolei Medical Center for Women and Children Leahi Hospital
Program Director: Anna Gerhard, MD
1310 Punahou St
Honolulu, HI 96826
808 975-8375
Program ID: 830-14-44-007

Massachusetts
Boston
Tufts University School of Medicine Program*
New England Medical Center Hospitals
Program Director: Joseph J. Janikowski, MD
New England Medical Center Hospital
PO Box 39
750 Washington St
Boston, MA 02111
617 635-5370
Length: 5 Year(s)
Total Positions: 2 (GYI: 2)
Program ID: 830-34-44-002

* Updated information not provided.
New York

Bronx
Albert Einstein College of Medicine Program*
Albert Einstein College of Medicine of Yeshiva University
Bronx Municipal Hospital Center
Program Director:
Edward Sperling, MD
Bronx Municipal Hospital Center
Nursing Residence
Pelham Pkwy and Eastchester Rd
Bronx, NY 10461
212-916-3886
Length: 5 Year(s) Total Positions: 3 (FY1: 2)
Program ID: 839-35-44-003

New York
Mount Sinai School of Medicine Program
Mount Sinai Medical Center
Program Director:
Barbara Mirroc, MD
Mount Sinai Hospital
Dept of Psychiatry Box 1268
One Gustave L. Levy Pl
New York, NY 10029
212-474-0448
Length: 5 Year(s) Total Positions: 9 (FY1: 2)
Program ID: 839-35-44-004

Ohio
Cincinnati
University of Cincinnati Hospital Group Program
University of Cincinnati Hospital
Program Director:
Warren Liang, MD
Univ of Cincinnati Medical Center
Dept of Psychiatry
221 Bethesda Ave
Cincinnati, OH 45267-0559
513-55-5190
Program ID: 839-35-44-003

Rhode Island
East Providence
Brown University Program*
Emma Pond Boton Bradley Hospital
Program Director:
Charles A Malone, MD
Emma Pond Boton Bradley Hospital
1011 Veterans Memorial Pkwy
East Providence, RI 02915
401-494-5400
Length: 6 Year(s) Total Positions: 10 (FY1: 0)
Program ID: 830-49-44-006

Utah
Salt Lake City
University of Utah Program
University of Utah Medical Center
Program Director:
Chris M Liang, MD
Francis L Burger, MD
Dept of Psychiatry
Univ of Utah School of Medicine
50 N Medical Dr
Salt Lake City, UT 84132
801-581-3806
Length: 5 Year(s) Total Positions: 10 (FY1: 2)
Program ID: 830-49-44-006

Psychiatry/Neurology

Louisiana

New Orleans
Tulane University Medical Center Program
Tulane University Medical Center
Program Director:
Patrick O'Neill, MD
Debra G Elliott, MD
Tulane University Medical Center
Dept of Psychiatry and Neurology
1430 Tulane Ave
New Orleans, LA 70112-3809
Program ID: 850-20-44-002

West Virginia

Morgantown
West Virginia University Program*
West Virginia University Hospitals
Charleston Area Medical Center Program
Program Director:
James Stevenson, MD
Ludwig Guevara, MD
West Virginia University Health Sciences Center
Morgantown, WV 26506
Length: 5 Year(s)
Program ID: 855-50-44-001

* Updated information not provided.
Surgery/Plastic Surgery

Michigan
Ann Arbor
University of Michigan Program
St. Joseph Mercy Hospital (Catherine McAuley Health System)
Veterans Affairs Medical Center (Ann Arbor)
Program Director:
David J. Smith Jr., MD
Office of Surgical Education
1500 E Medical Center Dr
Ann Arbor, MI 48109-3043
313-763-5733
Length: 7 Year(s) Total Positions: 5 (GYI: 2)
Program ID: 909-28-44-006

Grand Rapids
Grand Rapids Area Medical Education Center Program
Grand Rapids Area Medical Education Center
Benedict Memorial Medical Center
Butterworth Hospital
St. Mary's Health Services
Program Director:
John H. Bemis, MD
Grand Rapids Area Medical Education Center
240 Cherry St SE
Grand Rapids, MI 49503
616-752-6332
Length: 7 Year(s) Total Positions: 2 (GYI: 2)
Program ID: 909-28-44-006

Missouri
St Louis
Washington University Program*
Barnes Hospital
St. Louis Children's Hospital
St. Louis Regional Medical Center
Program Director:
Paul M. Weeks, MD
Plastic Surgery 17454 E Pavilion
One Barnes Hospital Plaza
St. Louis, MO 63119
314-362-7388
Length: 7 Year(s) Total Positions: 3 (GYI: 3)
Program ID: 909-28-44-007

Ohio
Columbus
Ohio State University Program
Ohio State University Medical Center
Children's Hospital
Mount Carmel Medical Center
Riverside Methodist Hospitals
Program Director:
Robert L. Rougier, MD
Ohio State University Div of Plastic Surgery
2540 N High St
Columbus, OH 43210-1228
614-294-6066
Length: 7 Year(s) Total Positions: 2
Program ID: 909-38-44-008

* Updated information not provided.
Appendix B

Medical Specialty Board Certification Requirements

Twenty-four medical specialty boards have been approved by the American Board of Medical Specialties (ABMS) and the American Medical Association (AMA) Council on Medical Education through the Liaison Committee for Specialty Boards (LCSB). Applications for recognition as a specialty board are submitted to the LCSB and reviewed for compliance with the requirements and criteria published in the Essentials for Approval of New Examining Boards in Medical Specialties approved by both the ABMS and the AMA. If an applicant is approved for recognition as a medical specialty board by the LCSB, the application must then be approved by the membership of the ABMS and the AMA Council on Medical Education. The Essentials may be obtained from the office of the Executive Vice President of the American Board of Medical Specialties, 1007 Church St./Ste 404, Evanston, IL 60201-5913, or from the Council on Medical Education, American Medical Association, 515 N State St, Chicago, IL 60610.

The primary objective of medical specialty boards is the improvement of the quality of medical education and medical care. The primary functions of each of the medical specialty boards are to evaluate candidates in a medical specialty field who voluntarily appear for examination and to certify as diplomates those candidates who are qualified. To accomplish these functions, medical specialty boards determine whether candidates have received adequate preparation in accordance with established educational standards; provide comprehensive examinations designed to assess knowledge, skills, and experience requisite to the provision of high-quality patient care in that specialty; and certify those candidates who have satisfied the requirements.

In collaboration with the other organizations and agencies concerned, the approved medical specialty boards assist in improving the quality of medical education by elevating the standards of graduate medical education and approving facilities for specialty training.

The actual accreditation review for the approval of residency programs in each specialty is conducted by a Residency Review Committee on which the respective specialty board has equal representation with the AMA Council on Medical Education and, in some cases, with a related specialty society.

Medical specialty board certification is an additional process to receiving a medical degree, completing residency training, and receiving a license to practice medicine.

Certification requirements of each member board of ABMS are included on subsequent pages. Inquiries regarding specialty board certification requirements should be directed to the specialty board executive offices listed in Table 1. The member boards of ABMS publish materials containing statements on the requirements for certification, which are also reprinted in each edition of the Official American Board of Medical Specialties Directory of Board Certified Medical Specialists. This publication contains certification and biographical information on each specialist who has been certified by a member board of ABMS. The Directory is available from the ABMS or from Marquis Who's Who, 121 Channlon Rd, New Providence, NJ 07974.

American Board of Medical Specialties Information

American Board of Medical Specialties
1007 Church St / Ste 404
Evanston, IL 60201-5913
708 401-9091
Table 1. Member Boards of the American Board of Medical Specialties*

<table>
<thead>
<tr>
<th>Name of Board</th>
<th>Executive Officer</th>
<th>Address</th>
<th>Telephone</th>
</tr>
</thead>
<tbody>
<tr>
<td>American Board of Allergy and Immunology (conjoint board of the American</td>
<td>John W. Yunginger, MD</td>
<td>3624 Market St</td>
<td>215 349-9466</td>
</tr>
<tr>
<td>Board of Internal Medicine and the American Board of Pediatrics)</td>
<td>Executive Secretary</td>
<td>Philadelphia, PA 19104-2675</td>
<td></td>
</tr>
<tr>
<td>American Board of Anesthesiology</td>
<td>D. David Glass, MD</td>
<td>100 Constitution Plaza</td>
<td>203 522-9857</td>
</tr>
<tr>
<td>Secretary-Treasurer</td>
<td></td>
<td>Hartford, CT 06103-1906</td>
<td></td>
</tr>
<tr>
<td>American Board of Colon and Rectal Surgery</td>
<td>Heranid Abcarian, MD</td>
<td>20800 Eureka Rd/Ste 713</td>
<td>313 282-9400</td>
</tr>
<tr>
<td>Executive Director</td>
<td></td>
<td>Taylor, MI 49180</td>
<td></td>
</tr>
<tr>
<td>American Board of Dermatology</td>
<td>Harry J. Hurley, MD</td>
<td>Henry Ford Hospital</td>
<td>313 874-1088</td>
</tr>
<tr>
<td>Executive Director</td>
<td></td>
<td>Detroit, MI 48202</td>
<td></td>
</tr>
<tr>
<td>American Board of Emergency Medicine</td>
<td>Benson S. Mungur, PhD</td>
<td>3000 Coolidge Rd</td>
<td>517 332-4800</td>
</tr>
<tr>
<td>Executive Director</td>
<td></td>
<td>East Lansing, MI 48823</td>
<td></td>
</tr>
<tr>
<td>American Board of Family Practice</td>
<td>Paul R. Young, MD</td>
<td>2228 Young Dr</td>
<td>696 269-5626</td>
</tr>
<tr>
<td>Executive Director</td>
<td></td>
<td>Lexington, KY 40505</td>
<td></td>
</tr>
<tr>
<td>American Board of Internal Medicine</td>
<td>Harry R. Kimball, MD</td>
<td>3624 Market St</td>
<td>800 441-2246</td>
</tr>
<tr>
<td>President</td>
<td></td>
<td>Philadelphia, PA 19104-2675</td>
<td></td>
</tr>
<tr>
<td>American Board of Medical Genetics</td>
<td>Sharon B. Robinson, MS</td>
<td>9650 Rockville Pike</td>
<td>301 571-1825</td>
</tr>
<tr>
<td>Executive Secretary</td>
<td></td>
<td>Bethesda, MD 20814-3996</td>
<td></td>
</tr>
<tr>
<td>American Board of Neurological Surgery</td>
<td>Howard M. Eisenberg, MD</td>
<td>6550 Fannin St/Ste 2129</td>
<td>713 790-6015</td>
</tr>
<tr>
<td>Secretary-Treasurer</td>
<td></td>
<td>Houston, TX 77030-2701</td>
<td></td>
</tr>
<tr>
<td>American Board of Nuclear Medicine</td>
<td>Joseph F. Ross, MD</td>
<td>900 Veteran Ave</td>
<td>310 825-6787</td>
</tr>
<tr>
<td>President</td>
<td></td>
<td>Los Angeles, CA 90024-1766</td>
<td></td>
</tr>
<tr>
<td>American Board of Obstetrics and Gynecology</td>
<td>Norman L. Grant, MD</td>
<td>2915 Vine St/Ste 300</td>
<td>214 871-1619</td>
</tr>
<tr>
<td>Executive Director</td>
<td></td>
<td>Dallas, TX 75204-1069</td>
<td></td>
</tr>
<tr>
<td>American Board of Ophthalmology</td>
<td>William H. Spencer, MD</td>
<td>111 Presidental Blvd/Ste 241</td>
<td>215 664-1175</td>
</tr>
<tr>
<td>Executive Director</td>
<td></td>
<td>Bala Cynwyd, PA 19004</td>
<td></td>
</tr>
<tr>
<td>American Board of Orthopaedic Surgery</td>
<td>Donald B. Kettelkamp, MD</td>
<td>400 Silver Cedar Ct</td>
<td>919 929-7102</td>
</tr>
<tr>
<td>Executive Director</td>
<td></td>
<td>Chapel Hill, NC 27514</td>
<td></td>
</tr>
<tr>
<td>American Board of Otolaryngology</td>
<td>Robert W. Cantrell, MD</td>
<td>5615 Kirby Dr/Ste 936</td>
<td>713 528-6200</td>
</tr>
<tr>
<td>Executive Vice President</td>
<td></td>
<td>Houston, TX 77005</td>
<td></td>
</tr>
<tr>
<td>American Board of Pathology</td>
<td>William H. Hartmann, MD</td>
<td>PO Box 25915</td>
<td>813 286-2444</td>
</tr>
<tr>
<td>Executive Vice President</td>
<td></td>
<td>Tampa, FL 33622-5815</td>
<td></td>
</tr>
<tr>
<td>American Board of Pediatrics</td>
<td>James A. Stockman III, MD</td>
<td>111 Silver Cedar Ct</td>
<td>919 929-0461</td>
</tr>
<tr>
<td>President</td>
<td></td>
<td>Chapel Hill, NC 27514-1651</td>
<td></td>
</tr>
<tr>
<td>American Board of Physical Medicine and Rehabilitation</td>
<td>Joachim L. Opitz, MD</td>
<td>Norwest Ctr/Ste 674</td>
<td>507 282-1776</td>
</tr>
<tr>
<td>Executive Director</td>
<td></td>
<td>21 First St SW</td>
<td></td>
</tr>
<tr>
<td>American Board of Plastic Surgery</td>
<td>William D. Morain, MD</td>
<td>Seven Penn Ctr/Ste 400</td>
<td>215 587-3322</td>
</tr>
<tr>
<td>Secretary-Treasurer</td>
<td></td>
<td>1655 Market St</td>
<td></td>
</tr>
<tr>
<td>American Board of Preventive Medicine</td>
<td>Alice R. Ring, ICH, MD, MPH</td>
<td>9950 W Lawrence Ave/Ste 106</td>
<td>708 671-1750</td>
</tr>
<tr>
<td>Executive Director</td>
<td></td>
<td>Schiller Park, IL 60176</td>
<td></td>
</tr>
<tr>
<td>American Board of Psychiatry and Neurology</td>
<td>Stephen C. Scheiber, MD</td>
<td>500 Lake Cock Rd/Ste 335</td>
<td>708 945-7900</td>
</tr>
<tr>
<td>Executive Vice President</td>
<td></td>
<td>Deerfield, IL 60015</td>
<td></td>
</tr>
<tr>
<td>American Board of Radiology</td>
<td>M. Paul Capp, MD</td>
<td>5255 E Williams Circle/Ste 6800</td>
<td>602 790-2900</td>
</tr>
<tr>
<td>Executive Director</td>
<td></td>
<td>Tucson, AZ 85711</td>
<td></td>
</tr>
<tr>
<td>American Board of Surgery</td>
<td>Wallace P. Ritchie, Jr, MD, PhD</td>
<td>1617 John F Kennedy Blvd Ste 869</td>
<td>215 568-4000</td>
</tr>
<tr>
<td>Secretary-Treasurer</td>
<td></td>
<td>Philadelphia, PA 19103-1841</td>
<td></td>
</tr>
<tr>
<td>American Board of Thoracic Surgery</td>
<td>Richard J. Cleveland, MD</td>
<td>One Rotary Ctr/Ste 803</td>
<td>708 475-1520</td>
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* Revised November 1, 1994
American Board of Allergy and Immunology

(A Conjoint Board of the American Board of Internal Medicine and the American Board of Pediatrics)

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(The Board reserves the right to make changes in its policies and procedures at any time and cannot assume responsibility for giving advance notice thereof. All applicants are advised to contact the ABIm to determine whether the following information remains current.)

Organization

The American Board of Allergy and Immunology (ABAI), a Conjoint Board of the American Board of Internal Medicine (ABIM) and the American Board of Pediatrics (ABP) was established in 1971 as a nonprofit organization. It is a member Board of the American Board of Medical Specialties (ABMS). It is sponsored jointly by the American College of Allergy and Immunology (AAAAI), the American Academy of Pediatrics (AAP) - Section on Allergy and Immunology, the American College of Allergy and Immunology (ACAI), the American Medical Association (AMA) - Section on Allergy and Immunology, and the Clinical Immunology Society (CIS).

ABAI's major purposes are: (a) establish qualifications and examine physician candidates for certification as specialists in allergy/immunology; (b) serve the public, physicians, hospitals, and medical schools by providing the names of physicians certified as allergists/immunologists; (c) improve the quality of care in allergy/immunology to the public; (d) establish and improve standards for the teaching and practice of allergy/immunology; and (e) establish standards for training programs in allergy/immunology.

Significance of Certification

A certified specialist in allergy and immunology is a physician who has fulfilled the requirements of and has received certification as a diplomate of the ABIM and/or ABP followed by additional certification by the ABAI. Diplomates of the ABAI have detailed knowledge of the underlying pathophysiology and the method of diagnosis, treatment and prevention of allergic diseases such as allergic rhinitis, allergic asthma, urticaria, anaphylaxis, hypersensitivity pneumonitis, atopic and contact dermatitis, and allergic gastrointestinal disorders, as well as comparable clinical problems with an apparent allergic etiology or component such as vasomotor rhinitis, nonallergic asthma and idiopathic and/or hereditary forms of urticaria and/or angioedema. Expertise in the management of immunologic complications of these diseases is a further prerequisite.

In addition, diplomates of the ABAI possess breadth and depth in the understanding of immunochemistry, immunobiology and applied pharmacology and experience in the application of this knowledge in the diagnosis, management and prevention of immunologic diseases, such as inborn or acquired defects of host resistance, autoimmune diseases, bone marrow and solid organ transplantation, gene replacement therapy, adverse drug reactions, and other conditions associated with an abnormality of the immune system. Because allergy and clinical immunology is an evolving and expanding area of medicine, diplomates may vary in their detailed knowledge of some of the aspects of allergy/immunology as defined above. Diplomates have demonstrated to the satisfaction of their peers that they possess the general qualifications specified.

Certification Process

The ABAI is interested in candidates who have embarked voluntarily on a graduate program of study, with the express purpose of excelling in the practice of the specialty of allergy/immunology. In outlining its requirements, the ABAI hopes to help the candidate select superior educational programs that will develop his/her competency in allergy/immunology. The ABAI believes that all allergists/immunologists should have a fundamental knowledge of the biological science basic to this discipline. Such knowledge is essential to the continued professional progress of any qualified allergist/immunologist. The ABAI anticipates that adequate knowledge in basic science, as applied to this discipline, will be acquired by the candidates during a post-medical school training program. The ABAI wishes to emphasize that time and training are but a means to the end of acquiring a broad knowledge of allergy/immunology.

The candidate must demonstrate competency to the ABAI in order to justify certification in this discipline. The responsibility of achieving the knowledge rests with the candidate. The ABAI is responsible for the establishment and maintenance of the standards of knowledge required for certification. Each candidate for certification must satisfy the general and professional qualifications listed below.

The examination reflects the current Special Requirements for Residency Training in Allergy and Immunology and the Content Outline determined by the Board of Directors, which is distributed with the application, and the following:

Candidates for certification must be familiar with the fundamental elements of the immune system, such as the types of immune cells contained in the immune system, the collections of immune cells that form anatomical organs of immunity, the circulation patterns of immune cells, the biologic role of products of the immune system, and the abnormal conditions of the immune system that constitute immunopathology. Moreover, the candidate will be expected to be proficient in understanding the molecular basis of allergic and other immune reactions, including interaction between immune cells, cell membrane signal transduction pathways, gene expression, cytokine release, receptor targeting, cellular differentiation, and death. Proficiency must be demonstrated in the diagnosis and treatment of allergies and other immunologic diseases.

Since the ABAI is a Conjoint Board representing pediatric and adult medicine, the candidate must master the spectrum of allergic and immunologic diseases as it presents in children and adults. In
addition to a familiarity with allergic diseases, including allergic rhinitis, asthma, atopic dermatitis, and urticaria, the candidate must be knowledgeable in autoimmune conditions such as rheumatologic disease, inflammatory bowel disease, immune-based endocrinopathies, and neuroimmunodulatory disorders. Equally important as competence in diseases of immune dysfunction is the knowledge of human pathology that results from an absence of immunity, either whole or partial, congenital or acquired. Thus, an understanding of the primary immunodeficiency states is required, including congenital disorders, such as severe combined immunodeficiency and X-linked agammaglobulinemia; absence of specific complement components, such as C2 deficiency; lack of specific neutrophil function, such as chronic granulomatous disease; absence of specific adhesives cellular glycoproteins, such as leukocyte adhesion deficiency; and dysfunctional states of the immune system produced by external agents, such as the acquired immunodeficiency syndrome resulting from infection with the human immunodeficiency virus.

It is important for the candidate to demonstrate proficiency in the proper selection of appropriate clinical and laboratory tests that aid in the formulation of a clinical diagnosis based on first obtaining a detailed medical history and performing a complete physical examination. The candidate must understand the scientific basis of the following list (nonexclusive) of tests: serum immunoglobulin determination, functional antibody measurement, complement component and functional assays, lymphocyte subset analysis using monoclonal antibodies and flow cytometry, lymphocyte proliferation assays with mitogens and antigens, and neutrophil and monocyte chemotaxis, phagocytosis, and killing assessment. In addition, competence must be demonstrated with the use of molecular diagnostic techniques involving the binding of ligands to nucleic acid or polypeptide sequences, such as assays involving restriction fragment length polymorphisms, DNA binding proteins, messenger RNA, and Western blots. The importance of DNA replication technology must be understood, such as that demonstrated in the polymerase chain reaction. The molecular basis for immediate hypersensitivity skin testing must be understood in the context of the detailed molecular events occurring in the tissue mast cell and blood basophil, particularly the release of preformed mediators, such as histamine, and in the generation of newly formed mediators, such as leukotrienes and prostaglandins. Similarly, skin testing for T cell competence with recall antigens must be understood in relation to antigen presentation, cytokine secretion and interaction, and lymphocyte subset activation and function. Candidates must also have familiarity with the misuse of standard tests and with controversial tests in allergy and immunology. The candidate must understand the principles and analytic methods employed in experimental clinical studies for determining the diagnostic utility of specific tests and in evaluating the safety, toxicity, and efficacy of treatments and drugs for allergic and immunologic diseases. Candidates must also be familiar with the principles and methods employed in epidemiologic studies.

A corollary of the competence of the candidate in the pathophysiology, clinical presentation, and immunologic testing of allergic and other immunologic diseases is the knowledge of appropriate treatment options. For example, the common aspect of all types of asthma is the presence of airway inflammation. Definitive treatment of asthma demands that therapies be utilized that include interruption of the inflammatory response. Thus, use of drugs that decrease airway inflammation in asthma must be understood by candidates for certification. Based on the molecular knowledge of the allergic response, the candidate must appreciate the importance of allergen avoidance and medical treatment of allergic rhinitis before initiation of the more intense treatment of immunotherapy. In the latter therapy, candidates must demonstrate competence in allergen selection and administration in successful treatment regimens. Therapy for immunologic diseases must be understood, such as (noninvasive) Intravenous immune globulin for antibody deficiency, interferon for chronic granulomatous disease, HLA-identical and HLA-haploidentical (T cell-depleted) bone marrow transplants for cellular immunodeficiencies, and gene replacement therapy currently used for the immunodeficiency associated with adenosine deaminase deficiency as well as theoretical principles/potential in other congenital immune disorders.

The candidate qualifies for examination

1. By having passed the certification examination of the ABIM and/or ABP, which requires 3 years of postdoctoral training in programs accredited by the Accreditation Council for Graduate Medical Education (ACGME).
2. By presentation of evidence, acceptable to the Board of Directors, of at least 2 years of full-time residency/fellowship in allergy/immunology programs accredited by the ACGME or other acceptable training in allergy/immunology programs. (Programs are listed in the Graduate Medical Education Directory, published by the American Medical Association. Application forms for accreditation of new residency programs may be obtained on written request to the Secretary of the Residency Review Committee for Allergy and Immunology, 515 State St / Ste 2000, Chicago, IL 60610, 312 464-5505, 312 464-4088 fax).
3. By documentation from the training program director evaluating and substantiating clinical competence and 2 full-time years of allergy/immunology training. Areas to be reviewed include clinical judgment, medical knowledge, clinical skills of history taking, physical examination, and procedural skills, humanitarian qualities, attitudes and professional behavior, medical care (utilizing laboratory tests and diagnostic procedures), commitment to scholarship, and work habits. The training program director must also provide written evidence of the candidate's clinical experience and readiness to sit for the examination. In compliance with the ACGME Special Requirements for Residency Training in Allergy and Immunology, a semiannual record must be maintained with copies to the ABAI for tracking purposes. The Evaluation Form together with the Explanation of Ratings Scale may be obtained from the ABAI.
4. Upon written release of the candidate, documentation from the Chief of Medicine or Pediatrics, ABAI diplomates in the geographical area, chiefs of community hospitals, or officers of state or regional societies to verify the medical, ethical, and moral standing and clinical competence of the candidate as a specialist in allergy/immunology.
5. By evidence of a valid, unrestricted license to practice medicine in a state, territory, possession, or province of the United States or Canada or in the United States armed forces or a written explanation of extenuating circumstances.

Candidates with a restricted, suspended, or revoked license, at the time of application or examination, will not be admitted to the examination or certified.

As of January 1, 1992, ABAI limits the time interval for candidates to become certified to 6 years following completion of allergy/immunology training. In the case of candidates whose applications were received after January 1, 1992, certification is available according to ABAI policy in force at the time of initial registration. New candidates accepted after January 1, 1992, who do not gain certification within this 6-year interval can re-register in the certification process with documentation of:

1. A valid, unrestricted medical license as defined above
2. Evidence of good standing within the medical community
2. Recommendation letters from 2 ABAI diplomats attesting to the candidate's medical, ethical, and moral standing and clinical competence as a specialist in allergy/immunology

4. One hundred hours CME Category I credit in the previous 2 years

5. Successful performance on an ABAI qualifying examination

6. Payment of current registration and examination fees

Candidates beyond 2 years of their training will be required to include an appointment in good standing on a hospital staff.

Conjoint Committees—The nature of a Conjoint Board requires involvement of the sponsoring primary Boards through understanding, evaluation, trust, and input into critical areas of decision making. With these concepts in mind, the ABAI has formed two advisory committees with representation by the ABAI, the ABIM, and the ABP. The Conjoint Credentials Committee will review and recommend the credentials of candidates for the certification examination to the Board for its determination. The Conjoint Standards Committee will review and recommend the passing grade for the certification examination to the Board for its determination.

Recertification Process

Since 1977, the ABAI has offered its diplomates a clinically relevant voluntary recertification process every other year so that the effectiveness of each diplomate’s own efforts in continuing education would be evaluated. Driven by public pressure for accountability and credibility, most of the 34 member boards of the ABMS have adopted policies to award time-limited certificates with renewal through a program of mandatory recertification.

Beginning with 1988, new ABAI diplomates received certificates valid for ten years. Diplomates certified prior to 1989 are not affected by this policy. However, all diplomates, especially those involved in training programs, are strongly encouraged to recertify as often as possible, but at a maximum of every ten years. Maintaining a current certificate is an expression of professional accountability. Presently 746 ABAI diplomates hold time-limited certificates; renewal may be achieved in the interim. ABAI recommends recertification for diplomates holding time-unlimited certificates.

The recertification process is composed of the following: Part I—a home study, open-book examination available August 1 through December 31. The diplomate is required to attain a 90% correct score in order to gain entry to Part II—a proctored examination administered October 9, 1996. If such an absolute score is not attained, the diplomate will be required to pass a subsequent remedial home examination with a 90% correct score. ABAI anticipates that most diplomates seeking recertification will be successful. Standards are established to justify public confidence. As an alternative pathway, diplomates may recertify by passing the 1996 certification examination and meeting its rigorous standard for candidates completing accredited training.

Diplomates for recertification will be examined in the following areas of clinical science: immediate hypersensitivity, immunological disorders, pharmacology and therapeutics, specific diagnostic modalities, and allergens and antigens. Attention will also be given to the following areas of basic science: immune mechanisms, cells involved in immune responses, specific immune mechanisms, and laboratory tests.

The diplomate qualifies for examination by

1. Having previously been certified by the ABAI. Recertification in internal medicine or pediatrics is encouraged of ABAI diplomates. Mechanisms to facilitate dual recertification in the primary specialty and allergy/immunology are currently under negotiation with the parent Boards in cooperation with their plans for their subspecialties.

2. Documentation from physicians in the ABAI diplomate’s community that he/she currently practices the specialty of allergy and immunology.

3. Evidence of a valid, unrestricted license to practice medicine in a state, territory, possession, or province of the United States or Canada or in the United States armed forces or a written explanation of extenuating circumstances. Diplomates with a restricted, suspended, or revoked license at the time of application or examination will not be admitted to the examination or recertified.

Clinical and Laboratory Immunology

In 1983 the ABMS approved Certification of Special Qualification in Diagnostic Laboratory Immunology (DLI) for diplomates of the ABAI, ABIM, and ABP periodically. Such recognition was awarded in 1986, 1988, and 1990 following successful examination performance to specialists with significant experience (at least 4 years) in comprehensive DLI, or at least one year’s training in DLI who were involved in the teaching, research, or practice setting in which the diagnostic immunology laboratory is of central importance and were recognized by their peers as competent by way of their significant contributions to DLI.

In 1991 ABMS approved the change to a Certificate of Added Qualification in Clinical and Laboratory Immunology for those specialists with one year of formal training following subspecialty certification in an immunologically based subspecialty in order to indicate the clinical interpretative skills inherent in such training. Within the last 20 years in the combined clinical practice of allergy and immunology, the most rapid expansion of knowledge has occurred within the area of clinical immunology. This explosion of information has impacted both clinical practice and diagnostic laboratory testing. Previous certification in diagnostic laboratory immunology has been interpreted as demonstration of skills in laboratory testing in immunology rather than the broad span of both clinical and laboratory skills. With the goal of certifying candidates in the broader sense of clinical skills and laboratory expertise in clinical immunology, the ABAI recommends that candidates be prepared to demonstrate competency by examination in the theory and practice of the following (noninclusive) clinical areas: (1) allergic diseases, (2) primary and secondary immunodeficiency diseases, (3) autoimmune diseases, (4) immunologic aspects of bone marrow and organ transplantation, (5) immune aspects of gene replacement therapy, (6) immunologic aspects of organ-specific inflammatory conditions, and (7) immune aspects of malignancy and cancer. Although these clinical areas of competence are expected of the traditional candidate in allergy/immunology, the candidate for CLI will be expected to master these concepts to a far greater degree. Moreover, since upon certification the CLI candidate should be ready to supervise an immunology laboratory, competence will be demanded in the following (noninclusive) areas: (1) quantitation of immunoglobulins; (2) measurement of specific antibodies; (3) functional and quantitative complement tests; (4) assays of lymphocyte, monocyte, neutrophil, and basophil function and quantitation; (5) autoantibody assessment; (6) rapid tests for infectious diseases; (7) DNA amplification and binding tests; (8) genetic testing; (9) histocompatibility testing; (10) prenatal diagnosis; (11) quality control testing; (12) data management and statistical analysis; and (13) regulatory agency interactions.

The examination reflects the current Special Requirements for Residency training and the Content Outline determined by the Joint Testing Committee of the ABAI, ABIM, and ABP, which is distributed with the application.

The next examination will be administered to those ABAI, ABIM and ABP diplomates following a 2-year allergy/immunology training.
program or an immunologically related subspecialty training, e.g., rheumatology or infectious disease, etc., and such subspecialty certification where available, and a third year of CLI training. Competence must be verified by the program director responsible for the third year of training. Candidates whose applications were previously approved and whose training meets the Special Requirements for Residency Training in CLI may also file an application. Time-limited certificates will be awarded subject to revocation by the appropriate Board for cause.

Physicians taking the examination are expected to be concerned with applying laboratory methods to problems in human diseases involving changes in immune responses and will be able to perform, develop, interpret, and evaluate the clinical relevance of special laboratory procedures related to immunologically based diseases.

**Dual Certification**

Formal special pathways exist for individuals wishing to qualify for dual certification in either allergy/immunology and pediatric pulmonology or adult rheumatology. Additional information regarding special pathways is available upon request.

**Examination Methodology**

**A. Announcements**

The proctored certification and recertification examination is administered simultaneously in at least two United States locations in alternate years. The times and places are determined by the Board and announced in the appropriate specialty journals.

**B. Applications**

The act of filing an application is the candidate's responsibility. Application forms are available from the ABAI. They must be accompanied by two recently signed photographs and the necessary fees. Completed applications must be received on or before the close of registration (postmark applicable).

**C. Fees**

The fees are set forth in the instruction sheet included with the application. Candidates whose applications are rejected will receive a refund of the examination fee; however, the ABAI will retain the registration fee to cover the processing and evaluation costs. A non-refundable late fee will apply to those applications received after the close of registration and prior to the cancellation deadline.

**D. Cancellations**

Candidates who are accepted for examination, but fail to appear or who withdraw after the deadline for cancellation will have their examination fee placed into an escrow account for the next examination. For each subsequent examination, candidates will be required to pay the current registration and examination fees.

**E. Description**

The written examinations vary in length from certification being two 4-hour sessions, recertification being one 4-hour session, and CLI being two 3-hour sessions. The multiple-choice questions are objective and designed to test the individual's knowledge through recall, interpretation, and problem-solving. Each examination may contain previously used questions, new questions, or questions undergoing field testing. The individual's performance on field test questions will not be counted in determining results.

The ABAI does not sponsor or maintain any records on any courses that claim to be review courses in preparation for its examinations nor does it offer or endorse any specific publications or courses to prepare for its examinations.

**F. Disabled Candidates**

Individuals who may need accommodation during the examination must provide written details to the Board at the time of application for examination in order to receive information about ABAI's disability policy and approval.

**G. Irregular Behavior**

All Board examinations are supervised by proctors, who are required to report any irregular behavior, which includes, but is not limited to, giving or obtaining unauthorized information or aid before, during, or after the examination as evidenced by observation or subsequent statistical analysis of answer sheets. Offering financial or other benefit to a proctor, employee, or agent of the ABAI is forbidden.

**H. Results**

Individuals will be informed of the results of the examinations within 3 months of administration. The validity of the individual's performance on the examination is secured by every means available.

**I. Rescoring**

On written request and payment of a nominal fee, candidates may obtain rescoring within 3 months of receiving results. Answer sheets will be destroyed 12 months after administration of the examination.

**J. Certificates**

Candidates/diplomates who pass the Board's examinations will be certified or recertified in the specialty of allergy/immunology as of the date of the examination and receive a 10-year time limited certificate, subject to revocation by the Board for cause. This information becomes public information and will be listed in the *Official ABMS Directory of Board-Certified Specialists* and the *Official ABMS Directory of Certified Allergists and Immunologists*.

**Special Policies**

**A. Verification of Board Status**

The ABAI does not issue statements of or implying "Board eligibility" for any reason. The ABMS has recommended this policy. Medical specialty certification is a process of advancement through several individual steps including examination. Having completed one step, such as the minimal educational requirements, should not imply that a candidate is now possessed of some special qualification that is more or less equivalent to certification. For written verification of the status of an allergist/immunologist, ABAI charges a nominal fee per name.

**B. Revocation of Certificate**

Certificates issued by the ABAI shall be subject to revocation under specific circumstances, including but not limited to licensure revocation, restriction or suspension and/or establishment of guilt of felony, professional incompetence, professional misconduct, unethical conduct, harmful, deceptive, fraudulent advertising, or documented chemical use and dependency.

**C. Absences During Residency**

Absences during residency in excess of 2 months over the 2-year allergy/immunology training program, whether for vacation, sick leave, maternity leave, etc., should be made up. If the training program director believes that an absence of more than 2 months is justified, a letter of explanation should be sent by the director for review by the Credentials Committee.

**Changes in Policies and Procedures**

The Board reserves the right to make changes in its policies and procedures and fees at any time, and cannot assume responsibility
for giving advance notice thereof. The provisions of this publication are not to be construed as a contract between any candidate and the ABAL.

American Board of Anesthesiology

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(These criteria and conditions are subject to change without notice. All applicants are advised to contact the American Board of Anesthesiology [ABA] to ascertain whether the information below is current.)

Introduction

The chair of the anesthesiology department is the director of the residency program. Although the department chair may delegate responsibility for administering the program, the ABA corresponds officially about training matters only with the department chair.

The department chair (i.e., program director) has the responsibility to ensure that the training each resident completes under the aegis of the program will be acceptable to the ABA if the resident applies for certification. Nevertheless, every resident whose goal is to attain ABA certification has a responsibility to ensure that the training experiences will be acceptable to the ABA, since the resident ultimately bears the consequences if the training proves unacceptable. The responsibility of the one does not absolve the other from sharing the responsibility.

The department chair and the resident must know the Board's policies, published in the Booklet of Information, as they relate to acceptable training sequences, experiences and settings. Residents with specific questions about the acceptance of their training should read this booklet and speak with their department chair. If there remains any doubt about the acceptance of the training, the resident should then write the Secretary of the Board at the address of the ABA office.

Applicants and candidates for ABA examinations have the responsibility to know the Board's policies, procedures, requirements and deadlines regarding admission to and opportunities for examination.

Primary Certification in Anesthesiology Certification Requirements

To be certified as a diplomate of the American Board of Anesthesiology (ABA), each applicant must

A. Hold a permanent, unconditional, unrestricted, and unexpired license to practice medicine or osteopathy in one state or jurisdiction of the United States or province of Canada. The applicant must inform the ABA of any conditions or restrictions in force on any active medical license he or she holds. When there is a restriction or condition in force on any of the applicant's medical licenses, the Credentials Committee of the ABA will determine whether the applicant satisfies the licensure requirement of the ABA.

B. Fulfill all the requirements of the continuum of education in anesthesiology.

C. Have on file with the ABA a satisfactory certificate of clinical competence covering the final 6-month period of clinical anesthesia training in each anesthesiology residency program.

D. Satisfy all examination requirements of the Board.

E. Have a moral, ethical, and professional standing satisfactory to the ABA.

Persons certified by this Board are designated as diplomates in publications of the American Board of Medical Specialties and the American Society of Anesthesiologists.

Continuum of Education in Anesthesiology

The continuum of education in anesthesiology consists of 4 years of training subsequent to the date that the medical or osteopathic degree has been conferred. It includes 12 months of nonanesthesia clinical training (clinical base year) and 36 months of graded and increasingly complex clinical training in anesthesia (CA-1, CA-2, and CA-3 years).

A. The clinical base year must be devoted to clinical training other than clinical anesthesia. Acceptable training for the 12 months of clinical base shall include training in a transitional year, internal or emergency medicine, pediatrics, surgery or any of the surgical specialties, obstetrics and gynecology, neurology, family practice, or any combination of these as approved for the individual resident by the director of his/her training program in anesthesiology. Residents who begin the continuum after December 31, 1981, must complete the clinical base requirement before beginning clinical rotations in fulfillment of the CA-3 year requirement.

The clinical base year must be spent in residency programs in the United States that are accredited by the Accreditation Council for Graduate Medical Education (ACGME) or approved by the American Osteopathic Association. It also may be spent in Canadian institutions that are approved by the Royal College of Physicians and Surgeons of Canada and are affiliated with medical schools approved by the Liaison Committee on Medical Education.

B. The 3-year clinical anesthesia curriculum (CA-1-3) consists of experience in basic anesthesia training, subspecialty anesthesia training, and advanced anesthesia training. It is a graded curriculum of increasing difficulty and learning that is progressively more challenging of the resident's intellect and technical skills.

1. Experience in basic anesthesia training is intended to emphasize basic and fundamental aspects of the management of anesthesia. It is recommended that at least 12 months of the CA-1 and CA-2 years be spent in basic anesthesia training with a majority of this time occurring during the CA-1 year.

2. Subspecialty anesthesia training experiences are required in order to emphasize the theoretical background, subject material, and practice of subspecialties of anesthesiology. These subspecialties include obstetric anesthesia, pediatric anesthesia, cardiothoracic anesthesia, neuroanesthesia, anesthesia for outpatient surgery, recovery room care, regional anesthesia, and pain management. It is recommended that these experiences be in the form of subspecialty rotations, and that they occupy 7 to 12 months of the CA-1 and CA-2 years. The sequencing of these rotations in the CA-1 and CA-2 years is left to the discretion of the program director.
In addition to the above requirements for subspecialty experience, 2 months of training in the subspecialty of critical care medicine are required at some time during the clinical anesthesia years. An acceptable critical care rotation should include active participation in patient care by anesthesia residents, active involvement by anesthesia faculty experienced in the practice and teaching of critical care, and an appropriate population of critically ill patients, which includes a substantial number with multisystem disease whose care requires invasive monitoring and mechanical ventilation. Experience in routine, short-term, or overnight postanesthesia units or intermediate step-down units or emergency rooms does not fulfill this requirement.

3. Experience in advanced anesthesia training constitutes the CA-3 year. Clinical rotations in fulfillment of the CA-3 year requirement must follow completion of the clinical base and CA-1-2 years. The resident and program director in collaboration will select one of the three tracks designated as the advanced clinical track, subspecialty clinical track, or clinical scientist track. Regardless of the track selected, resident assignments in the CA-3 year should include the more difficult or complex anesthetic procedures and care of the most seriously ill patients.

Residents in the advanced clinical track are required to complete a minimum of 6 months of experience in advanced and complex clinical anesthesia assignments. The remaining 6 months may be spent in one to three selected subspecialty rotations or, alternatively, additional complex clinical anesthesia assignments may be selected.

Residents in the subspecialty clinical track may complete 5 to 12 months' experience in one subspecialty rotation along with up to 3 months of advanced experience in complex clinical anesthesia assignments. Alternatively, 6 months' experience in each of two subspecialty rotations may be selected. Such rotations may include some time assigned to medical or surgical activities directly related to the anesthetic subspecialty.

The clinical scientist track consists of clinical training and research experience during the anesthesia residency. There are two options for fulfilling the requirements of this track. Regardless of the option chosen, residents who elect this track must have a satisfactory clinical competence committee report for the 6-month period immediately preceding the beginning of the research experience.

Option A of the clinical scientist track may be fulfilled by completing 6 months of advanced or subspecialty clinical training and 6 months of clinical or laboratory investigative experience in the CA-3 year. Exceptions to this sequencing requirement must be requested prospectively by the resident's anesthesiology program director.

Option B of the clinical scientist track is intended for residents who plan a career as an academic investigator. After completing the clinical base year and 12 months of clinical anesthesia, the residents must complete 18 months of clinical anesthesiology training and 18 months of research experience. The anesthesiology program director may request up to 6 months of credit toward the research component of the academic investigator option for residents with a PhD degree in a discipline of relevance to the science or practice of anesthesiology, as determined by the Credentials Committee of the ABA. The ABA must receive the request after the resident has completed a minimum of six months of clinical anesthesia training satisfactorily and before the resident begins the research component. The request must include the anesthesiology program director's recommendation that a specific number of months of credit be granted, acceptable documentation of the resident's PhD degree and discipline, and a current copy of the resident's curriculum vitae.

The Credentials Committee of the ABA will consider such requests on an individual basis. Approval of requests for research credit for a PhD degree is at the discretion of the Credentials Committee. Credit that has been approved will be granted upon completion of the remaining requirements of the continuum of education in anesthesiology only for the resident whose overall clinical competence is graded satisfactory for every period of clinical anesthesia training.

C. Credit toward the CA-1-3 year requirements is granted by the ABA for clinical anesthesia training that satisfies all of the following conditions:

1. The CA-1-3 years of training are spent in or under the sponsorship of at most two ACGME-accredited anesthesia residency programs.

2. The period of clinical anesthesia training is in or under the sponsorship of any single program is at least 6 months.

3. The final period of training in each program ends with receipt of a satisfactory certificate of clinical competence. The final period must cover at least 6 months of clinical anesthesia training if the certificate of clinical competence for the immediately preceding period of training in the program was unsatisfactory. When the final period of training in any program ends with receipt of an unsatisfactory certificate, credit is granted for clinical anesthesia training in that program only to the date of the most recent satisfactory certificate received by the resident from that program.

4. No more than 6 months during the first 2 clinical anesthesia years, and a maximum of 12 months during the 3 years of clinical anesthesia training, are spent training outside the parent programs in affiliated or nonaffiliated institutions.

D. The Credentials Committee of the ABA considers requests for exceptions to policies regarding the training planned for residents, or other requests, on an individual basis. The ABA office must receive the request from the department chair on behalf of a resident at least 2 months before the resident begins the training in question. It is the responsibility of the department chair and the resident to ensure that the request is timely received.

Requests for approval of clinical anesthesia training outside the parent program must include a chronological description of the rotations, information about the supervision of the resident, and assurances that the resident will be in compliance with the limits on training outside the parent program if the request is approved. Further, the resident must remain enrolled in the parent program while training at an affiliated or nonaffiliated institution, and the parent program must report the training on the clinical competence committee report filed for the period on the resident's behalf.

**Principal Objectives**

The anesthesiology examination system of the ABA has two distinct parts, the written examination and the oral examination. Each is designed to assess different aspects of the candidate's ability to function as a consultant in anesthesiology as defined by the ABA.
A consultant in anesthesiology is a physician who possesses knowledge, judgment, adaptability, clinical skills, technical facility, and personal characteristics sufficient to carry out the entire scope of anesthesiology practice. A consultant in anesthesiology is able to communicate effectively with peers, patients, their families, and others involved in the medical community. The consultant can serve as an expert in matters related to anesthesiology, deliberate with others, and provide advice and defend opinions in all aspects of the specialty of anesthesiology. A Board-certified anesthesiologist is able to function as the leader of the anesthesiology care team.

Because of the nature of the role of the consultant anesthesiologist, the consultant must be able to deal with emergent life-threatening situations in an independent and timely fashion. The ability to acquire and process information in an independent and timely manner is central to ensure individual responsibility for all aspects of anesthesiology care. Adequate physical and sensory faculties, such as eyesight, hearing, speech, and coordinated function of the extremities, are essential to the independent performance of the functions of a consultant anesthesiologist. Freedom from the influence of or dependency on chemical substances that impair cognitive, physical, sensory, or motor functions also is an essential characteristic of the consultant anesthesiologist.

The written examination is designed to assess the knowledge base and the cognitive and deductive skills of the candidates. It is necessary for candidates to pass the written examination to qualify for the oral examination.

The oral examination is designed to measure those aspects of the candidate's ability not readily tested by written examination. Specifically, it is designed to assess the candidate's ability to manage patients presented in clinical scenarios. The candidate's decision-making ability is evaluated with particular emphasis on the scientific and clinical rationale that led to those decisions. In addition, the candidate's ability to manage surgical and anesthetic complications, as well as unexpected changes in the clinical situation, is assessed. The principal thrust is to determine whether candidates recognize the pertinent aspects of a clinical scenario, make rational diagnoses, and develop appropriate treatment protocols. Equally important, the oral examination is designed to establish whether the candidate can effectively communicate this information to others.

Irregular Behavior
The Board acts to maintain the integrity of its examination and certification process and to ensure the equitable and objective administration of its examinations to all candidates. Information about behavior that the Board considers a violation of the integrity of its examination and certification process is sent to all candidates scheduled for examination. Statistical analyses may be conducted to verify observations and reports of suspected irregularities in the conduct of an examination. The examination of a candidate whose conduct, in the Board's judgment, violates or attempts to violate the integrity of its examination and certification process will be invalidated and no results will be reported. Furthermore, the candidate will be subject to punitive action as determined by the Board. In that event the candidate would be informed of the reasons for the Board's actions and could request an opportunity to present information deemed relevant to the issue and to petition the Board to reconsider its decision.

Nonstandard Examination Administration
The ABA supports the intent of the Americans with Disabilities Act (ADA) and has a process for considering requests that its assessment programs be modified to accommodate an individual with a disability. Anyone having questions about the process should write or call the Executive Vice President of the Board at the ABA office.

Unforeseeable Events
In the event a natural disaster, war, government regulations, strikes, civil disorders, curtailment of transportation facilities, or other unforeseeable events make it inadvisable, illegal or impossible for the ABA to administer an examination to a candidate at the appointed date, time, and location, or to conclude a candidate's examination, the ABA is not responsible for any of the expense the candidate may have incurred to be present for the examination, nor for any such expense the candidate may incur for any substitute examination.

Application Form
Application for admission to the examination system of the ABA must be made to the Secretary upon a form prescribed by the Board. Photocopies or facsimiles of the application form are not acceptable.

Proper forms for making application and other information may be obtained by writing to the Secretary, American Board of Anesthesiology (100 Constitution Plaza, Hartford, CT 06103-1796). An applicant must request an application form by writing to the Board. Telephone requests are not acceptable.

Filing and Documentation Deadlines
The completed application and the appropriate fee must be received by the ABA on or before January 10 of the year in which the written examination is to be administered. The January 10 deadline for receipt of completed applications is absolute, and no application will be accepted after that date for any reason.

The ABA must receive all documentation it requires to make a determination about an applicant's qualifications for admission to examination no later than 60 calendar days after the deadline for filing an application for the examination. This includes, but is not limited to, references and evidence of medical licensure or of having qualified for such licensure. An application will not be accepted if the required documentation is not received by that date.

Applicant Declaration and Consent
The application form includes the following statement, which the applicant shall be required to sign.

"I hereby make application to the American Board of Anesthesiology, Inc., for the issuance to me of a certificate, and for examination relative thereto, all in accordance with and subject to its rules and regulations, and the fee requested. I agree to disqualification from examination or from the issuance of a certificate or to forfeiture and redelivery of such certification in the event that any of the statements hereofore made by me are false or in the event that any of the rules governing such examinations are violated by me or in the event that I did not comply with or shall violate any of the provisions of the Certificate of Incorporation or By-laws of the American Board of Anesthesiology, Inc., or both, as then constituted. I understand that the American Board of Anesthesiology, Inc. may report my status in the examination system, including the result of any written or oral examination, to the director of the program in which I completed my training in clinical anesthesiology either routinely or upon the request of such program director, and any score in psychometric analyses to confirm observations and reports of suspected irregularities in the conduct of an examination, and respond to any inquiry about my status in its examination system in accordance with its policy as then constituted. I authorize any and all repositories to grant access to or produce copies for the American Board of Anesthesiology, Inc. of all documents and records containing information and data pertaining to my practice of the medical specialty of anesthesiology and its subspecialties. I understand that such information and data will be used exclusively to study and as-
The application form also includes the following consent, which the applicant shall be required to sign.

"I, the undersigned, in connection with my application for certification by the American Board of Anesthesiology, Inc. hereby authorize the American Board of Anesthesiology, Inc. to request, procure and review any information regarding my medical practice, professional standing and character, including any information related to any disciplinary action related to the practice of medicine by any state licensing agency or any institution in which I have practiced medicine and any information related to any history of substance abuse or chemical dependency and any treatment or rehabilitation related thereto.

"I hereby authorize the American Board of Anesthesiology, Inc., to request and procure such information from any individual or institution, each of which shall be absolutely immune from civil liability arising from any act, communication, report, recommendation or disclosure of any such information even where the information involved would otherwise be deemed privileged so long as any such act, communication, report, recommendation or disclosure is performed or made in good faith and without malice.

"I hereby authorize the American Board of Anesthesiology, Inc., to supply a copy of this consent, which has been executed by me, to any individual or institution from which it requests information relating to me."

Entrance Requirements
To enter the examination system of the ABA, the applicant shall
A. Have graduated from a medical school approved by the Liaison Committee for Medical Education, or have met medical educational requirements otherwise acceptable to the ABA.
B. Provide evidence satisfactory to the Board of having been awarded a medical or osteopathic degree acceptable to the Board.
C. Provide evidence acceptable to the Board of having satisfied the licensure requirement for certification (see "Primary Certification in Anesthesiology Certification Requirements A").
Resident in training may submit evidence with their application of having qualified on examinations that provide eligibility for medical licensure (eg, NBME Part III or FLEX I and II). Residents who do so must have evidence of permanent and unrestricted medical licensure on file in the ABA office by November 30 of the year in which the written examination for which they applied is administered.
D. Have on file in the Board Office evidence of having satisfactorily fulfilled all requirements of the continuum of education in anesthesiology before the date of examination and after receiving a medical or osteopathic degree. Such evidence must include a satisfactory certificate of clinical competence covering the final 6 months of clinical anesthesia training in each residency program (see paragraph C in "Continuum of Education in Anesthesiology" and "Certificate of Clinical Competence"). A grace period will be permitted so that applicants completing this requirement by August 31 may apply for the immediately preceding July written examination.

E. Have on file with the Board evaluations of various aspects of his or her current practice of anesthesia as solicited by the Board in determining the applicant's qualifications for admission to the examination system. Such evaluations may be requested from the residency program director or others familiar with the applicant's current practice of anesthesiology. The clinical competence committee report from the department and the evaluation of the program director and others will be used as the basis for assessing admission qualifications. The response of the program director will be given considerable weight in these deliberations.

F. Submit proof with the application of having reestablished his or her qualifications for admission to the examination system only if residency training was completed more than 12 years before the date of application or a second or subsequent application has been declared void. Acceptable proof is documentation of having qualified on an entry examination designated by the Board or of having completed a 12-month term of additional clinical training in anesthesia in an ACGME-accredited program with receipt of a satisfactory certificate of clinical competence covering the final 6 months.

The Board has designated the examination administered annually by the Joint Council on In-Training Examinations as the entry examination. Information about the entry examination and a registration form may be obtained by writing the Joint Council c/o the American Society of Anesthesiologists.

The Board shall determine that entry into the examination system is merited when a judgment of adequate levels of scholarship and clinical competence can be made from the information submitted.

Certificate of Clinical Competence
The Board requires every residency training program to file, on forms provided by the Board, an evaluation of clinical competence in January and July on behalf of each resident who has spent any portion of the prior 6 months in clinical anesthesia training in or under the sponsorship of the residency program and its affiliates.

Entry into the examination system is contingent upon the applicant having a certificate of clinical competence on file with the Board attesting to satisfactory clinical competence during the final period of clinical anesthesia training in or under the sponsorship of each program (see "Continuum of Education in Anesthesiology" C[5] for details). The Board, therefore, will deny entry into the examination system until this requirement is fulfilled.

Absence from Training
The total of any and all absences during clinical anesthesia training may not exceed the equivalent of 20 working days per year. Attendance at scientific meetings, not to exceed 5 working days per year, shall be considered a part of the training program. Duration of absence during the clinical base year may conform to the policy of the institution and department in which that portion of the training is served. Absences in excess of those specified will require lengthening of the total training time to the extent of the additional absence.

A lengthy interruption in training may have a deleterious effect upon the resident's knowledge or clinical competence. Therefore, when there is an absence for a period in excess of 6 months, the cre-
dentals committee of the ABA shall determine the number of months of training the resident will have to complete subsequent to resumption of the residency program to satisfy the training required for admission to the ABA examination system.

Entrance Into the System
The ABA will notify an applicant who is admissible to its examination system after approval of all credentials. The Board, acting as a committee of the whole, reserves the right to reject an applicant for any reason deemed appropriate. If the applicant wishes to exercise the right to appeal this decision, the applicant shall inform the Board of this intention within 30 days of the date of receipt of the notification. The Board reserves the right to correct clerical errors affecting its decisions.

The Board Office is not responsible for breaks in communication with candidates that are due to circumstances beyond its control. Candidates must send the Board written notice of an address change immediately so that the Board's examination notices will not go astray, and they must call the Board Office if they do not receive an examination notice they are expecting within the time frame described above. The candidate's social security number is used by the Board for identification purposes and should be included on all correspondence with the Board.

Examination Notices
The ABA sends notification of an examination and a reply form to every candidate eligible to appear for the examination at least 4 months prior to the examination date. The notification is sent to candidates at their address of record on file in the Board Office.

Candidates are required to respond to every written and oral examination notice by the response date established by the ABA, whether or not they accept the examination opportunity. Every reply to an examination notice will be acknowledged within 2 weeks of its receipt in the Board Office.

Candidates scheduled to appear for examination are notified of the exact date, time, and location of their examination and the rules for its conduct approximately 2 months before the date of examination.

Under certain circumstances the ABA, entirely at its discretion, may grant a candidate's request for an excuse in advance from any scheduled examination without forfeiture of the opportunity. Such a request must be in writing, include the candidate's reason, and arrive in the ABA office by the response deadline specified in the examination notice or, for scheduled candidates, by the examination date. A candidate may be excused from examination if it is determined the reason warrants such a decision and there is sufficient time remaining in the application period to provide the number of examination opportunities the candidate is permitted. Candidates excused from an examination are required to appear at the next examination for which they are eligible.

Written Examination
Written examinations are held annually in locations throughout the United States and Canada on a Saturday in July. Written examinations cover the basic and applied aspects of physiological, physical, and clinical sciences. A passing grade, as determined by the Board, is required.

Oral Examination
Candidates who complete the written examination successfully must wait at least 6 months before being declared eligible for oral examination. Oral examinations are conducted in the spring and fall of each year at a single location in the United States. Examiners consist of Directors of the Board and others who assist as associate examiners. Oral examinations evaluate all phases of anesthesia, but emphasize clinical practice. A passing grade, as determined by the Board, is required.

It is an ABA regulation that candidates will not be scheduled to appear at consecutive oral examinations. Therefore, candidates who do not pass an oral examination for which they are scheduled, for whatever reason, are not eligible to appear at the next regularly scheduled oral examination.

The Board reserves the right to limit the number of candidates to be admitted to any examination. Places in the oral examination schedule are limited and assigned in the sequence acceptances are received. Candidates who are not given an examination appointment, whether or not they accepted the examination opportunity, are required to appear at the next examination for which they are eligible.

Fees
The application fee for primary certification in anesthesia is $1,100. It must accompany the application. For completed applications received between January 11 and November 20 of the previous year, the application fee is $1,300—a reduction of $100 for early filing.

The reexamination fee is $200 for the anesthesia written examination and $700 for the oral examination. The reexamination fee will be charged candidates whether they have failed a previous examination, canceled a scheduled appointment for examination, or failed to appear for any examination for which they were properly scheduled.

A charge of $50 will be made whenever a check in payment of a fee is returned for nonpayment.

A nonrefundable fee for administrative services is included in the application fee. It is $200 for applications for primary certification that arrive after November 20 and $100 for those received before that date. In the event an application is not accepted, or the application is accepted and subsequently withdrawn by the candidate, the fee for administrative services will be retained and the balance of the application fee will be refunded. No fee will be refunded if the candidate's notice of withdrawal from the examination system is received in the Board Office after the deadline by which candidates must notify the Board of their choice of test center for the first written examination for which they are eligible.

The ABA is a nonprofit organization. The fees for application and examination are computed on a basis of cost of maintaining the functions of the Board. The Board reserves the right to change the fees when necessary.

Reapplication
The application of a candidate who has failed to satisfy the examination requirements in the prescribed number of opportunities or for whatever reason shall be declared void. The physician may reapply by submitting a new application. Such application shall be subject to the fees, rules, privileges, and requirements that apply at the time of reapplication. The applicant who is adjudged to meet existing requirements will be readmitted into the examination system.

The reapplicant for primary certification who has had a second or subsequent application declared void for any cause, or has completed anesthesia residency training more than 12 years before the date of reapplication, must reestablish his/her qualifications for admission to the examination system before filing another application. The manner in which this may be done is described in paragraph F of the "Entrance Requirements" section. In all instances, the candidate must pass both the written and oral examinations under the new application.
Status of Individuals

The ABA reserves to itself exclusively the right to define and confer Board-eligible status whenever such status refers to an individual's relationship to the ABA examination and certification system. The ABA shall confer Board-eligible status only on physicians who are candidates in its examination system. Thus, physicians are Board-eligible only when they are eligible to appear for an ABA examination. Board-eligible status is not conferred indefinitely.

Inquiries about the current status of individuals should be addressed to the ABA office, which will respond with one of the following statements:
A. The physician is certified by the ABA.
B. The physician is Board-eligible in anesthesiology.
C. The physician is neither certified by the ABA nor Board-eligible.

Royal College Certification

The policy of the ABA regarding the Fellowship certificates awarded by the Australian and New Zealand College of Anaesthetists, the Royal College of Physicians and Surgeons of Canada, the Royal College of Anaesthetists of England, the Faculty of Anaesthetists of the Royal College of Surgeons in Ireland, and the College of Anaesthetists of South Africa expired December 31, 1989.

Holders of one of these Fellowships (ie, FFA) who wish to attain primary certification by the ABA may qualify to apply to the ABA for examination by satisfactorily completing one year of training as a CA-3 year resident in an ACGME-accredited program no later than August 31, 1996. The content of the year of training must have been approved prospectively by the Credentials Committee of the ABA. The ABA office had to receive the program director's request for prospective approval by December 31, 1993.

Alternatively, FFA may qualify to apply for admission to the ABA examination system by completing two years of full-time anesthesiology practice in the United States or its jurisdictions, the second year of which must have occurred between January 1, 1992, and December 31, 1995.

FFAs who qualify for ABA examination on the basis of a CA-3 year of training or two years of anesthesia practice in the United States must sit for their first ABA examination no later than 1997. The deadline for filing an application for the 1997 ABA examination is January 10, 1997.

All ABA policies that apply to other applicants and candidates for primary certification will apply to FFA applicants and candidates EXCEPT that FFA who completed their most recent year of clinical training in anesthesiology more than twelve years ago will not have to reestablish their admission qualifications before filing their first application with the ABA.

In order to be eligible to qualify for an ABA subspecialty certificate or the certificate of continued demonstration of qualifications, FFA who wish to attain an ABA subspecialty certificate are advised that one year of residency training in an ACGME-accredited anesthesiology program will not satisfy the training requirements for both primary and subspecialty certification. The ABA policies that apply to other applicants and candidates for subspecialty examination and certification will apply to FFA applicants and candidates without exception.

Alcoholism and Substance Abuse

The Americans with Disabilities Act (ADA) protects individuals with a history of alcoholism who are rehabilitated and protects former drug users who currently do not use drugs illegally. The ADA supports the intent of the ADA.

The ABA will admit qualified applicants and candidates with a history of alcoholism to its examination system and to examination if they submit documentation acceptable to the ABA that they do not currently pose a direct threat to the health and safety of others.

The ABA will admit qualified applicants and candidates with a history of illegal use of drugs to its examination system and to examination if they submit documentation acceptable to the ABA that they currently are not actively engaged in the illegal use of drugs.

After a candidate with a history of alcoholism or illegal use of drugs satisfies the examination requirements for certification, the ABA will determine whether it should defer awarding its certification to the candidate for a period of time in order to avoid certification of a candidate who poses a direct threat to the health and safety of others. If the ABA determines that deferral of the candidate's certification is appropriate because the candidate does currently pose a threat to the health and safety of others, the ABA will determine the length of time the candidate's certification is deferred following an individual assessment of the specific circumstances of the candidate's history of alcoholism or illegal use of drugs.

Revocation of Certificate

A certificate is issued by the Board with the understanding that it remains the property of the Board during the life of the diplomate. Any certificate issued by the Board shall be subject to revocation in the event that
A. The issuance of such certificate or its receipt by the person so certified shall have been contrary to, or in violation of, any provision of the certificate of incorporation of this Board or its by-laws; or
B. The person certified shall not have been eligible to receive such certificate whether or not the facts making him/her ineligible were known to, or could have been ascertained by, the Board or any of the directors at the time of issuance of such certificate; or
C. The person certified shall have made any misstatement of fact in his or her application for such certificate or in any other statement or representation to the Board or its representatives; or
D. The person certified shall fail to maintain a moral, ethical, and professional standing satisfactory to the Board.

The Board shall be the sole judge of whether the evidence or information before it is sufficient to require or permit revocation of any certificate issued by the Board, and the decision of the Board shall be final.

Recertification

Insufficient confidence in currently available methods of assessing continuing competence of the practicing anesthesiologist makes it inappropriate to implement a recertification process at this time. The ABA will continue to study all options for a meaningful recertification program but intends to expend its major effort and resources toward improvement of the process leading to primary certification and the voluntary program for continued demonstration of qualifications.

Records Retention

The ABA retains documents pertaining to an individual's residency training, application for certification, examination opportunities, and examination results for the sole purpose of determining that its requirements for admission to examination for certification are fulfilled.

In the absence of an application for certification, documents pertaining to the ABA entrance requirements are retained for 7 years from the date of the most recent correspondence to or from the ABA regarding the requirements. Documents pertaining to an unsuccessful application are retained until the individual submits another application to the ABA or the aforementioned 7-year period expires, whichever occurs first. Documentation corroborating the re-
sults of a candidate's examination is retained until one year after the date of the most recent correspondence to or from the ABA regarding the results. Documentation corroborating the candidate's fulfillment of the ABA certification requirements is retained until 1 year after the date of the most recent correspondence to or from the ABA regarding the candidate's certification by the ABA. The ABA sees to the secure destruction of the documents in its file for an individual when the period specified for retention of the documents has expired.

The ABA retains indefinitely an electronic record for residents who trained in an AGMME-accredited anesthesiology program. This record includes entries that identify the training program, the dates of training, and the overall evaluation of the resident.

The ABA retains indefinitely microfiche and electronic records for candidates issued its certification. These records include documents and entries attesting that each certification requirement was met.

Certification of Special Qualifications in Critical Care Medicine

A. Definition of Critical Care Medicine
The discipline of critical care medicine has evolved over the past few decades in parallel with the development of techniques and technology for acute and long-term life support of patients with multiple organ system derangement. Because the problems encountered in the critically ill patient encompass aspects of many different specialties, critical care medicine is a multidisciplinary endeavor that crosses traditional department and specialty lines.

The critical care medicine physician is a specialist whose knowledge is of necessity broad, involving all aspects of management of the critically ill patient, and whose primary base of operation is the intensive care unit (ICU). This physician has completed training in a primary specialty and has received additional training in critical care medicine aspects of many disciplines. This background enables the physician to: work in concert with the various specialists on the patient care team in the ICU; utilize recognized techniques for vital support; teach other physicians, nurses, and health professionals the practice of intensive care; and foster research.

Thus, critical care medicine is a discipline based in an intensive care unit with its primary concern being the care of the patient with a critical illness.

B. Certification Requirements
To be awarded a certificate of special qualifications in critical care medicine by the ABA, each applicant must
1. Be a diplomate of the ABA.
2. Fulfill the licensure requirement for certification (see "Primary Certification in Anesthesiology Certification Requirements" A).
3. Fulfill the requirement of the continuum of education in critical care medicine as defined by the ABA.
4. Satisfy the critical care medicine examination requirement of the ABA.

C. Continuum of Education in Critical Care Medicine
The continuum of education in critical care medicine consists of 12 months of formal training in critical care medicine following completion of the continuum of education in anesthesiology. The training must be in a critical care medicine program accredited by the Residency Review Committee for Anesthesiology.

Training in critical care medicine should not be interrupted by frequent or prolonged periods of absence. Absences during the year of formal training in excess of that permitted by the institution or department will require lengthening of the total training time to the extent of the additional absence.

D. Entrance Requirements
To enter the critical care medicine examination system of the ABA, the applicant shall
1. Submit evidence that he/she is certified by the ABA.
2. Submit proof of having fulfilled the licensure requirement for certification.
3. Have on file in the ABA office documentation of having fulfilled the requirement of the continuum of education in critical care medicine.

Evaluation of various aspects of the applicant's credentials and performance will be solicited by the ABA in assessing his or her qualifications for admission to its critical care medicine examination system. The Board shall determine that entry into its critical care medicine examination system is merited when judgment of adequate levels of scholarship and clinical competence can be made from the information submitted.

Certification by other entities will not be considered as meeting any of the requirements for entrance into the ABA critical care medicine examination system.

E. Application Procedure
1. The proper application form and other information may be obtained by writing to the Secretary, the American Board of Anesthesiology (100 Constitution Plaza, Hartford, CT 06106-1786). An applicant must request an application form by writing to the Board. Telephone requests are not acceptable.

Application for admission to the examination system of the ABA must be made to the Secretary upon a form prescribed by the Board. Photocopies or facsimiles of the application form are not acceptable.

2. The application form includes the identical statements of declaration and consent included in the application for primary certification. The applicant for examination in critical care medicine shall be required to sign each statement.

F. Filing and Documentation Deadlines
The completed application and the appropriate fee for the 1995 critical care medicine examination must be received by the ABA on or before March 1, 1995. Applications received after the deadline will not be accepted.

The ABA must receive all documentation it requires to make a determination about an applicant's qualifications for admission to examination no later than May 1, 1995. This includes but is not limited to references, evidence of medical licensure, and verification that the training requirement is met. An application will not be accepted if the required documentation is not received by that date.

G. Fees
The application fee for admission to the critical care medicine examination system is $1,000. It must accompany the application. A nonrefundable fee for administrative services of $250 is included in the application fee. The reexamination fee for the critical care medicine examination is $750. The ABA policies regarding the administrative services fee and the reexamination fee are stated under "Filing and Documentation Deadlines."

A charge of $50 will be made whenever a check in payment of a fee is returned for nonpayment.

H. Examination System
The ABA will notify an applicant who is accepted as a candidate for its critical care medicine examination after approval of all credentials. The Board, acting as a committee of the whole, reserves the right to reject an applicant for any reason deemed appropriate. The Board reserves the right to correct clerical errors affecting its decisions.
The written examination in critical care medicine is designed to test for the presence of basic knowledge that is considered essential for the ABA diplomate to function as a practitioner of critical care medicine. The examination analyzes the cognitive and deductive skills, as well as the clinical judgment, of the candidates.

Current plans are to administer the critical care medicine examination at one or more locations in the United States no more frequently than once every 2 years. The ABA will mail notice to all eligible candidates announcing the location(s) and date of the critical care medicine examination approximately 4 months prior to the date of its scheduled administration.

Every candidate is given three opportunities to satisfy the critical care medicine examination requirement. Failure to satisfy the examination requirement within the three opportunities or the prescribed time, whichever comes first, will result in the candidate's application being declared void.

The prescribed period of time for the successful completion of the examination for certification of special qualifications in critical care medicine is the time between the date of the first examination for which the candidate is declared eligible and the next three consecutive administrations of the critical care medicine examination. Thus, the ABA, at its discretion, may excuse a candidate from at most one critical care medicine examination without forfeiture of an opportunity.

The ABA policies regarding examination notices, candidate responses, address changes, and excused absences are stated on the preceding pages. Its policies regarding examination under nonstandard conditions, irregular examination behavior, and unforeseeable events may also be found on the preceding pages.

I. Status of Individual

Inquiries about the current status of physicians relative to the ABA critical care medicine certification system should be addressed to the ABA office. The ABA will affirm the status of physicians who are certified in critical care medicine by the ABA. For others, the response to the inquiry will be in keeping with the ABA policy.

J. Reapplication

The application of a candidate who has failed to satisfy the critical care medicine examination requirement in the prescribed number of opportunities or time, for whatever reason, shall be declared void. The physician may reapply by submitting a new application. Such application shall be subject to the fees, rules, privileges, and requirements that apply at the time of reapplication. The applicant who is adjudged to meet existing requirements will be readmitted into the examination system.

Every reapplicant who qualified previously by Temporary Criteria is required to have completed satisfactorily the 1-year Continuum of Education in Critical Care Medicine.

Certification of Added Qualifications in Pain Management

A. Definition of Pain Management

Pain management is the medical discipline concerned with the diagnosis and treatment of the entire range of painful disorders. Because of the vast scope of the field, pain management is often considered a multidisciplinary subspecialty. The expertise of several disciplines is brought together in an effort to provide the maximum benefit to each patient. Although the care of patients is heavily influenced by the primary specialty of physicians who subspecialize in pain management, each member of the pain treatment team understands the anatomical and physiological basis of pain perception, the psychological factors that modify the pain experience, and the basic principles of pain management.

B. Certification Requirements

To be awarded a certificate of added qualifications in pain management by the ABA, each applicant must

1. Be a diplomate of the ABA.
2. Fulfill the licensure requirement for certification (see "Primary Certification in Anesthesiology Certification Requirements").
3. Fulfill the requirement of the continuum of education in pain management as defined by the ABA.
4. Satisfy the pain management examination requirement of the ABA.

The ABA certificate of added qualifications in pain management will be valid for a period of 10 years from its date of issuance. It is left to the holder of the subspecialty certificate when is reapply to the ABA for examination and renewal of the pain management certification.

C. Continuum of Education in Pain Management

The continuum of education in pain management consists of 12 months of formal training in acute, chronic, and oncology pain management. The 12 months of pain management training must follow the successful completion of the continuum of education in anesthesia. The training must be in a pain management program accredited by the Residency Review Committee for Anesthesiology. However, if the training begins before January 1, 1995, and is approved prospectively by the Credentials Committee of the ABA, it may be in an ACGME-accredited anesthesiology program that does not yet have an accredited pain management program.

Training in pain management should not be interrupted by frequent or prolonged periods of absence. Absences during the year of formal training in excess of that permitted by the institution or department will require lengthening of the total training time to the extent of the additional absence.

D. Entrance Requirements

To enter the pain management examination system of the ABA, the applicant shall

1. Submit evidence that he/she is certified by the ABA.
2. Submit evidence acceptable to the Board of having satisfied the medical licensure requirement for certification.
3. Have on file in the Board Office documentation of having fulfilled the requirements of the continuum of education in pain management (see "Continuum of Education in Pain Management" or "Temporary Criteria").

Evaluation of various aspects of the applicant's credentials and performance will be solicited by the ABA in assessing his/her qualifications for admission to its pain management examination system. The Board shall determine that entry into its pain management examination system is merited when judgment of adequate levels of scholarship and clinical competence can be made from the information submitted.

Certification by other entities will not be considered as meeting any of the requirements for entrance into the ABA pain management examination system.

E. Temporary Criteria

The ABA recognizes that initially many applicants will not have received formal pain management training. Therefore, it has established temporary criteria that eligible pain management practitioners can fulfill to satisfy the requirement of the Continuum of Education in Pain Management. Applicants who qualify under the temporary criteria must satisfy the entrance requirements listed under "Entrance Requirements" 1 and 2.

Applicants cannot qualify under temporary criteria for pain management examinations that are administered after 1998.
1. Applicants are eligible to qualify under the temporary criteria only if they complete the Continuum of Education in Anesthesiology before September 1, 1993. Candidates whose first application is declared void following three opportunities to satisfy the examination requirement may not qualify for readmission to the examination system under the temporary criteria.

2. The temporary criteria can be fulfilled in the following ways:
   a. The satisfactory completion of 12 months of formal training in acute, chronic, and oncology pain management, whose content and setting is acceptable to the ABA. Training in fulfillment of the temporary criteria that begins after May 1, 1994, must be approved prospectively by the Credentials Committee of the ABA. The Credentials Committee will not accept requests for prospective approval that are received after May 1, 1997.
   b. The completion of the equivalent of 24 months of continuous, full-time pain management practice.

   Credit will be granted for pain management practice only during the 8 years immediately preceding the date of the examination for which application is made. The applicant must be practicing pain management continuously during the period for which credit is requested. Practice credit will be granted in proportion to the percent of the applicant’s time each year spent practicing pain management, except that no credit will be granted for any year in which less than 25% of the applicant’s professional time was spent practicing pain management.

   Verification of the percent of professional time devoted annually to the practice of pain management and of clinical competence in anesthesiology pain management must be documented for the applicant by the Chief of Anesthesiology or the Pain Management Director. If the applicant holds both of these titles, another diplomate of the ABA must document these facts for the applicant.

   c. A combination of pain management training and continuous practice that the Credentials Committee of the ABA deems to be the equivalent of 12 months of full-time pain management training.

   Exceptions to the above temporary criteria that could be considered equivalent combinations of training and practice will be considered by the Credentials Committee of the ABA on an individual basis.

F. Application Procedure

The proper application form and other information may be obtained by writing to the Secretary, American Board of Anesthesiology, 100 Constitution Plaza, Hartford, CT 06103-1796. An applicant must request an application form by writing to the Board. Telephone requests are not acceptable.

Application for admission to the examination system of the ABA must be made to the Secretary upon a form prescribed by the Board. Photocopies or facsimiles of the application form are not acceptable.

The application form includes the identical statements of declaration and consent included in the application for primary certification. The applicant for examination in pain management shall be required to sign each statement.

G. Filing and Documentation Deadlines

The completed application and the appropriate fee for the 1996 pain management examination must be received by the ABA on or before March 1, 1996. Applications received after the deadline will not be accepted.

The ABA must receive all documentation it requires to make a determination about an applicant’s qualifications for admission to examination no later than May 1, 1996. This includes but is not limited to references, evidence of medical licensure, and verification that the training requirement or temporary criteria are met. An application will not be accepted if the required documentation is not received by that date.

H. Fees

The application fee for admission to the pain management examination system is $1,000. The fee must accompany the application. A nonrefundable fee for administrative services of $250 is included in the application fee. The reexamination fee for the pain management examination is $750. The ABA policies regarding the administrative services fee and the reexamination fee are stated on the preceding pages.

A charge of $50 will be made whenever a check in payment of a fee is returned for nonpayment.

I. Examination System

The ABA will notify an applicant who is accepted as a candidate for its pain management examination after approval of all credentials. The Board, acting as a committee of the whole, reserves the right to reject an applicant for any reason deemed appropriate. The Board reserves the right to correct clerical errors affecting its decisions.

The written examination in pain management is designed to test for the presence of basic knowledge that is considered essential for the ABA diplomate to function as a practitioner of pain management. The examination analyzes the cognitive and deductive skills as well as the clinical judgment of the candidates.

Current plans are to administer the pain management examination at one or more locations in the United States no more frequently than once every 2 years. The ABA will mail notice to all eligible candidates announcing the location(s) of the pain management examination at least 4 months prior to the date of its scheduled administration.

Every candidate is given three opportunities to satisfy the pain management examination requirement. Failure to satisfy the examination requirement within the three opportunities or the prescribed time, whichever comes first, will result in the candidate’s application being declared void.

The prescribed period of time for the successful completion of the examination for certification of added qualifications in pain management is the time between the date of the first examination for which the candidate is declared eligible and the next three consecutive administrations of the pain management examination. Thus, the ABA, at its discretion, may excuse a candidate from at most one pain management examination without forfeiture of an opportunity.

The ABA policies regarding examination notices, candidate responses, address changes, and excused absences are stated on the preceding pages. Its policies regarding nonstandard examination administration, irregular examination behavior, and unforeseeable events may also be found on the preceding pages.

J. Status of Individuals

Inquiries about the current status of physicians relative to the ABA pain management certification system should be addressed to the ABA office. The ABA will affirm the status of physicians who are certified in pain management by the ABA. For others, the response to the inquiry will be in keeping with ABA policy.

K. Reapplication

The application of a candidate who has failed to satisfy the examination requirement in the prescribed number of opportunities or time for whatever reason shall be declared void. The physician may reapply by submitting a new application. Such application shall be subject to the fees, rules, privileges, and requirements that apply at the
time of reapplication. The applicant who is adjudged to meet existing requirements will be readmitted into the examination system.

Every applicant who qualified previously by temporary criteria is required to have completed satisfactorily the 1-year continuum of education in pain management.

Test Dates and Deadlines

Written Examinations
July 8, 1996—Examination date
November 20, 1995—Early filing deadline for 1996 application with reduced fee
January 10, 1996—Application deadline
March 10, 1996—Documents deadline
May 1, 1996—Deadline for reply to examination notice
July 13, 1996—Examination date

Oral Examinations
April 24–28, 1996—Examination dates
October 9–13, 1995—Examination dates
April 22–27, 1996—Examination dates
September 30—October 4, 1996—Examination dates

Critical Care Medicine Examination
March 1, 1995—Application deadline
May 1, 1995—Documents deadline
July 1, 1995—Deadline for reply to examination notice
September 8, 1995—Examination date

Pain Management Examination
March 1, 1996—Application deadline
May 1, 1996—Documents deadline
July 1, 1996—Deadline for reply to examination notice
September 7, 1996—Examination date

American Board of Colon and Rectal Surgery

John M MacKeigan, MD, President, Grand Rapids, Michigan
David J Schoetz, Jr, MD, Vice President, Burlington, Massachusetts
H Randolph Bailey, MD, Houston, Texas
Robert W Beart, Jr, MD, Los Angeles, California
Marvin L Corman, MD, Santa Barbara, California
Thomas H Dailey, MD, New York, New York
John M Daly, MD, New York, New York
Theodore E Eisenstat, MD, Plainfield, New Jersey
Philip H Gordon, MD, Montreal, Quebec
Richard L Nelson, MD, Chicago, Illinois
David A Rothenberger, MD, St Paul, Minnesota
Herard Abarcanid, MD, Secretary-Treasurer/Executive Director, Taylor, Michigan

(These criteria and conditions are subject to change without notice. All applicants are advised to contact the American Board of Colon and Rectal Surgery to ascertain whether the information below is current.)

General Qualifications and Requirements

All candidates shall comply with the following regulations:
1. A candidate shall appear personally before the Board and shall submit to the required examinations.
2. A candidate shall limit the majority of his/her practice to colon and rectal surgery.
3. A candidate may be required to deliver to the Board sufficient case reports to demonstrate proficiency in colon and rectal surgery.
4. A bibliography of papers and books published by the candidate shall be submitted to the Board upon its request.
5. The moral and ethical fitness of a candidate must be satisfactory to the Board and in conformity with the Statements of Principles of the American College of Surgeons, and the Principles of Medical Ethics of the American Medical Association. Practices not conforming therewith may result in rejection of an application or in deferral of examination until such matters have been resolved satisfactorily.

Professional Qualifications

1. A candidate must have completed an accredited residency program in colon and rectal surgery.
2. A candidate must have an unrestricted license to practice medicine in the country of his/her residence.
3. A candidate must successfully complete the qualifying examination of the American Board of Surgery before being admitted to the American Board of Colon and Rectal Surgery written examination (Part I).
4. A candidate must achieve certification by the American Board of Surgery before being admitted to the American Board of Colon and Rectal Surgery oral examination (Part II).

Application for Examination

Each candidate for examination must complete and submit an application for examination, which may be obtained from the Secretary of the Board. Applications must be submitted before July 15 of each year.

Within 2 weeks after conclusion of the training program, the applicant must submit to the Secretary of the Board a prescribed form, listing all operative procedures performed during the training period. This form is available from the Secretary of the Board and must be countersigned by the program director when it is submitted.

The application must also be accompanied by two unmounted, recent photographs of the applicant and the required application fee.

The acceptability of a candidate for examination depends not only upon completion of the requirements listed under General Qualifications and Requirements and Professional Qualifications but also upon information available to the Board regarding the candidate’s professional maturity, surgical judgment, and technical competence.

Examinations

To achieve certification by the American Board of Colon and Rectal Surgery, a candidate must pass a written examination (Part I) and an oral examination (Part II). The written examination is offered in the spring of the year and a candidate is required to pass this examination before being permitted to take the oral examination. The oral examination is given in the fall of the year.

Examinations are conducted at times and places determined by the Board, and this information may be obtained from the Board Office. It is also published in Diseases of the Colon and Rectum and in the Journal of the American Medical Association. Examinations will be held in one designated city in the United States.

Part I—Written Examination

The written examination is an assessment of a candidate’s knowledge of the theory and practice of colon and rectal surgery with separate examinations in pathology and radiology. The written portion of the examination is a 4-hour test of multiple choice questions covering the spectrum of colon and rectal surgery and the body of
basic science pertinent to it. The pathology and radiology portions of the examination each are 1 hour in length and consist of questions and slide presentations.

Part II—Oral Examination
The oral examination is conducted by members of the Board or its designated examiners. Its objective is to evaluate the candidate’s clinical experience, problem-solving ability, and surgical judgment, and to ascertain the candidate’s knowledge of current literature on colon and rectal diseases and surgery. Each candidate will undergo at least three 36-minute oral examinations by three two-member examining teams.

Examination Results
The Board makes every effort to be as prompt as possible in notifying candidates of their examination results, and letters of notification may be expected from 4 to 6 weeks following the examination.

Reexaminations
A candidate who has failed either the written or oral part of the examination may be reexamined after 1 year has elapsed.

A candidate who fails to pass either the written or oral portion of the examination may repeat that part of the examination twice, thus offering the candidate three opportunities to pass each part of the examination.

A candidate who fails to pass either the written or oral portion of the examination three times may not repeat the examination without satisfactory completion of an approved colon and rectal surgery residency program and submission of a new application for examination.

Status of Applicant
The Board does not use or sanction the terms “Board-eligible” or “Board-qualified.” The status of an applicant with the Board is determined by and varies with the current status of his/her credentials.

A candidate must apply to the Board’s certification process within 5 years after completion of approved colon and rectal surgery training.

The entire certification process with the Board must be successfully completed within 7 years following approval of the formal application. In addition, a candidate whose application for examination has been approved, but who does not take the examination within 3 years, must submit a new application.

In exceptional or unusual circumstances, the Board may, at its discretion, waive one or more of the limitations specified under “Status of Applicant.”

Fees
Application fee: a nonrefundable fee of $300 shall accompany the application.

Written examination fee (Part I): a fee of $400 is due and payable when the candidate is notified of approval to take the written examination.

Oral examination fee (Part II): a fee of $500 is due and payable when the candidate is notified of approval to take the oral examination.

Reexamination fee: fees for reexamination are the same as shown above for each examination.

Withdrawal from examination: a candidate who withdraws must notify the Board Office at least 10 business days before a scheduled examination. A candidate who fails to appear for examination or who withdraws without giving at least 10 days’ notice as defined above will forfeit $100 of the designated examination fee and will have to resubmit the forfeited amount before being admitted to the next scheduled examination.

Late applications: recognizing that a situation may arise that prevents an applicant from meeting the July 15 deadline, the Board has a provision for late applications. Late applications are those that are postmarked from July 16-August 15 each year. There is a nonrefundable late application fee of $100, bringing the total processing fee of a late application to $400. No applications postmarked after August 15 will be accepted.

Fees are subject to change as directed by the Board.

Appeals
Any candidate who is not acceptable to the Board for examination or who has failed an examination, totally or in part, may appeal such a decision by the Board and may, by registered letter to the Secretary of the Board, request a hearing, specifying the reasons therefor. An ad hoc hearing committee shall be appointed within 30 days to conduct the hearing.

If the decision of the hearing committee is not satisfactory, the candidate, by registered letter to the Secretary of the Board within 21 days after receipt of the notice of an adverse decision, may request an appellate review by the Board.

Certification
A candidate who has met all the requirements and successfully completed the examinations of the American Board of Colon and Rectal Surgery will be issued a certificate attesting to his/her qualifications in colon and rectal surgery. The certificate shall be signed by the president or vice president, and the secretary, and shall bear the corporate seal of the Board.

The certificate granted by the Board does not confer privilege or license to practice colon and rectal surgery, but is evidence that a physician’s qualifications for specialty practice are recognized by his/her peers. It is not intended to define the requirements for membership on hospital staffs, to gain special recognition or privileges for its diplomates, to define the scope of specialty practice, or to state who may or may not engage in the practice of the specialty.

Unless the candidate specifies otherwise, the Board forwards the names of candidates who have achieved certification to the American Board of Medical Specialties for publication in the Official American Board of Medical Specialties Directory of Board Certified Medical Specialists, published jointly by the American Board of Medical Specialties (ABMS) and Marquis Who’s Who.

Time-Limited Certification
Beginning with those candidates who passed the certifying examination in 1980 and thereafter, the American Board of Colon and Rectal Surgery will issue time-limited certificates. Certificates will be valid for 5 years from the date of certification, after which the certificates will no longer be valid.

Recertification
The American Board of Colon and Rectal Surgery offers recertification in the specialty. Certificates can be renewed prior to expiration by fulfilling the requirements for recertification specified by the Board. The recertification examination is offered annually, on a voluntary basis, to all certified colon and rectal surgeons who apply and meet the Board’s requirements. A recertification information booklet, which outlines the requirements and procedures, is available by writing to the Board Office.

Revocation of Certificates
The filing of an application for examination, participating in examination, and accepting a certificate are voluntary acts. Therefore,
the Board assumes no responsibility for any effect that certification or failure to obtain certification may have on the private or professional activities of candidates.

When an application is submitted, candidates are required to sign an agreement, a portion of which reads as follows: "I agree to disqualification from examination or from the issuance of a certificate, and I agree to the forfeiture and redelivery of such certificate in the event that any of the statements herein made by me at this time or at any time in the past or future in regard to my application for a certificate are false, or in the event that any of the rules and regulations of the Board governing such examinations and certificate are violated by me."

Certificates which have been issued are subject to the provisions of the Articles of Incorporation, the Constitution and Bylaws of the American Board of Colon and Rectal Surgery, Inc, and may be revoked for violation of any of these provisions.

Examination of Candidates With Disabilities
The American Board of Colon and Rectal Surgery supports the intent of the Americans with Disabilities Act (ADA). The Board will make a reasonable effort to provide Board applicants who have documented disabilities with modifications in its examination process that are appropriate for such disabilities but that do not alter the measurement of the skills or knowledge that the examination process is intended to test.

American Board of Dermatology
Rex A Amonette, MD, Memphis, Tennessee
Ronald J Barr, MD, Irvine, California
Mark Allen Everest, MD, Oklahoma City, Oklahoma
Barbara A Gilchrest, MD, Boston, Massachusetts
Lowell A Goldsmith, MD, Rochester, New York
Loren E Golitz, MD, Denver, Colorado
Kenneth E Greer, MD, Charlottesville, Virginia
Antoinette F Hood, MD, Indianapolis, Indiana
Stephen I Katz, MD, Bethesda, Maryland
Edward A Krull, MD, Detroit, Michigan
Anne W Lucky, MD, Cincinnati, Ohio
John C Maize, MD, Charleston, South Carolina
Lee T Nesbitt, Jr, MD, New Orleans, Louisiana
Stephen B Webster, MD, La Crosse, Wisconsin
Harry J Hurley, MD, Executive Director, Detroit, Michigan
John S Strauss, MD, Associate Executive Director, Iowa City, Iowa
Clarence S Livingood, MD, Executive Consultant, Detroit, Michigan

(These criteria and conditions are subject to change without notice. All applicants are advised to contact the American Board of Dermatology to ascertain whether the information below is current.)

Requirements for Eligibility to Take the Examination
Each applicant must satisfy the following requirements before he or she is eligible to take the certifying examination of the Board.

General Qualifications
1. The candidate must have graduated from a medical school in the United States accredited by the Liaison Committee for Medical Education (LCME), an accredited medical school in Canada, an accredited osteopathic school in the United States, or if a graduate of a foreign medical school, must possess the standard certific-
Certification Requirements

competence as well as the execution of their investigative or academic responsibilities. Moreover, the program director must continue to closely monitor the training of these residents and must validate their clinical experience at the completion of their residencies.

2. A Preliminary Registration form must be filed by the candidate and signed by his/her training director shortly after the resident begins residency training in dermatology.

3. It is mandatory that the training director submit a Yearly Report form for each resident to the Board Office by August 1 after completion of the first and second year of training and by May 15 for residents who will complete their third year of training on June 30. In order for a candidate to take the certifying examination, the training director must certify that each year of training was completed in a satisfactory manner.

4. Training must be completed within 5 years after the beginning of dermatology residency, except when military service or other compelling circumstances intervene.

5. It is the responsibility of the residency program director to determine if a resident has satisfactorily completed the required 3 years of dermatology training and is therefore eligible to sit for the certifying examination of the American Board of Dermatology. The Board has established guidelines to assist program directors in making this determination, particularly for residents whose training experience differs from the standard 36 months of full-time clinical training, as, for example, might result from a protracted medical leave of absence. These guidelines are available on request from the Board Office.

Registration for the Examination of the Board

Candidates who have completed the training requirements as outlined above are eligible to apply for examination by the Board. Candidates should request an Application for Certification form from the office of the executive director of the Board. The completed application must be filed with the Board Office before May 1 of the year in which the candidate plans to take the examination. Physicians who complete their residency training in dermatology by July 1 of a given year are eligible to apply to take the examination in the fall of that year. It is emphasized that it is the candidate's responsibility to send a completed application form to the Board if he or she plans to take the certifying examination of the Board.

A candidate is not considered an "active" candidate until his or her application has been received and approved by the Board. This approval includes a review of the application and annual evaluation reports from the candidate's training director. After the application is approved, the candidate is required to take the examination within 3 years. Candidates who do not exercise the examination privilege within 3 years of the date they are declared eligible will be required to file a new application and have their eligibility for examination reviewed by the Requirements Committee. If the reaplication is approved by the Board, the candidate is again eligible to take the examination for another 3-year period.

The Board does not use the term "Board-eligible" in correspondence with directors of hospitals or others who send inquiries to the Board Office. On written request by a candidate, the Board will send to the candidate a letter stating his or her status with the Board at any given time.

Board Examination

The certifying examination in dermatology, which is administered over a period of 2 days, includes the following:

1. Comprehensive Multiple Choice Examination in Dermatology: This is a 6-hour comprehensive examination, and was formerly referred to as the Written or Part I examination. It tests the candidate's knowledge of the basic science and clinical aspects of dermatology, including all the related disciplines. Among the topics included in this part of the examination are clinical dermatology, pediatric dermatology, preventive dermatology, entomology, epidemiology, dermatopathology, cutaneous allergy and immunology, dermatologic surgery, cutaneous oncology, sexually transmitted diseases, internal medicine as it pertains to dermatology, medical ethics, photobiology, and cutaneous microbiology, as well as anatomy, physiology, biochemistry, molecular biology, radiation physics, radiation therapy, physical therapy, pharmacology, genetics, and electron microscopy as related to dermatology. Considerable emphasis is placed on comprehensive knowledge of the literature.

2. Examination in Clinical and Laboratory Dermatology: Projected 2×3 slides are utilized in this part of the examination. Candidates must answer multiple-choice type questions about the projected pictorial material, which is drawn from all areas of clinical and laboratory dermatology. Examples of the types of slides used include photographs of patients, diagrams and ilustrative drawings and pictures of dermatologic surgical procedures, histopathologic sections, fungal cultures, culture mounts, bacterial cultures, Tzanck preparations, skin scrapings and smears, roentgenograms, histochemical and fluorescent photomicrographs, electron micrographs, darkfield micrographs and drawings or photographs of organisms, including viruses, rickettsiae, bacteria, and parasites that affect the skin.

3. Examination in Dermatopathology: In this section, candidates are questioned on histopathologic slides that they examine microscopically, utilizing personal or rented microscopes. This section of the examination encompasses the entire spectrum of dermatopathology.

For the purposes of scoring, the Examination in Clinical and Laboratory Dermatology is combined with the Examination in Dermatopathology, and candidates must pass this combined examination (formerly designated the Part II examination), as well as the Comprehensive Multiple Choice Examination in Dermatology (formerly designated the Part I examination) in order to be certified. If a candidate fails either the combined Examination in Clinical and Laboratory Dermatology/Examination in Dermatopathology or the Comprehensive Multiple Choice Examination in Dermatology and not the other, only the failed component must be repeated.

The examination is given annually in the fall over a 2-day period involving a total of approximately 10 hours. It will be held on October 22 and 23, 1995, at the Holiday Inn O'Hare Airport in Rosemont, Illinois, which is in the O'Hare Airport area of Chicago.

Reexamination

With their initial examination application, candidates have a 3-year period during which they may take the examination or any necessary reexamination on either a failed part (see above) or both parts of the examination. For a reexamination, they must notify the Board Office by May 1 of the year they plan to reexamine. If a candidate has not passed or does not take the examination during this 3-year period, he/she must reapply and complete the necessary forms, after which he/she will have another 3-year period of eligibility during which to take the examination or reexamination. Contact the Board Office for further information concerning this as well as the appropriate fees required (see "Fees").

Handicapped or Disabled Candidates

The American Board of Dermatology supports the intent of the Americans with Disabilities Act (ADA) and, therefore, will provide or allow the use of necessary auxiliary aids, services or testing conditions that do not fundamentally alter the measurement of the skills.
or knowledge the Board assessment program is intended to test. In order to implement this policy, notification of the need for special testing circumstances must be given to the American Board of Dermatology by a candidate for certification at the time that he/she submits the application for any of the Board's certifying examinations. This deadline is necessary in order to allow the Board to request the necessary documentation, to review the records, and to verify the disability, if necessary. In addition, since this policy also applies to the In-Training Examination, which is under the jurisdiction of the American Board of Dermatology, appropriate advance notification of the need for special testing circumstances must be provided when the application for the In-Training Examination is submitted by the department.

Upon receipt of your request, the American Board of Dermatology will initiate the appropriate procedural steps, but it should be understood that all special arrangements must be made and agreed upon in advance; special arrangements cannot be made at the time the examination is given. Therefore, earlier notification of the need for special testing circumstances is encouraged.

**Chemical Dependency or Substance Abuse**

A candidate with chemical dependency or substance abuse will not be permitted to take the examination unless he or she can submit evidence, which must be verifiable, that the disorder is being treated and under control. Individuals with such problems or a history thereof must provide the necessary documentation at the time of application to take the examination. A confirmatory letter from a licensed physician within 1 month of the examination that the disorder no longer exists or is currently controlled is also necessary.

**Certification**

After meeting the above requirements and passing the examination, the candidate will be awarded a certificate that acknowledges that he or she has completed the required course of graduate study and clinical training, has met other specific standards and qualifications, and has passed the examination conducted by the Board. The candidate is then referred to as a diplomate of the American Board of Dermatology, Inc. The names of diplomates of the Board appear in the *Official ABMS Directory of Board Certified Dermatologists and the Official ABMS Compendium of Board Certified Medical Specialists*, published by Marquis Who's Who in cooperation with the American Board of Medical Specialties.

Each certificate is subject to revocation in the event that (a) the physician so certified shall not have been eligible to receive such certificate, whether or not the facts concerning his or her ineligibility were known or could have been ascertained by the directors of the Board at the time of the issuance of the certificate; (b) the physician so certified shall have made any material misrepresentation or omission in the application for such certificate or in any other statement to the Board or its representatives; (c) the physician so certified shall have been convicted by a court of competent jurisdiction of a crime relating to or arising out of the practice of medicine.

**Appeals Procedure**

The American Board of Dermatology recognizes a candidate's right of appeal following an adverse action at any stage of the certification process. Within the residency program, trainees must be accorded due process in compliance with provisions established by the parent institution and as stipulated in the *Essentials of Accredited Residencies in Graduate Medical Education* (July 1, 1983) of the Accreditation Council for Graduate Medical Education.

Candidates whom the Board has declared ineligible to sit for the certifying examination on the basis of qualifications may appeal such decisions by written request within 90 days of the date of notification of the Board's ruling. A candidate failing a certifying examination may request in writing that his or her examination be rescinded by hand to verify the accuracy of the results as reported. Such requests must be received in the Board Office within 90 days of the date of mailing of the examination results to the candidates. A check in the amount of $35 payable to the American Board of Dermatology must accompany this written request. There shall be no further appeal from failure of an examination.

**Time-Limited Certificates**

Since 1991 the American Board of Dermatology has issued time-limited certificates to all candidates who pass the certifying examination. These certificates will remain valid for 10 years. The process by which these candidates may be recertified will be announced at a later date.

**Fees for Examination and Reexamination**

The Directors of the Board serve without compensation. Fees are based on the actual expenses incurred in office administration and in conducting the examination.

The examination fee for the certifying examination in Dermatology is $1,250, payable when the application is submitted. The fee for reexamination is $1,150. All checks are to be made payable to the American Board of Dermatology, Inc.

When a candidate's application for the Certifying Examination in Dermatology or a Special Qualification Examination is disapproved or when the candidate withdraws by September 1 of the year of the examination, the Board retains an administrative fee of $100. If the candidate withdraws from the examination after September 1 and up until 10 days before the examination, the Board will retain half of the examination fee ($625 for the Certifying Examination in Dermatology, $575 for reexamination, $600 for the Special Qualification Examination in Dermatopathology, and $500 for the Special Qualification Examination in Clinical and Laboratory Dermatological Immunology). If the candidate withdraws within 10 days of the examination or fails to appear for the examination and does not provide verifiable evidence of extenuating circumstances that prevented him or her from appearing for the examination, the Board will retain the entire examination fee. On reapplying, such candidates will be required to again submit the examination fee in effect at the time of the application.

**Publication**

The American Board of Dermatology, Inc., publishes a booklet of information that may be obtained from the Board Office. All correspondence should be sent to

Harry J Hurley, MD, Executive Director
American Board of Dermatology, Inc
Henry Ford Hospital
One Ford Pl
Detroit, MI 48202-4350

**Certification for Special Qualification in Dermatopathology**

Special Qualification certification in Dermatopathology is a joint and equal function of the American Board of Dermatology (ABD) and the American Board of Pathology (ABP). Such function will relate to qualifications of candidates, standards of examination, and the form of the certificate.

All candidates applying for examination must hold a currently valid, full, and unrestricted license to practice medicine or osteopathy in either the United States or Canada.
Prerequisites
The American Boards of Dermatology and Pathology will admit candidates to examination for certificates of Special Qualification in Dermatopathology who are otherwise qualified and who have met one of the following requirements

1. Applicants already holding a primary certificate from the American Board of Dermatology or from the American Board of Pathology (anatomic pathology, or anatomic and clinical pathology) and the addition of a year of training in dermatopathology in a program accredited for such training by the ACGME. Additional training must be taken after the candidate has met the full training requirements for certification in dermatology or pathology. The dermatologist applicant must spend one-half of the required training time in pathology. The pathologist applicant must spend one-half of the required training time in clinical dermatology.

2. Applicants who are diplomates of both the American Board of Dermatology and the American Board of Pathology.

Training
Accredited institutional training programs in dermatopathology are an equal and joint function of the Departments of Dermatology and Pathology of that institution. Training programs in dermatopathology are reviewed and accredited by the Residency Review Subcommittee for Dermatopathology, which includes three members from the Residency Review Committee for Dermatology and three members from the Residency Review Committee for Pathology. Upon recommendation by this subcommittee, training programs in dermatopathology are accredited by joint action of the Residency Review Committees for Dermatology and Pathology acting with authority delegated by the Accreditation Council for Graduate Medical Education (ACGME). Information concerning accredited dermatopathology training programs may be found in this directory.

Deadline for Application and Date of Examination
The deadline for receipt of applications to take the examination for Special Qualification in Dermatopathology is June 1 of the year in which the candidate plans to take the examination. The next examination will be given on Friday, October 20, 1995, in Chicago, Illinois.

Fee
The fee for the examination for Special Qualification in Dermatopathology is $1,200, payable when the application is submitted.

Certification for Special Qualification in Clinical and Laboratory Dermatological Immunology

Prerequisites
The requirements for Special Qualification certification in Clinical and Laboratory Dermatological Immunology (CLDI) are as follows:

1. An applicant must be a diplomate of the American Board of Dermatology.

2. An applicant must have satisfactorily completed an accredited 1-year fellowship in CLDI.

Training
A minimum of 1 year of full-time training in an accredited CLDI training program will be required of all candidates. Information concerning accredited training programs in CLDI is available from the office of the American Board of Dermatology.

Deadline for Application and Date of Examination
The deadline for receipt of applications to take the examination for Special Qualification in CLDI is April 1 of the year in which the candidate plans to take the examination. The next examination in CLDI will be given on Friday, October 20, 1995, in Chicago, Illinois.

American Board of Emergency Medicine

G Richard Braen, MD, President, Buffalo, New York
Douglas A Rund, MD, President-Elect, Columbus, Ohio
Michael D Bishop, MD, Immediate Past President, Bloomington, Indiana
Gerald F Whelan, MD, Secretary-Treasurer, Long Beach, California
Daniel F Danz, MD, Member-at-Large, Floyds Knobs, Indiana
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Bruce D Janiak, MD, Perrysburg, Ohio
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Richard L Stennes, MD, San Diego, California
Michael V Vance, MD, Phoenix, Arizona
Benson S Munger, PhD, Executive Director, East Lansing, Michigan
Susan K Adit, Associate Executive Director
Mary Ann Reinhard, PhD, Associate Executive Director

(These criteria and conditions are subject to change without notice. All applicants are advised to contact the American Board of Emergency Medicine to ascertain whether the information below is current.)

Requirements for Certification in Emergency Medicine
An applicant must satisfy all credential requirements at the time the application is submitted. Requirements fulfilled after the date of application will not be considered.

1. Graduates of approved schools of osteopathic medicine in the United States are considered when they have satisfactorily met the credential requirements as outlined.

2. An applicant graduating from a medical school other than one in the United States, its territories, or Canada must provide the Board with a verified and translated diploma. Throughout the certification process, applicants and candidates must hold a current, valid, unrestricted, and unqualified license to practice medicine in the jurisdiction(s) (within the United States, its territories, or Canada) in which they practice. A physician must hold at least one license that meets these criteria to fulfill the Board's licensure requirement.

The applicant must have successfully completed a total of 36 months of post-medical school training, under the control of an accredited emergency medicine residency program. Emergency medicine programs must be accredited by the Accreditation Council for Graduate Medical Education (ACGME) or the Royal College of Physicians and Surgeons of Canada for Canadian programs.

If the emergency medicine residency training program is structured so that it exceeds the length of training specified above, the resident must successfully complete the requirements of his/her
residency program to apply under the emergency medicine residency category of application.

Note: For residents who began their emergency medicine training prior to July 1, 1987, the candidate must have successfully completed a total of 36 months of post-medical school training, at least 24 months of which were under the control of an accredited emergency medicine residency program at the PGY 2 level and above.

The applicant must submit 50 hours of continuing medical education in emergency medicine annually, acceptable to the Board, starting 1 year from the date of graduation from the emergency medicine residency program and continuing until the date of application. If a resident applies to the Board within 1 year of graduation no continuing medical education is required.

**Combined Training Programs**
A special agreement exists with the American Board of Pediatrics whereby an applicant may fulfill the training requirements of both Boards by completing joint training in 5 years. Training programs must be approved prospectively by both Boards. Guidelines for combined training have been approved by both Boards and are available by writing either Board Office. Applicants may not appear for the certifying examination until all training has been satisfactorily completed.

A special agreement exists with the American Board of Internal Medicine whereby an applicant may fulfill the training requirements of both Boards by completing joint training in 5 years. Training programs must be approved prospectively by both Boards. Guidelines for combined training have been approved by both Boards and are available by writing either Board Office. Applicants may not appear for the certifying examination until all training has been satisfactorily completed.

**Applications**
Applications are distributed in the spring of each year (mid-April) and are available from the Board Office. Applications are accepted from May 1 through July 15 of each year. A mailing list is maintained throughout the year for requests received during times when applications are not available.

A nonrefundable processing fee must accompany the application at the time it is submitted.

Applicants wishing to be considered for examination must submit a fully completed application form to the Board. The Board will not be responsible for any opinion expressed concerning the individual’s credentials for the examination unless it is in writing and over the signature of the president or secretary of the Board.

**Examination Information**
The certification examination in emergency medicine is composed of two parts. The first part is a 6.25-hour comprehensive written examination, administered one time each year. It includes multiple choice and pictorial multiple choice items.

The oral certification examination includes seven simulated patient encounters: five single-patient encounters and two multiple-patient encounters.

A candidate must successfully complete the written examination to be scheduled for the oral examination.

The written examination is offered in the fall of each year, and oral examinations are held twice a year (spring and fall).

Examination fees are due upon assignment to an examination administration.

**Certification**
All candidates who successfully complete both the written and the oral certification examinations shall be known as diplomats of the American Board of Emergency Medicine. Diplomates receive an appropriate certificate, which shall remain the property of the American Board of Emergency Medicine. Certification is for a period of 10 years.

Any certificate issued by the Board shall be subject to revocation at any time, should the Board determine, in its sole judgment, that a candidate who has received a certificate was in some respect not properly qualified to receive or retain it.

**Recertification**
ABEM Diplomates will have three options for achieving recertification: passing either the written or the oral certification examination, or the written recertification examination. Passing any one of these examinations will earn the diplomat an additional 10-year certificate.

**American Board of Family Practice**
Edward T Bope, MD, President, Columbus, Ohio
William G Bernhardt, MD, Vice President, Midwest City, Oklahoma
Michael D Hagen, MD, Treasurer, Lexington, Kentucky
James F Shetlar, MD, Exec Comm Member at Large, Frankenmuth, Michigan
Donald T Erwin, MD, New Orleans, Louisiana
Lonnie Fuller, Sr, MD, Atlanta, Georgia
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John R Hayes, MD, Indianapolis, Indiana
Warren A Heffron, MD, Albuquerque, New Mexico
Donald M Keith, MD, Seattle, Washington
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Kenneth L Noller, MD, Worcester, Massachusetts
Jack Pickelman, MD, Maywood, Illinois
Thomas L W Roe, MD, Los Angeles, California
Joseph W Tollison, MD, Augusta, Georgia
Paul R Young, MD, Executive Director, Lexington, Kentucky
Robert F Avant, MD, Deputy Executive Director, Lexington, Kentucky

(These criteria and conditions are subject to change without notice. All applicants are advised to contact the American Board of Family Practice to ascertain whether the information below is current.)

**ABFP Official Definition of Family Practice**
“Family practice is the medical specialty which is concerned with the total health care of the individual and the family. It is the specialty in breadth which integrates the biological, clinical, and behavioral sciences. The scope of family practice is not limited by age, sex, organ system, or disease entity.”

**Board Eligibility**
The ABFP does not recognize or use the term “Board-eligible,” and does not issue statements concerning “Board eligibility.” The Board informs an applicant of admission to an examination to be given on a specified date after a formal application has been reviewed and approved.

**Certification Process**
The American Board of Family Practice (ABFP) administers the certification and recertification examinations in various centers throughout the United States annually, on the second Friday in July.
The ABFP certification and recertification examinations are written tests of cognitive knowledge and problem-solving abilities relevant to family practice. Appropriate subject areas of the following disciplines are included: internal medicine, pediatrics, surgery, obstetrics, gynecology, psychiatry, and behavioral sciences, community medicine, and geriatrics. Elements of the examination include but are not limited to diagnosis, management, and prevention of disease.

Requirements for Certification

A. General

1. All candidates for the ABFP certification examination must have satisfactorily completed 3 years of training (a full 36 calendar months with 12 months in each of the G-1, G-2, and G-3 years) in a family practice residency program accredited by the Accreditation Council for Graduate Medical Education (ACGME) subsequent to receipt of the MD or DO degree from an accredited institution and, when applicable, a Fifth Pathway year, or receipt of a standard certificate from the Educational Commission for Foreign Medical Graduates, or compliance with other ACGME requirements for entry into graduate medical training in the United States. If a physician does not meet the eligibility requirements of the ACGME for entry into resident training, his/her training will not be recognized by the Board.

   Candidates who obtained their MD degree from medical schools in the United States or Canada must have attended a school accredited by the Liaison Committee on Medical Education or the Committee for Accreditation of Canadian Medical Schools. Candidates who obtained a DO degree must have graduated from a college of osteopathic medicine accredited by the American Osteopathic Association (AOA).

   The Board prefers all 3 years of training to be in the same ACGME-accredited family practice program; however, other training may be considered as equivalent (e.g., flexible/transitional year, AOA osteopathic internship). In these cases, and for physicians who have had international training, each individual's training will be evaluated by the Board. Internationally trained physicians must meet all of the requirements of the Residency Qualifying Examination and obtain a passing score to receive any credit toward certification for prior training. The ABFP requires a residency program to submit prospective requests for advanced placement of residents. Program directors are responsible for notifying the Board prior to the entry of the transferring resident. If a program director fails to comply, the Board will determine the amount of transfer credit at the time of its discovery of the transfer. Consequently, the resident may receive less credit toward certification than anticipated and may be required to extend the duration of training.

   The last 2 years of family practice residency training must be completed in the same accredited program. Transfers after the beginning of the G-3 year are approved only in extraordinary circumstances.

   Verification of satisfactory completion of residency training must be stated in writing by the program director. All applicants for the certification examination are subject to the approval of the Board, and the final decision regarding any application rests solely with the ABFP.

2. All candidates’ education and training experiences are subject to review and approval by the ABFP. Any variance from the above must have prior written approval of the Board. No credit may be given for any previous training as equivalent to family practice training without the written approval of the Board.

3. Candidates must complete all requirements of the Board no later than June 30 of the year of the examination. Complete documentation from the program director that the resident has or is expected to have satisfactorily completed the residency must be received by the Board by June 30. Applications, supplied to the residents directly through the program director, are made available only to residents expected to complete the required training by June 30 of the current year. Residents who complete their training at an earlier date must write to the Board for an application.

4. All candidates must hold a currently valid, full, and unrestricted license to practice medicine in the United States or Canada. Furthermore, every license to practice medicine held by the candidate in any state or territory of the United States or province of Canada must be currently valid, full, and unrestricted, whether or not the candidate in effect practices in such state, territory, or province. Candidates shall be required to maintain a full and unrestricted medical license in the United States or Canada even if they are out of the country for extended periods of time. Involuntary loss of a license will result in the simultaneous loss of diplomate status and/or the ability to make application for certification, recertification, or other examinations offered by the Board.

   Any candidate whose license to practice medicine has been revoked, suspended, or restricted in any state or territory of the United States or province of Canada shall be ineligible for certification until such time as the encumbered license is reinstated in full. Should a license be revoked, suspended, or restricted following the submission of an application for certification but prior to the notification of examination results, the application and certification will be simultaneously invalidated. It is the responsibility of the candidate to inform the Board immediately upon a change in licensure status. If the candidate fails to notify the Board of any suspension, revocation, restriction or probation within 60 days after the effective date, the physician shall be ineligible to seek certification for up to 1 year following the reinstatement of full and unrestricted licensure. A restricted medical license is any adverse action by a state licensing agency that encumbers the ability of a physician to diagnose, manage, and/or treat patients. Questions about licensure should be presented to the Board in writing.

5. No candidate will be allowed to take the examination until all fees are paid and all of the above requirements have been satisfactorily met.

B. Osteopathic Physicians

Osteopathic physicians who have graduated from an AOA-approved school of osteopathic medicine in the United States may qualify for certification if they meet all the same requirements as specified for allopathic medical school graduates. They may apply to ACGME-accredited family practice programs for entry into the first year (G-1). Osteopathic physicians who have documented satisfactory completion of an AOA-approved internship (G-1) year may receive credit for that portion of the G-1 year that meets the ABFP guidelines for advanced-level entry or interprogram transfers.

   All candidates (MD or DO) must satisfactorily complete at least 36 calendar months of accredited graduate medical education. Only the G-1 year may be fulfilled by an AOA-approved internship year. The training beyond the G-1 year must be in continuity in an ACGME-accredited family practice residency program.

C. Canadian Applicants

Canadian applicants may qualify for examination via either of the following routes:

1. Physicians who have satisfactorily met the requirements of the College of Family Physicians of Canada (CFPC) by completion of 2 years of training in a program accredited by the CFPC must
have a third year of accredited family practice residency. This third year of training must be satisfactorily completed in an ACGME-accredited family practice program or, if taken in Canada, must be approved by the CFPC and must have the prior approval of the ABFP. Only those programs that bring the third-year experience into compliance with the ACGME Special Requirements for Residency Training in Family Practice will be considered as being equivalent to a third year in a ACGME-accredited family practice training program. The request must be accompanied by documentation of satisfactory performance of the first 2 years of training (including a description of the curriculum) signed by the program director.

2. Physicians who have been certified by examination by the CFPC of Canada (certificates), and who
   a. have established legal residence in the United States for not less than the immediate past 2 years at the time of application; and
   b. since residing in the US have accumulated a minimum of 50 hours per year of continuing medical education approved by the ABFP Board of Family Practice; and
   c. are actively engaged professionally full-time and exclusively in family practice (practice and/or teaching, administration) may be permitted to apply for examination for certification by the ABFP.

Recertification Process

The ABFP confers diplomate status for the specified period of time noted on the certificate. The certificate is dated for a 7-year period. In order to maintain diplomate status, the diplomate must be recertified before the certificate expires. Although the certificate is dated for 7 years, the Board routinely administers the recertification process on a 5-year cycle. This allows a "reserve" year for those diplomates who for some reason are unable to participate in the sixth year, or in cases where the diplomate fails to receive a satisfactory score in the sixth year. Should a diplomate not be recertified by the end of the seventh year, the certificate will expire and the physician will lose diplomate status. However, the physician may reapply for the recertification process, but must meet all criteria in effect at that time.

For diplomates who participate in the recertification process during the sixth year and pass, the new certificate of 7 years' duration is dated from the time of that examination.

Diplomates will be given advance notice of any changes in the recertification requirements.

Requirements for Recertification

A. Submission of a formal application.
B. Documentation of 300 hours of approved continuing medical education.
C. Submission of statement of acknowledgment and compliance with Board policy regarding medical licensure.
D. Satisfactory completion of the office record review portion of the recertification process.
E. Satisfactory performance on the written test of cognitive knowledge.

Reexamination

Candidates who fail the examination may apply for admission to the next annual examination. There is no limit to the number of times a qualified candidate may take the examination when it is offered. Provided the qualifications are met with each reaplication. In addition to valid and unrestricted licensure status, 20 hours per year of continuing medical education since the last application are required for reexamination. Full fees are charged for each examination.

Certificate of Added Qualifications

A. Geriatric Medicine

The ABFP and the American Board of Internal Medicine in a joint venture are offering a Certificate of Added Qualifications (CAQ) in Geriatric Medicine. This "added certificate" is designed to recognize the excellence among those diplomates who provide care to the elderly. The Geriatric Examination will be given biennially in even-numbered years.

Family physicians must be certified by the ABFP at the time of the examination, hold a valid and unrestricted license to practice medicine in the United States or Canada, have 2 years of accredited geriatric fellowship training sponsored by an ACGME-accredited family practice or internal medicine residency program, and achieve a satisfactory score on a one-day examination. The geriatric fellowship training must be subsequent to the family practice residency training, and no part of the family practice residency will be permitted as credit toward the 2-year geriatric fellowship requirement. The fellowship training must be completed by June 30 of the year of the examination.

B. Sports Medicine

The American Board of Family Practice in a joint venture with the American Board of Emergency Medicine, the American Board of Internal Medicine, and the American Board of Pediatrics offers a Certificate of Added Qualifications (CAQ) in Sports Medicine. This examination is offered biennially in odd-numbered years.

Family physicians must be certified by the American Board of Family Practice at the time of examination, hold a valid and unrestricted license to practice medicine in the United States or Canada, and achieve a satisfactory score on a one-half day examination for which they have qualified through one of the following plans:

Plan I (fellowship pathway): candidates must have completed a minimum of 1 year in a sports medicine fellowship program associated with an ACGME-accredited residency in emergency medicine, family practice, internal medicine, or pediatrics.

Plan II (practice pathway): candidates must have 5 years of practice experience consisting of at least 20% professional time devoted to sports medicine defined as one or more of the following: (1) field supervision of athletes; (2) emergency assessment and care of acutely injured athletes; (3) diagnosis, treatment, management, and disposition of common sports injuries and illness; (4) management of medical problems in the athlete; (5) rehabilitation of ill and injured athletes; and, (6) exercise as treatment. In addition, candidates must show evidence of participating in 30 hours of sports medicine-related AMA Category I (or its equivalent) continuing medical education during the past 5 years.

C. Recognition of Successful Candidates

Successful candidates on the Geriatric or Sports Medicine CAQ examination will be awarded an ABFP certificate of added qualifications. The certificate will be valid for 10 years. Reassessment will be required for renewal of certification.

Loss or expiration of primary certification in family practice will automatically result in simultaneous loss of any and all certificates of added qualifications. In cases where a CAQ is lost due to loss of the primary certificate and later the primary certificate is reinstated, the CAQ will be reinstated for the remaining period of time, if any, as stated on the CAQ certificate.

*Plan II will be available only through the 1999 examination. After 1999, a 1-year sports medicine fellowship will be required for eligibility.
Revocation

A. General

Each certificate issued by the Board of Directors of the ABFP shall be subject to revocation in any of the following circumstances:

1. The issuance of such certificate or its receipt by the person so certified shall have been contrary to, or in violation of, any provision of the Articles of Incorporation of the ABFP, Inc.; or of the Bylaws of the ABFP.

2. The person so certified shall not have been eligible to receive such certificate, irrespective of whether the facts constituting such ineligibility were known to, or could have been ascertained by, the directors of the corporation or its representatives.

3. The person so certified shall have made a misstatement of fact in the application for such certificate or in any other statement or representation to the corporation or its representatives.

4. The person so certified shall at any time have neglected to maintain the degree of competency in the field of family practice as established by the Board.

B. Licensure Status

A diplomate of the ABFP shall be required to hold a currently valid, full, and unrestricted license to practice medicine in the United States or Canada. Furthermore, every license to practice medicine held by a diplomate in any state or territory of the United States or province of Canada must be currently valid, full, and unrestricted, whether or not the diplomate in effect practices in such state. Diplomates shall be required to retain a full and unrestricted medical license in the United States or Canada even if they are out of the country for extended periods of time. Failure to retain a license will result in loss of diplomate status and the ability to make application for certification, recertification, or other examinations offered by the Board.

In the event a diplomate's license to practice in any state or territory of the United States or province of Canada is revoked, restricted, or suspended, the diplomate's status with the ABFP is to be simultaneously rescinded at the time of the licensure revocation, restriction, or suspension. The physician must advise ABFP within 60 days and cease immediately identifying himself/herself in any way directly or indirectly as a diplomate of the ABFP.

If the physician fails to notify the ABFP of any revocation, restriction, or suspension within 60 days after the effective date, he/she shall be ineligible to seek reinstatement of diplomate status for up to 1 year following the reinstatement of full and unrestricted licensure. A restricted medical license is any adverse action by a state licensing agency that prevents the ability of a physician to diagnose, manage, and/or treat patients. Questions about licensure should be presented to the Board in writing.

If and when the physician's revoked or suspended license is reinstated in full (with no restrictions) and official written documentation of reinstatement is provided, the ABFP will honor the remainder of the current certificate and the diplomate will not be required to be reexamined. If the current certificate has expired prior to the reinstatement of the license, the physician may make application for the next annual examination. Successful compliance with all application requirements in effect at that time will be expected.

C. Authority

The ABFP Board of Directors shall have sole power and authority to determine whether the evidence or information before it is sufficient to constitute grounds for revocation of any certificate issued by this corporation. The Board of Directors may, however, at its discretion, require any person so certified to appear before the Board of Directors, upon not less than 30 days written notice by registered mail, and to show cause, at the time and place specified in such notice, why the certificate should not be revoked. The failure of any person so notified to appear as required in such notice shall, at the discretion of the Board of Directors, constitute cause for revocation of the certificate. The decision of the Board of Directors in all such matters shall be final.

Applications and Additional Information

Applications and additional information may be obtained by writing to:
Paul R Young, MD, Executive Director
American Board of Family Practice
2228 Young Dr
Lexington, KY 40505-4294

American Board of Internal Medicine

J Claude Bennett, MD, Chairman, Birmingham, Alabama*
Jerome P Kassirer, MD, Chairman-Elect, Boston, Massachusetts*
Mark A Kelley, MD, Secretary-Treasurer, Philadelphia, Pennsylvania*
Harry R Kimball, MD, President, Philadelphia, Pennsylvania*
William M Bennett, MD, Portland, Oregon
Christine K Cassel, MD, Chicago, Illinois
Peter A Cassileth, MD, Miami, Florida
Melvin D Chetlin, MD, San Francisco, California
Hugh Clark, MD, Seattle, Washington
David Dantzer, MD, New Hyde Park, New York
Paul J Davis, MD, Albany, New York
Janice G Douglas, MD, Cleveland, Ohio
Adrian L Edwards, MD, New York, New York
Alan M Fogelman, MD, Los Angeles, California
Charles K Francis, MD, New York, New York
William B Galbraith, MD, Iowa City, Iowa*
Harvey M Golomb, MD, Chicago, Illinois
Mark S Klemperer, MD, Boston, Massachusetts
Michael A LaCombe, MD, South Paris, Maine
Richard P LeBlond, MD, Livingston, Montana
Roland W Moskowitz, MD, Cleveland, Ohio
James L Reinertsen, MD, Minneapolis, Minnesota
Geraldine P Schechter, MD, Washington, DC*
John D Stobo, MD, Baltimore, Maryland*
Martin I Surks, MD, Bronx, New York
Phillip P Toskes, MD, Gainesville, Florida*
Stephen I Wasserman, MD, San Diego, California
*
Member of Executive Committee

(These criteria and conditions are subject to change without notice. All applicants are advised to contact the American Board of Internal Medicine to ascertain whether the information below is current.)

Preface

The Board's decision about a candidate's eligibility for certification is determined by the policies and procedures described in this document. This edition of policies and procedures supersedes all previous publications.

The Board reserves the right to make changes in its fees, examinations, policies, and procedures at any time without advance notice. The Board also reserves the right, under extraordinary circumstances, to waive certain of its requirements. Admission to the Board's examinations will be determined under policies in force at the time of application. This document is not to be construed as
a contract between a candidate and the American Board of Internal Medicine.

Introduction
The American Board of Internal Medicine (ABIM) was established in 1938 and is a private, nonprofit corporation that is not a part of or affiliated with any other organization. Its members serve rotating terms with new members annually elected by the Board. The Board receives no public funds and has no licensing function.

The mission of the ABIM is to enhance the quality of health care available to the American public by maintaining high standards for certifying individual internists who possess the knowledge, skills, and attitudes essential for the provision of excellent care.

Certification by the ABIM recognizes excellence in the discipline of internal medicine and its subspecialties. Certification by the Board is not a requirement to practice internal medicine or a subspecialty, nor does the Board confer privilege to practice. The Board does not intend either to interfere with or to restrict the professional activities of a licensed physician because the physician is not certified.

The Board administers the certification and recertification processes by (1) establishing training requirements for Board candidates; (2) assessing the credentials of candidates; (3) obtaining substantiation by appropriate authorities of the clinical competence and professional standing of candidates; and (4) developing and conducting examinations for certification and recertification.

The duration of the validity of all certificates issued by the Board in 1990 (1987 for critical care medicine and 1988 for geriatric medicine) and thereafter is 10 years, and the dates of validity will be noted on the certificates. Certificates issued before 1990 will continue to be valid indefinitely. Diplomates with certificates that are valid indefinitely will be offered the same opportunity to recertify as those who hold time-limited certificates.

In 1995, the Board will offer its comprehensive recertification program, which will include an at-home, open-book, self-evaluation process; local evaluation of credentials; and a proctored final examination. Information about the Board's recertification program is available upon request.

Training Requirements for Certification in Internal Medicine
Physicians who are awarded a certificate in the specialty of internal medicine must have completed the required predoctoral medical education, met the postdoctoral training requirements, demonstrated clinical competence in the care of patients, and passed the Certification Examination in Internal Medicine.

Postdoctoral Medical Education
Candidates from medical schools in the United States or Canada must have attended a school accredited at the date of graduation by the Liaison Committee on Medical Education (LCME) or the Committee for Accreditation of Canadian Medical Schools. Candidates from osteopathic medical schools must have graduated from a college of osteopathic medicine accredited by the American Osteopathic Association.

Graduates of international medical schools are required to submit one of the following:
1. A permanent (valid indefinitely) certificate from the Educational Commission for Foreign Medical Graduates; or
2. Comparable credentials from the Medical Council of Canada; or
3. Documentation of training for those candidates who entered postdoctoral medical training in the United States via the Fifth Pathway, as proposed by the AMA.

Postdoctoral Training Requirements
To be admitted to an examination, physicians must have completed 3 years of accredited training before July 1 of the year of examination. No internship or residency training taken before the date of completion of requirements for the MD or DO degree will be credited toward the Board's training requirements.

The 3 years of required training must satisfy all four of the following conditions:
1. The director of the accredited internal medicine training program must have had responsibility for the educational process during all of the 36 months of training. The program director may assign up to 6 months of training in specialties other than internal medicine.
2. The 36 months of training must have included a minimum of 24 months of meaningful patient responsibility. Of the 24 months of meaningful patient responsibility, at least 20 must occur in the following settings: (a) inpatient services in which disorders of general internal medicine are managed; (b) inpatient services in which disorders of one or more subspecialties of internal medicine are managed; (c) emergency medicine, general medical, or subspecialty ambulatory settings; and (d) dermatology or neurology services. Four months of meaningful patient responsibility may be taken outside the above areas with the approval of the internal medicine program director.
3. The training must be completed in an internal medicine program accredited by the Accreditation Council for Graduate Medical Education (ACGME) or training completed in Canada and accredited either by the Royal College of Physicians and Surgeons of Canada or by the Professional Corporation of Physicians of Quebec.
4. The level of responsibility for patient care must increase in each year of training.

Training Taken in Accredited Programs Other Than Categorical Internal Medicine
For residents transferring to the first or second year of internal medicine programs from other ACGME-accredited residencies, the internal medicine program director may grant up to 12 months credit to qualified individuals according to the following guidelines:
1. Month for month credit for internal medicine rotations that occur in an institution that has an ACGME-approved internal medicine program, and/or
2. Month for month credit for rotations on other specialties, not to exceed 6 months per specialty and 6 months in total.

The program director must inform the Board within 1 year of transfer of the amount of credit to be granted.

Alternate Training Pathways
Clinical Investigator Pathway
The Board has established a pathway for investigators highly trained both in clinical sciences and clinical or biomedical research. This pathway leads to certification in internal medicine with 4 years of training. A clinical investigator can achieve certification in internal medicine and a subspecialty with 6 years of training (7 years for cardiovascular disease and for dual certification in hematology and medical oncology). The clinical training and research may be taken in any sequence.

Candidates must complete 2 years of accredited residency training in internal medicine with at least 20 months of meaningful patient responsibility and an appropriately balanced curriculum. Candidates must demonstrate superior overall clinical competence in both years of internal medicine training. Candidates seeking certification in a subspecialty must meet the clinical training requirements for that subspecialty examination.
During research training, candidates are strongly encouraged to maintain a continuity clinic appropriate for their stage of clinical training (general internal medicine during residency training and subspecialty clinic during fellowship training).

Candidates must complete 2 years of full-time research (3 years if the candidate plans to pursue subspecialty certification) during which at least 80% of the candidate's professional time and effort is dedicated to investigative activities. The candidate's arrangements for research must be prospectively approved by the Board prior to the completion of internal medicine clinical training. Credit will be granted for research undertaken prior to the award of the MD degree or outside the United States or Canada only in rare instances.

The Certification Examination in Internal Medicine may be taken in the fall of the PGY-4, so long as 2 years of accredited residency training in internal medicine precede admission to the examination. Candidates who are not in an accredited fellowship must provide documentation that they are in research training during PGY-4.

A subspecialty examination may be taken in the fall of PGY-6 (PGY-7 for cardiovascular disease and for dual certification in hematology and medical oncology). Candidates for a subspecialty examination must provide documentation in PGY-6 that they are in full-time research training, or in a full-time faculty position with substantial (ie, 50% professional time and effort) research involvement. Candidates who are no longer in a research program in the fall of PGY-6 will not be admitted routinely to a subspecialty examination. The credentials of such candidates must be reviewed by the Board to determine admissibility to the examination.

A proposal supporting the candidate for admission through the Clinical Investigator Pathway should be sent to the ABIM as early as possible and must be received no later than March 1 of the R-2 year. It must include:
1. A letter of recommendation and description of training from the residency program director, including documentation of a superior rating of clinical competence.
2. A letter of support from the sponsor of the research training describing the proposed program and documenting that it will be of the required duration.
3. A letter of support from the subspecialty program director, if the research training is to occur during fellowship training.

Combined Training Leading to Certification by Two Boards
Guidelines for combined residency training have been developed with the American Board of Emergency Medicine, American Board of Pediatrics, American Board of Physical Medicine and Rehabilitation, American Board of Preventive Medicine, and the American Board of Psychiatry and Neurology. A list of programs offering approved training is available from the Board.

Candidates for Special Consideration
Beginning with the administration of the 1997 examination, the Board will only review proposals on behalf of the candidates with nonstandard training who meet the following criteria:
1. At least 2 years of full-time formal training in internal medicine in accredited programs in the United States or Canada that have occurred after 3 or more years of verified foreign training in internal medicine; or after 3 or more years of accredited training in another specialty in the United States or Canada, or
2. Full-time internal medicine faculty members in an LCME-accredited US medical school or an accredited Canadian medical school who have completed 3 or more years of training in internal medicine abroad; hold an appointment at the level of Associate Professor or higher; and have completed 8 years of experience after formal training as a full-time clinician-educator or a clinical investigator in internal medicine with an appointment on a medical school faculty.

Candidates must be proposed by the chairman of a department of internal medicine of an accredited medical school or the program director of an accredited internal medicine residency. Guidelines for proposing candidates for special consideration should be obtained prior to submitting a proposal.

No other exceptions to the Board's standard training requirements will be considered. Pre-1997 special candidate guidelines are available from the Board upon request.

Substantiation of Clinical Competence

Components of Clinical Competence

The Board requires substantiation that the candidate is competent in the following: clinical judgment, medical knowledge, clinical skills (medical interviewing, physical examination, and procedural skills), humanistic qualities, professionalism, and provision of medical care.

The diagnostic and therapeutic procedures listed below are required for certification. Although the Board does not prescribe an absolute number of times a procedure must be done to ensure competence, as indicated in parentheses, it has developed guidelines for the minimum number of directly supervised, successfully performed procedures below which the confirmation of proficiency is not credible: abdominal paracentesis (3), arterial puncture for blood gas analysis (5), arthrocentesis of the knee joint (3), central venous line placement (5), lumbar puncture (5), nasogastric intubation (3), thoracentesis (5), and critical life-saving procedures (this requirement can be met by documentation of successful training in advanced cardiac life support).

Annual Evaluation of Residents

The Board requires program directors to annually complete evaluation forms assessing the clinical competence of residents. In the R-1 and R-2 years the Board has determined that in order to receive credit for a year of training, a resident must demonstrate satisfactory
1. Humanistic qualities
2. Moral and ethical behavior
3. Overall clinical competence

Residents rated as superior or satisfactory will receive credit for the year of training. Residents rated as unsatisfactory in their R-1 or R-2 year will receive no credit. Residents rated marginal in the R-1 year will receive credit for that year of training. Residents receiving marginal ratings in both R-1 and R-2 years must take an additional year of training.

In the R-3 year, in addition to the above, all residents must be judged to be satisfactory in each of the components of competence defined by the Board.

In general, the Board believes that additional training is required to correct deficiencies in clinical competence. One additional year of accredited training (including satisfactory completion and performance) is required for each unsatisfactory year. It is the resident's responsibility to arrange for this training. If this additional training is taken in a different program, the Board requires that the resident request that a written evaluation of past performance be transmitted from the previous training program to the new training program director. In addition, the Board will provide to the accepting program director performance ratings from the previous program and a summary of the number of months of credit toward the 36-month training requirement.

Individuals demonstrating deficiencies solely in the areas of humanistic qualities or moral and ethical behavior may, at the discretion of the Board, be required to complete additional training and/or a specified period of close observation. The Board will pro-
vide copies of the evaluation forms to residents upon written request. The responsibility for the evaluation of a resident rests with the training program, not with the Board. The Board is not in a position to reexamine the facts and circumstances of a resident's training and evaluation. As required by the ACGME in its Essentials of Accredited Residencies in Graduate Medical Education, trainees must be provided due process at the educational institution. In the event that a resident disagrees with the rating given, the resident must seek and complete that institution's due process procedure.

Professional Standing of Practitioners

Every 4 years following formal evaluation, the Board requires verification that candidates applying for examination are currently recognized as internal medicine specialists in good standing. Verification is sought from the chief of medical service at the institution where the candidate's principal staff appointment is held. Any challenge to good standing must be resolved locally to the Board's satisfaction before admission to the examination. For example, substance abuse, convictions for felonies related to medical practice, or substantial disciplinary action by a hospital staff may lead to deferred admission or rejection from examination.

Licensure

Candidates with a restricted, suspended, or revoked license in any jurisdiction at the time of application or examination will not be admitted to the examination or certified. Restrictions include but are not limited to conditions, contingencies, probation, or stipulated agreements. A valid, unrestricted, and unchallenged license to practice medicine in a state, territory, commonwealth, possession, or province of the United States or Canada will be required of all candidates who will have been out of formal training 1 or more years as of July 1 of the year of examination.

Certification and Recertification Examinations in Internal Medicine

The certification examination is administered annually in centers throughout the United States, Puerto Rico, and Canada. It is given in four parts on two consecutive days.

More detailed information about the examination is furnished with the Board's application material.

Areas of Certification and Recertification Offered in the Subspecialties and Added Qualifications of Internal Medicine

The Board offers certification in the following subspecialties and added qualifications.

Subspecialties
Cardiovascular Disease
Endocrinology, Diabetes, and Metabolism
Gastroenterology
Hematology
Infectious Disease
Medical Oncology
Nephrology
Pulmonary Disease
Rheumatology

Added Qualifications
Adolescent Medicine
Clinical Cardiac Electrophysiology
Clinical and Laboratory Immunology
Critical Care Medicine
Geriatric Medicine
Sports Medicine

Training Requirements for Certification in a Subspecialty

Physicians who are awarded a certificate in a subspecialty or area of added qualifications of internal medicine must be previously certified in internal medicine by the American Board of Internal Medicine. In addition, they must have completed the Board's training requirements, demonstrated clinical competence in the care of patients, and passed the certification examination in the subspecialty.

Subspecialty training initiated July 1, 1989, and thereafter must be accredited by the ACGME, The Royal College of Physicians and Surgeons of Canada, or the Professional Corporation of Physicians of Quebec. Subspecialty training completed prior to July 1, 1989, must have been completed in a program associated with an accredited residency in internal medicine in the United States or Canada.

Fellowship training taken before the date of completion of the requirements for the MD or DO degree, and training as a chief medical resident, cannot be credited toward the requirements for subspecialty certification. Practice experience and attendance at postgraduate courses cannot be credited.

Educational experience in a subspecialty during a full-time junior faculty appointment in an approved medical school in the United States or Canada may be applicable toward the requirements. Such clinical experience must be approved by the appropriate program director and must be reviewed prospectively by the Board.

To be admitted to an examination, candidates must have completed the required subspecialty training before July 1 of the year of examination.

Specific Training Requirements for the Subspecialty Examinations

Cardiovascular disease—3 years of accredited training, of which an aggregate of 24 months is clinical training, in the diagnosis and management of a broad spectrum of cardiovascular diseases.

Endocrinology, diabetes, and metabolism; gastroenterology, hematology; infectious disease; medical oncology; nephrology; pulmonary disease; and rheumatology—3 years of accredited training, of which an aggregate of 12 months is clinical training, in the diagnosis and management of a broad spectrum of medical diseases. Additionally, the hematology and medical oncology examinations each require a minimum of 24 months of experience in an ambulatory care setting and a minimum of ½ day per week spent in a continuity outpatient clinic in the longitudinal care of patients.

Combined Training Leading to Dual Certification

Hematology and Medical Oncology

Dual certification in hematology and medical oncology requires 3 years of full-time combined fellowship training. The 3 years of combined training must include a minimum of 18 months of prospectively designed full-time clinical training with patient care responsibility. This full-time clinical training must include a minimum of 12 months of training in the diagnosis and management of a broad spectrum of neoplastic diseases including hematological malignancies and the equivalent of a minimum of 6 months of training in the diagnosis and management of a broad spectrum of nonneoplastic hematological disorders. These experiences need not be in sequential months of block time. During the entire 3 years the candidate must attend at least one outpatient clinic for a minimum of 1/2 day per week and have the responsibility for providing continuous care to a defined cohort of patients being managed for neoplastic disorders and others with specific hematological disorders.

The combined training must be taken in programs in the same institution, or in an acceptably coherent program, accredited both in
hematology and medical oncology by the ACCP, The Royal College of Physicians and Surgeons of Canada, or the Professional Corporation of Physicians of Quebec. Examples of acceptable combined programs are
1. A single program with one program director.
2. A joint program sponsored by the same institution with two different program directors and a coordinated curriculum.
3. A coherent program involving more than one institution in the same city where there is a coordinated curriculum.

Candidates desiring certification in both hematology and medical oncology with only 3 years of combined training are required to notify the Board in writing of their intent before completion of their first year of combined training. This letter of intent must be co-signed by the training program director(s). Candidates must complete all 3 years of required combined training before being admitted to an examination in either subspecialty.

Candidates who elect to undertake an examination in one subspecialty following only 2 years of fellowship training will be required to complete 4 years of accredited training for dual certification. They must meet the 2-year training requirement for the second subspecialty independent of the training that permitted admission to the initial subspecialty examination.

By full-time clinical training the Board means that at least 80% of the trainee’s professional time and effort during a working week is dedicated to clinical (patient care or educational) activities. These may include providing primary care to subspecialty patients; supervision of subspecialty patients on the general medical service or on designated subspecialty inpatient units; subspecialty consultations and consultation rounds; subspecialty ambulatory care; general medicine ambulatory care; scheduled clinical conferences; performance of procedures on patients; review of imaging, pathological, and other diagnostic material; other direct patient care; attending national scientific meetings and reading clinical literature. Clinical activities may include research necessitating extended patient contact and care.

These policies pertain to trainees who entered subspecialty training in hematology and/or medical oncology on or after June 1, 1990.

Rheumatology and Allergy and Immunology

Dual certification in rheumatology and allergy and immunology requires a minimum of 3 years of full-time training. Of the total 3 years, at least 12 months must be full-time clinical rheumatology training supervised by the director of an accredited rheumatology training program.

Weekly attendance for 18 consecutive months in an ambulatory care program supervised by rheumatology faculty must be included in the 3-year combined program; this 18-month period must offer true continuity of patient care within ambulatory clinics.

At least 18 months must be devoted to full-time allergy and immunology training supervised by the training program director of an accredited training program in allergy and immunology.

Plans for combined training should be approved in writing by both the rheumatology and the allergy and immunology training program directors and by the ABIM Subspecialty Board on Rheumatology and ABAI before training begins. Admission to either examination requires: certification in internal medicine; satisfactory clinical competence; and completion of the entire 3-year combined program.

Candidates who seek dual certification for other subspecialty combinations should write to the Board for information.

Added Qualifications

The Board offers certification of added qualifications to diplomates with additional training in adolescent medicine, clinical cardiac electrophysiology, clinical and laboratory immunology, critical care medicine, geriatric medicine, and sports medicine. Specific details regarding the training/experience requirements for each of the added qualifications examinations are available on written request from the Board Office with the exception of clinical and laboratory immunology. For information and application forms for the clinical and laboratory immunology examination please contact American Board of Allergy and Immunology 3624 Market St Philadelphia, PA 19104-2675

Candidates for Special Consideration

Guidelines for proposing candidates for special consideration for subspecialty and added qualifications examinations are available upon request.

Substantiation of Clinical Competence

Components of Clinical Competence

The Board requires substantiation that the candidate is competent in the following: clinical judgment, medical knowledge, clinical skills (medical interviewing, physical examination, and procedural skills), humanistic qualities, professionalism, provision of medical care, and continuing scholarship as a subspecialist-consultant. Verification will be sought by the Board from both the director of the subspecialty training program and the director of the associated residency in internal medicine. Trainees must receive a satisfactory rating of overall clinical competence, humanistic qualities, and moral and ethical behavior in each of the required years of subspecialty training.

In addition, during the final year of required training they must receive satisfactory ratings in each of the components of competence, including proficiency in performing the requisite procedures listed below:

- Cardiovascular disease: advanced cardiac life support (ACLS), including cardiopulmonary resuscitation and defibrillation, echocardiography; arterial catheter insertion; and right-heart catheterization, including insertion and management of pacemakers, catheters, and defibrillators.

- Critical care medicine: airway maintenance intubation, including fiberoptic bronchoscopy; ventilator management, including experience with various modes; insertion and management of chest tubes, ACLS, placement of arterial, central venous, and pulmonary artery balloon flotation catheters; and calibration and operation of hemodynamic recording systems.

- Endocrinology, diabetes, and metabolism: thyroid aspiration biopsy.

- Gastroenterology: proctoscopy and/or flexible sigmoidoscopy; diagnostic upper gastrointestinal endoscopy; colonoscopy, including biopsy and polypectomy; esophageal dilation; therapeutic upper and lower gastrointestinal endoscopy; and liver biopsy.

- Hematology: bone marrow aspiration and biopsy, including preparation, staining, examination, and interpretation of blood smears, bone marrow aspirates, and touch preparations of bone marrow biopsy material; measurement of complete blood count, including platelet- and white cell differential, using automated or manual techniques with appropriate quality control; administration of chemotherapy agents and biological products through all therapeutic routes; management and care of indwelling venous access catheters; therapeutic phlebotomy; and therapeutic thoracentesis and paracentesis.

- Infectious disease: microscopic evaluation of diagnostic specimens for the diagnosis of infectious diseases including preparation,
staining, and interpretation; management, maintenance, and removal of indwelling venous access catheters; and administration of antimicrobial and biologic products via all routes.

Medical oncology: bone marrow aspiration and biopsy; administration of chemotherapeutic agents and biological products through all therapeutic routes; and management and care of indwelling venous access catheters.

Nephrology: placement of temporary vascular access for hemodialysis and related procedures; acute and chronic hemodialysis; peritoneal dialysis; continuous arteriovenous hemofiltration; and percutaneous biopsy of both autologous and transplanted kidneys.

Pulmonary disease: endotracheal intubation; fiberoptic bronchoscopy and accompanying procedures; ventilator management; thoracentesis and percutaneous pleural biopsy; arterial puncture; placement of arterial and pulmonary artery balloon flotation catheters; calibration and operation of hemodynamic recording systems; supervision of the technical aspects of pulmonary function testing; progressive exercise testing; and insertion and management of chest tubes.

Rheumatology: diagnostic aspiration of and analysis by light and polarized light microscopy of synovial fluid from diarthrodial joints, bursae, and tenosynovial structures; and therapeutic injection of diarthrodial joints, bursae, tenosynovial structures, and entheses.

The Board believes that additional training is required to correct deficiencies in clinical competence. Trainees rated as unsatisfactory in any component of clinical competence during the final year of required training or in humanitarian qualities, moral and ethical behavior, and/or overall clinical competence during any year of fellowship training will be informed by the Board that the year will not be credited toward the requirements for certification. One additional year of accredited training (including satisfactory completion and performance) is required for each unsatisfactory year. It is the fellow's responsibility to arrange for this training. If this additional training is taken in a different program, the Board requires that the fellow request that a written evaluation of past performance be transmitted from the previous training program to the new training program director. In addition, the Board will provide performance ratings from the unsatisfactory year and a summary of the total credits accumulated toward the training requirements to the new program director.

Individuals demonstrating deficiencies solely in the areas of humanitarian qualities or moral and ethical behavior may, at the discretion of the Board, be required to complete additional training and/or a specified period of close observation. The Board will provide copies of the evaluation forms to trainees upon written request.

The responsibility for the evaluation of a trainee rests with the training program, not with the Board. The Board is not in a position to reexamine the factual circumstances of a fellow's training and evaluation. As required by the Accreditation Council for Graduate Medical Education in its Essentials of Accredited Residencies in Graduate Medical Education, trainees must be provided due process at the educational institution. In the event that a trainee disagrees with the rating given, the trainee must seek and complete that institution's due process procedure.

Professional Standing of Practitioners

Every 4 years following formal evaluation, the Board requires verification that candidates applying for examination are currently recognized as subspecialists in good standing in the appropriate subspecialty. Verification is sought from the chief of medical service at the institution where the candidate's principal staff appointment is held. Any challenge to good standing must be resolved locally to the Board's satisfaction before admission to the examination. For example, substance abuse, convictions for felonies related to medical practice, or substantial disciplinary action by a hospital staff may lead to deferred admission or rejection from examination.

Licensure

Candidates with a restricted, suspended, or revoked license in any jurisdiction at the time of application or examination will not be admitted to examination or certified. Restrictions include, but are not limited to, conditions, contingencies, probation, and stipulated agreements. A valid, unrestricted, and unchallenged license to practice medicine in a state, territory, commonwealth, possession, or province of the United States or Canada will be required of all candidates who will have been out of formal training 1 or more years as of July 1 of the year of examination.

The Certification and Recertification Examinations in the Subspecialties and Added Qualifications of Internal Medicine

The subspecialty examinations are offered on an alternate-year schedule. The examinations are administered in centers in the United States, Puerto Rico, and Canada. All of the examinations with the exception of cardiovascular disease are 1 day in length; cardiovascular disease is 1 1/2 days.

More detailed information about the examinations is furnished with the Board's application material.

Special Policies

Board-Eligible Status

Consistent with establishment of time-limited certification, the Board restricts the duration of eligibility for certification. Board eligibility is defined as the status conferred by ABIM at the time a candidate receives notice of admission to an examination. It indicates that the candidate has completed the required training, demonstrated satisfactory clinical competence, and that other credentialing requirements have been met.

Candidates for certification in internal medicine are Board-eligible for four examinations, or 4 period of 6 years, whichever limit is reached first. Candidates who were admitted to an examination before 1989 are considered Board-eligible for four more examinations or until 1995, whichever comes first.

Candidates for certification in a subspecialty or area of added qualifications are Board-eligible for three examinations or a period of 6 years, whichever limit is reached first. Candidates who were admitted to a subspecialty or added qualifications examination before 1989 are considered Board-eligible for three more examinations or until 1995 (for examinations administered in odd-numbered years) or 1996 (for examinations in even-numbered years), whichever comes first.

Should adverse information about a candidate come to the attention of the Board, the Board-eligible status may be revoked.

Beginning in 1985, candidates who have taken at least one certification examination may renew their Board-eligible status at any time during their period of eligibility. Candidates may apply for either the certification examination (up to four examinations for internal medicine or three examinations for a subspecialty or area of added qualifications) or a qualifying examination. The following requirements must be met to reestablish the Board-eligible status: possession of a valid and unrestricted license; verification of satisfactory clinical competence; completion within the preceding 2 years of 100 hours of acceptable Category 1 continuing medical education courses accredited by the Accreditation Council on Continuing Medical Education; and success on an ABIM Qualifying Examination.

Candidates reestablish their Board-eligible status for four examinations in internal medicine (three examinations in a subspecialty
or area of added qualifications) or 6 years from the date of successfully completing the Qualifying Examination.

**Disclosure of Information**

The Board provides information to program directors each year regarding both the certification status of individuals who trained in their program and took the examination, and the program’s overall candidate performance. This information is helpful to the program in evaluating its educational effectiveness. The Board also provides program pass rate information to the Residency Review Committee for Internal Medicine. In addition, at its discretion, the Board may release examination results, examination scores and other pertinent information concerning candidates to those whom it deems have a legitimate need for such information.

**Disabled Candidates**

The Board recognizes that some candidates may be unable to fulfill the requirement for proficiency in performing procedures because of disability. For such individuals, the procedural skills requirement may be waived. Program directors are urged to write to the Board for approval before the individual enters training.

The Board is also committed to offering its examinations in a place and manner that is accessible to individuals with disabilities and, when necessary, alternative accessible arrangements under comparable conditions to those provided for sound disabled individuals are offered to disabled individuals. Candidates who need accommodation during the examination for a disability should provide a written request to the Board at the time of application for examination. Details and related documentation must be received no later than 3 months prior to the date of examination.

**Substance Abuse**

If a history of substance abuse exists, the candidate must provide documentation that he or she can safely and effectively perform the duties and responsibilities of a certified internist/subspecialist. To that end, evidence of successful completion of a treatment program and/or a documented period of abstinence is required.

**Leave of Absence**

Up to 1 month of credit may be granted in any 1 year for vacation time, illnesses, or delayed starts. In addition, up to 6 weeks’ credit can be granted for pregnancy, adoption, and subsequent newborn care.

**Reduced-Schedule Training**

In general, part-time training, even though continuous, is not acceptable. Interrupted full-time training, however, is acceptable, provided that no period of full-time training is shorter than 1 month. In any 12-month period, at least 6 months must be spent in training. The Board encourages trainees to maintain patient care responsibilities in a continuity clinic during the nontraining components of the year. Individuals planning such training should seek the guidance of the Board before acting on their plans.

**Revocation of Certificates**

The Board may at its discretion revoke a certificate if (1) the diplomate was not qualified to receive the certificate at the time it was issued, even if the certificate was issued as a result of a mistake on the part of the Board; (2) the diplomate made any material misstatement of fact or omission of fact (a) to the Board in connection with application or otherwise or (b) to any third party concerning the diplomate’s certification or eligibility status; or (3) the diplomate’s license to practice medicine has been revoked in any jurisdiction.

**Late Applications**

Awareness of and meeting registration deadlines are the candidate’s responsibility. There is a nonrefundable penalty fee of $300 for any application postmarked between November 2, 1994, and January 1, 1995, for sports medicine; December 2, 1994, and February 1, 1995, for internal medicine; and April 2, 1995, and July 1, 1995, for cardiovascular disease; critical care medicine; endocrinology, diabetes, and metabolism; gastroenterology; and medical oncology.

**Additional Information and Inquiries**

Please address all inquiries concerning examination applications to American Board of Internal Medicine
3624 Market St
Philadelphia, PA 19104-2675
215 243-1500 or 800 441-ABIM
215 382-4702 Fax

The following Board publications are available upon request. These are not designed to aid in preparation for examinations.

- Policies and Procedures for Certification in Internal Medicine
- Policies and Procedures for Certification in the Subspecialties
- Guide to Evaluation of Residents in Internal Medicine
- Guide to Awareness and Evaluation of Humanistic Qualities of Residents: Evaluating Your Clinical Competence
- Attending Physicians: Your Role in Evaluating Residents

**Combined Training In**

- Internal Medicine/Emergency Medicine
- Internal Medicine/Neurology
- Internal Medicine/Pediatrics
- Internal Medicine/Physical Medicine and Rehabilitation
- Internal Medicine/Preventive Medicine
- Internal Medicine/Psychiatry

**Guidelines for Evaluation of Clinical Competence in**

- Cardiovascular Disease
- Critical Care Medicine
- Endocrinology, Diabetes, and Metabolism
- Gastroenterology
- Geriatric Medicine
- Hematology
- Infectious Disease
- Medical Oncology
- Nephrology
- Pulmonary Disease
- Rheumatology

**Additional Information on**

- Adolescent Medicine
- Clinical Cardiac Electrophysiology
- Critical Care Medicine
- Geriatric Medicine
- Sports Medicine

**Examination Schedule**

Certification Examination in

**Internal Medicine**

Date: August 22–23, 1995
Registration Period: September 1, 1994, to December 1, 1994
Fee (US): $770
Cancellation Deadline: July 1, 1995
Sports Medicine
Date: April 7, 1995
Registration Period: July 1, 1994, to November 1, 1994
Fee (US): $890
Cancellation Deadline: March 1, 1995

Cardiovascular Disease
Date: November 9–10, 1995
Registration Period: January 1, 1995, to April 1, 1995
Fee (US): $890
Cancellation Deadline: October 1, 1995

Critical Care Medicine
Date: November 9, 1995
Registration Period: January 1, 1995, to April 1, 1995
Fee (US): $890
Cancellation Deadline: October 1, 1995

Endocrinology, Diabetes, and Metabolism
Date: November 9, 1995
Registration Period: January 1, 1995, to April 1, 1995
Fee (US): $890
Cancellation Deadline: October 1, 1995

Gastroenterology
Date: November 9, 1995
Registration Period: January 1, 1995, to April 1, 1995
Fee (US): $890
Cancellation Deadline: October 1, 1995

Medical Oncology
Date: November 9, 1995
Registration Period: January 1, 1995, to April 1, 1995
Fee (US): $890
Cancellation Deadline: October 1, 1995

Geriatric Medicine
Date: April 16, 1996
Registration Period: July 1, 1996, to November 1, 1996
Fee (US): Not determined
Cancellation Deadline: February 18, 1996

Clinical Cardiac Electrophysiology
Date: November 20, 1996
Registration Period: January 1, 1996, to April 1, 1996
Fee (US): Not determined
Cancellation Deadline: October 1, 1996

Hematology
Date: November 20, 1996
Registration Period: January 1, 1996, to April 1, 1996
Fee (US): Not determined
Cancellation Deadline: October 1, 1996

Infectious Disease
Date: November 20, 1996
Registration Period: January 1, 1996, to April 1, 1996
Fee (US): Not determined
Cancellation Deadline: October 1, 1996

Nephrology
Date: November 20, 1996
Registration Period: January 1, 1996, to April 1, 1996
Fee (US): Not determined
Cancellation Deadline: October 1, 1996

Pulmonary Disease
Date: November 20, 1996
Registration Period: January 1, 1996, to April 1, 1996
Fee (US): Not determined
Cancellation Deadline: October 1, 1996

Rheumatology
Date: November 20, 1996
Registration Period: January 1, 1996, to April 1, 1996
Fee (US): Not determined
Cancellation Deadline: October 1, 1996

Please see previous pages for penalty fee for late applications.

American Board of Medical Genetics
Thaddeus E. Kelly, MD, PhD, President, Charlottesville, Virginia
Edward R. B. McCabe, MD, PhD, Vice President, Houston, Texas
Eugene Hoyne, MD, Treasurer, Tucson, Arizona
Joan A. Boughman, PhD, Secretary, Baltimore, Maryland
Peter H. Byers, MD, Seattle, Washington
John C. Carey, MD, Salt Lake City, Utah
Robert J. Desnick, PhD, MD, New York, New York
Beverly S. Emanuel, PhD, Philadelphia, Pennsylvania
M. Anne Spence, PhD, Irvine, California
Roger E. Stevenson, MD, Greenwood, South Carolina

Address inquiries to
Sharon B. Robinson, MS, Executive Secretary
American Board of Medical Genetics
9650 Rockville Pike
Bethesda, MD 20814

(These criteria and conditions are subject to change without notice. All applicants are advised to contact the American Board of Medical Genetics to ascertain whether the information below is current.)

General Information
The American Board of Medical Genetics, Inc (ABMG), incorporated in 1980 under the sponsorship of the American Society of Human Genetics, Inc, prepares and administers examinations to certify individuals who provide services in medical genetics and provides accreditation of medical genetics training programs. The certification program consists of a general (core) examination, taken by all examinees, and specialty examinations in the following areas: (1) Clinical Genetics, (2) PhD Medical Genetics, (3) Clinical Cytogenetics, (4) Clinical Biochemical Genetics, and (5) Clinical Molecular Genetics.

First-Time Applicants
Eligibility for the examination will require successful completion of an ABMG or ACGME (clinical genetics only) accredited training program. All graduates of an accredited training program will be considered eligible to sit for the certification examinations, provided they submit supporting credentials that are listed for each specialty area.

The ABMG may grant eligibility to qualified individuals trained in other countries who complete their logbook under the auspices of an ABMG or ACGME-accredited training program. These special circumstances should be evaluated early in the candidate's work in the US. The ABMG, therefore, reserves the right to grant eligibility to such candidates. Candidates should submit a formal application...
and Information Supplement form. The ABMG reserves the right to declare a candidate ineligible if training, background, or references are deemed inadequate.

All applicants must sit for the core (general) examination and at least one specialty examination.

 Applicants for Reexamination

Reexaminees are those individuals who failed the examination for the first time. Applicants who sat for the first time in 1993 and failed to achieve certification can retake the examinations for the next cycle. Applicants who sit for the first time in 1996 and fail to achieve certification may retake the following cycle but must retake all examinations. Applicants cannot carry over a passed examination to the next cycle.

Reexaminees should: (1) submit a completed application form (information already on file need not be resubmitted, i.e., diploma, certificate of training), and (2) pay for the examination(s) to be retaken.

If certification has not been achieved within two consecutive examination cycles, it is necessary to begin again as a new applicant. For example, an examinee who sat for the first time in 1990 and for the second time in 1993 and failed to achieve certification must submit supporting credentials as if he/she were a new applicant. All information must be resubmitted (including proof of completing an ABMG-accredited training program, new logbook, letters of reference, etc.).

 Applicants for Certification in an Additional Specialty

Those who have been previously certified in a specialty and desire to take another specialty examination must submit new credentials including evidence of additional specialty training specific to the area for which certification is desired and include a new case log. Applicants must sit and pass the general examination and the new specialty examination in order to be certified in the new area.

Fees

A. Application Fee
   $450 for one specialty
   $500 for two specialties
   $550 for three specialties
   $600 for four specialties

   This is non-refundable and must accompany your application.

B. General Examination: $490

C. Specialty Examinations: (Each person must take at least one specialty examination.) Reexaminees must submit the examination fee with the application.

   Clinical Genetics  $500
   PhD Medical Genetics $500
   Clinical Cytogenetics $500
   Clinical Biochemical Genetics $500
   Clinical Molecular Genetics $500

   First-time applicants, or applicants applying for certification in a new specialty, will be required to submit the appropriate examination fees once their application has been approved.

   If an approved applicant withdraws from the examination, examination fees will be refunded at the applicant’s request if he or she notifies the Administrative Office. However, $100 of the examination fee will be retained to cover administrative costs. A candidate who fails to appear for examination will forfeit all examination fees.

Deadline for Applications

Applications must be postmarked no later than December 31, 1995. Applications postmarked after this date will not be accepted. All information (including logbooks) must be received at this time. Applicants whose training does not end until June 30, 1996, must submit their entire application by December 31, 1995. Applicants in training must submit 100 cases by December 31, 1995, and the remainder by March 31, 1996. Applicants who have completed training must submit everything by December 31, 1995.

When an Application Is Received

Upon receipt of the completed application and appropriate filing fee, all credentials will be evaluated. At its discretion, the ABMG will approve applications for the examination; each candidate will be notified in writing. Once an application has been approved, the individual will be considered eligible to sit for the examination and will be granted “Active Candidate Status.” Accepted candidates will be asked at this time to remit fees for each examination for which they are eligible to sit. Final eligibility cannot be determined and admission to the examination cannot be ensured until all supporting documents and fees have been received in the ABMG Administrative Office. If the applicant’s background is found to be deficient, the ABMG will require additional training and/or clinical experience before allowing the applicant to sit for the examination.

Applicants who will be completing training by June 30, 1996, may apply at this time for the 1996 examination (see individual specialty entry for further instructions).

Admission of Candidates to the Examinations

When all fees and supporting documents have been received and the candidate has been determined eligible, the individual will be notified of the assigned examination center. An admission card will be prepared and mailed to the candidate approximately 3 weeks before the examination. Candidates will not be admitted to any examination without an admission card.

Specific Requirements for Eligibility Listed by Specialty

The ABMG limits eligibility for certification opportunities to those who can demonstrate to the satisfaction of the ABMG that the specific criteria for certification have been met. Those practitioners working in the field of genetics who, despite academic or clinical backgrounds, do not meet specific criteria will not be permitted to sit for any examination.

To be eligible for certification by the ABMG, an individual must meet the criteria in the area of desired certification and provide the supporting documentation required. Certification is offered in these areas: clinical genetics, PhD medical genetics, clinical biochemical genetics, clinical cytogenetics, and clinical molecular genetics.

A. Clinical Geneticist: an individual who holds an MD or DO degree and can demonstrate competence to provide comprehensive diagnostic, management, and counseling services. Competence in this area implies that the individual

   1. Has diagnostic and therapeutic skills in a wide range of genetic disorders;
   2. Has an appreciation of heterogeneity, variability, and natural history of genetic disorders;
   3. Is able to elicit and interpret individual and family histories;
   4. Is able to integrate clinical and genetic information and appreciate the limitations, interpretation, and significance of specialized laboratory and clinical procedures;
   5. Has expertise in genetic and mathematic principles to perform risk assessment;
6. Has the skills in interviewing and counseling techniques required to elicit from the patient or family the information necessary to reach an appropriate conclusion; anticipate areas of difficulty and conflict; help families and individuals recognize and cope with their emotional and psychological needs; recognize those situations requiring psychiatric referral; and transmit pertinent information effectively, i.e., in a way that is meaningful to the individual or family; and
7. Has knowledge of available health care resources for appropriate referral.

First-time applicants seeking certification as clinical geneticists must submit the following items in support of the application:
1. One acknowledgement card
2. Notarized application
3. Notarized identification form with a recent photograph
4. Copy of doctoral diploma
5. Verification of satisfactory completion of at least 2 years in an accredited clinical residency program in any medical specialty—certificate of completion
6. Verification of satisfactory completion of at least 2 years in an ABMG-accredited clinical genetics training program. Applicants who will be completing their training by June 30, 1996, may apply at this time and supply current training information. The ABMG will contact the program director at the conclusion of the training period for verification of successful completion of training
7. Three letters of recommendation from ABMG-certified diplomates; one must be from your program director
8. A logbook of 150 cases for which the applicant had professional responsibility during the clinical genetics training period. The cases should provide evidence of a well-rounded experience in clinical genetics with a diversity of genetic disorders and counseling issues. No more than 50% of the cases may be in any one category. If your training does not end until June 30, 1996, the applicant must submit 100 cases at the time of application and the remainder by March 15, 1996, and
9. Documentation of license to practice medicine in the state where training took place

Applicants for reexamination within one cycle must submit the following:
1. Completed application form including a photo identification form, and
2. The appropriate examination fee(s)

B. PhD medical geneticist: An individual with a PhD degree who may work in association with a medical specialist, be affiliated with a clinical genetics program, serve as a consultant to medical and dental specialists, and/or serve in a supervisory capacity in a clinical genetics program. Competence in this area implies that the individual
1. Is able to elicit and interpret individual and family histories
2. Has an appreciation of the heterogeneity, variability, and natural history of the medical disorders in question
3. Is able to integrate clinical and genetic information in order to appreciate the limitations, interpretation, and significance of specialized laboratory and clinical procedures
4. Has expertise in genetic and mathematical principles to perform complex risk assessments, to interpret pedigree analysis (both segregation and linkage), and to understand the principles of genetic etiology;
5. Has the skills in interviewing and counseling techniques required to
   a. elicit from the patient or family the information necessary to reach an appropriate conclusion
   b. anticipate areas of difficulty and conflict
   c. help families and individuals recognize and cope with their emotional and psychological needs
   d. recognize those situations requiring psychiatric referral, and
   e. transmit pertinent information effectively, i.e., in a way that is meaningful to the individual or family

First-time applicants seeking certification as PhD medical geneticists must submit the following items in support of the application:
1. One acknowledgement card
2. Notarized application
3. Notarized identification form with a recent photograph
4. Copy of doctoral diploma in genetics, human genetics, or a related field
5. Verification of satisfactory completion of at least 2 years in a postgraduate ABMG-accredited medical genetics training program. Applicants who will be completing their training by June 30, 1996, may apply at this time and supply current training information. The ABMG will contact the program director at the conclusion of the training period for verification of successful completion of training
6. Three letters of recommendation from ABMG-certified diplomates are required; one of these letters must be from your program director, and
7. A logbook of 150 recent patients for whom genetic services were provided, with indication of the extent of the applicant's involvement. This log must be from an ABMG-accredited fellowship training program. The cases should provide evidence for a well-rounded experience in genetics with a diversity of genetic disorders and counseling issues. No more than 50% of the cases may be in any one disease. If your training does not end until June 30, 1996, the applicant must submit 100 cases at the time of application and the remainder by March 15, 1996.

Applicants for reexamination within one cycle must submit the following:
1. Completed application form including a photo identification form, and
2. The appropriate examination fee(s)

C. Clinical cytogeneticist: An individual with a doctoral degree (MD, PhD, DDS, etc.) who can demonstrate competence in providing cytogenetic laboratory diagnostic and clinical interpretive services. Competence in this area implies that the individual
1. Has diagnostic and interpretive skills in a wide range of cytogenetic problems
2. Has an appreciation of the heterogeneity, variability, and natural history of cytogenetic disorders
3. Is able to supervise the performance of cytogenetic laboratory studies for a wide range of applications with knowledge of their biological and statistical variability, and
4. Is able to appropriately communicate cytogenetic laboratory results in the capacity of consultant to other clinicians or directly to patients in concert with other appropriate clinicians or genetic counselors

First-time applicants seeking certification as clinical cytogeneticians must submit the following items in support of the application:
1. One acknowledgement card
2. Notarized application
3. Notarized identification form with a recent photograph
4. Copy of doctoral diploma in a relevant discipline
5. Verification of at least 2 years of postdoctoral experience in an ABMG-accredited cytogenetics training program
6. Three letters of recommendation from ABMG-certified diplomats; one must be from the director of the laboratory indicating that the applicant has had ongoing assessment during the training period and has had sufficient experience in specific techniques, management of cases, and as a consultant, to take the certification examination.

7. A logbook of 150 recent clinical cytogenetic cases indicating professional interaction with family, physicians, clinical geneticists, or PhD medical geneticists. (These cases should illustrate exposure to a wide variety of laboratory samples and include the reason why the study was performed and the karyotype report.) Cases should illustrate a wide variety of disorders and should provide evidence for a well-rounded experience in genetics with a diversity of exposure to cytogenetically based disorders and counseling issues. No more than 50% of the cases may be in any one issue type category. If your training does not end until June 30, 1996, the applicant must submit 100 cases at the time of application and the remainder by March 15, 1996.

8. Complete the Clinical Cytogenetics Competency List. This list must be signed by the laboratory director. Applicants for reexamination within one cycle must submit the following:
   1. Completed application form including a photo identification form
   2. List any additional relevant laboratory tests the applicant is competent to perform and interpret, and
   3. The appropriate examination fee(s)

D. Clinical biochemical geneticist: an individual with a doctoral degree (MD, PhD, DDS, etc) who is competent to perform and interpret biochemical analyses relevant to the diagnosis and management of human genetic diseases, and who can act as a consultant regarding laboratory diagnosis of a broad range of inherited disorders. Competence in this field implies that the individual:
   1. Can supervise the operations of a clinical biochemical genetics diagnostic laboratory
   2. Has a broad knowledge of
      a. basic biochemistry and biology
      b. the application of biochemical techniques to the diagnosis and management of genetic diseases, and
      c. the etiology, pathogenesis, clinical manifestations, and management of human inherited biochemical disorders, and
   3. Is able to appropriately communicate biochemical laboratory results in the capacity of consultant to other clinicians or directly to patients in concert with other appropriate clinicians or genetic counselors. First-time applicants seeking certification as clinical biochemical geneticists must submit the following in support of the application
      1. One acknowledgment card
      2. Notarized application
      3. Notarized identification form with a recent photograph
      4. Copy of doctoral diploma in a relevant discipline
      5. Verification of at least 2 years of postdoctoral training experience in an ABMG-accredited clinical biochemical genetics training program handling clinical material with a broad range of cases and techniques
      6. Three letters of recommendation from ABMG-certified diplomats; one must be from the director of the laboratory indicating that the applicant has had ongoing assessment during the training period and has had sufficient experience in specific techniques, management of cases, and as a consultant, to take the certification examination

7. A logbook of 150 recent clinical biochemical cases that demonstrate a broad range of genetic and laboratory disorders. These cases should also indicate contact with family, physicians, clinical geneticists, and/or PhD medical geneticists. Cases should illustrate a wide variety of disorders and should provide evidence for a well-rounded experience in clinical biochemical genetics with a diversity of genetic disorders, laboratory techniques and counseling issues. No more than 50% of the cases may be in any one category. If your training does not end until June 30, 1996, the applicant must submit 100 cases at the time of application and the remainder by March 15, 1996.

8. Complete the Clinical Biochemical Genetics Analyte and Method Competency list. This list must be signed by the laboratory director. Applicants for reexamination within one cycle must submit the following:
   1. Completed application form including a photo identification form
   2. Any additional laboratory tests the applicant is competent to perform, and
   3. The appropriate examination fee(s)

E. Clinical molecular geneticist: an individual with a doctoral degree (MD, PhD, DDS, etc) who is competent to perform and interpret molecular analyses relevant to the diagnosis and management of human genetic diseases, competent to direct or assist in the supervision and management of a molecular genetics diagnostic laboratory, and who can act as a consultant regarding laboratory diagnosis of a broad range of inherited disorders.

   Competence in this field implies that the individual:
   1. Can perform a variety of diagnostic assays
   2. Can supervise and direct the operations of a clinical molecular genetics diagnostic laboratory
   3. Has a broad knowledge of
      a. basic molecular biology and genetics
      b. the application of recombinant DNA techniques and linkage analysis to the diagnosis of genetic diseases, and
      c. the etiology, pathogenesis, clinical manifestations, and management of human genetic disorders, and
   4. Is able to appropriately interpret and communicate molecular diagnostic laboratory results in the capacity of consultant to other clinicians or directly to patients in concert with other clinicians or genetic counselors. First-time applicants seeking certification as clinical molecular geneticists must submit the following in support of the application
      1. One acknowledgment card
      2. Notarized application
      3. Notarized identification form with a recent photograph
      4. Copy of doctoral diploma in a relevant discipline
      5. Verification of satisfactory completion of at least 2 years in an ABMG-accredited molecular genetics training program. At least half of the training period should be spent in laboratory benchwork in molecular genetics and molecular diagnostics, handling clinical material with a broad range of cases and techniques
      6. Three letters of recommendation from ABMG-certified diplomats; one must be from the program director
      7. A logbook of 150 clinical molecular cases (a case is defined as a proband or a family study). The logbook should provide evidence for a diverse experience in molecular diagnosis with a variety of genetic disorders; use of different but appropriate techniques; and interpretation of results and contact with the referring physician counseling the patient. No more than 25% of the cases may be in any one disease category. If your
training does not end until June 30, 1996, the applicant must submit 100 cases at the time of application and the remainder by March 15, 1996, and
8. Complete the Clinical Molecular Genetics Competency List. This list must be signed by the laboratory director.
   Applicants for reexamination within one cycle must submit the following
   1. Completed application form including a photo identification form
   2. Any additional laboratory tests the applicant is competent to perform, and
   3. The appropriate examination fee(s)

Certificates
Candidates who pass the general examination and at least one specialty examination will become diplomates of the ABMG. This information becomes public information and diplomates will be listed in the Official American Board of Medical Specialties. Any certificate issued by the ABMG shall be subject to revocation at any time should the ABMG determine, in its sole judgment, that a candidate who has received a certificate was in some respect not properly qualified to receive or retain it.

Time-Limited Certification
Beginning in 1993, all certificates will be time-limited for a period of 15 years.

Applicants With Special Disabilities
The ABMG offers examinations in a place and manner accessible to persons with disabilities, or offers alternative accessible arrangements for such individuals. Candidates who need special accommodations during the examination for a physical disability should provide written details to the ABMG at the time of application for examination or soon after the disability takes place.

American Board of Neurological Surgery
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Edward R Laws, Jr, MD, Senior Director, Charlottesville, Virginia
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M Peter Heilbrun, MD, Salt Lake City, Utah
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Donald O Quest, MD, New York, New York
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Robert H Wilkins, MD, Durham, North Carolina
Fremont P Wirth, MD, Savannah, Georgia
Mary Louise Sanderson, Administrator, Houston, Texas

(These criteria and conditions are subject to change without notice. All applicants are advised to contact the American Board of Neurological Surgery to ascertain whether the information below is current.)

Diplomates
A list of diplomates and bylaws of the American Board of Neurological Surgery appear in the Official American Board of Medical Specialties Directory of Board Certified Medical Specialists, which can be obtained from Marquis Who's Who, Inc (121 Chanlon Rd, New Providence, NJ 07974). In addition, a list of new diplomates is published in the Journal of Neurosurgery shortly after each examination.

Information regarding training programs acceptable for certification can be found in the Graduate Medical Education Directory. This directory can be purchased from the American Medical Association (515 N State St, Chicago, IL 60610).

Qualifications
The American Board of Neurological Surgery evaluates all qualified applicants for their proficiency in neurosurgery.

The minimum educational requirements of the Board should not be interpreted as restricting programs to these standards. If necessary, neurosurgical program directors may retain residents in their programs beyond the required 5 years of residency training in order to ensure satisfactory competence in neurosurgery.

It is the responsibility of the candidate to seek information concerning current requirements for certification by the American Board of Neurological Surgery. Even though directors of approved neurosurgical residency programs are well informed regarding requirements for certification, placement in an approved program does not guarantee adequate training for certification. The candidate must make sure he/she receives such training.

Training Prior to Neurosurgery Residency
1. Graduation from a medical school that is acceptable to the Board.
2. Currently valid license to practice medicine in the state, province, or country of residence.
3. Twelve months devoted to acquiring adequate knowledge of fundamental clinical skills. This is known as postgraduate year one (PGY-1), general surgery year one, or internship, recommended for completion prior to beginning neurosurgical training, but must be completed prior to beginning the third year of that training. This may be achieved by a. one year of training in an approved general surgery program in the United States or Canada, or b. one year of training in an accredited neurosurgical residency program to include not less than 6 months in surgical disciplines other than neurosurgery; the remaining 6 months should include training in fundamental clinical skills considered appropriate by the program director, but may not include more than 6 weeks of neurosurgery; or c. holding a certificate from the American Board of Surgery or a fellowship (in surgery, not neurosurgery) of the Royal College of Surgeons of England, Edinburgh, Canada, Ireland, Australia, or Glasgow.

Neurological Surgery Training Requirements
For residents beginning the neurological portion of their training on or after July 1, 1979
1. Completion of 5 years of training following PGY-1. Neurosurgery training must occur in residency programs accredited by the RRC for Neurosurgery or its Canadian equivalent.
2. The 60 months of training must include at least 36 months of clinical neurosurgery in accredited programs; 12 months of this period must be served as a senior resident.
3. The training in clinical neurosurgery must be progressive and not obtained during repeated short intervals in a number of institutions. At least 24 months of training in clinical neurosurgery must be obtained in one institution.
4. At least 3 months must be devoted to training in clinical neurology. Six months is recommended. This training may be undertaken during PGY-1.
5. The unobligated 21 months may be devoted to neuropathology, neuroradiology, basic neurosciences, research, or other disciplines related to neurological surgery.

6. Exchange of residents between approved neurosurgical training centers in the United States and Canada may be arranged by the respective training program directors with the consent of the Board. In such instances, the Secretary of the Board must be notified of the rotation before the exchange begins. Such an exchange should in no way compromise any other training requirement. Training in any institution other than in the parent institution and its affiliated hospitals will not be considered as counting toward the requirements unless specified in advance by the program director and approved by the Board.

7. The program director must notify the Board of the appointment of each new neurosurgical resident and whether they are entering the program with intent to obtain certification and, if so, whether the director has informed the trainee of the requirements necessary to obtain such certification.

8. Residents in training after June 30, 1983, are required to record, in a fashion determined by the Board, their operative procedures.

9. Prior to acceptance for the certification process, the Board requires a statement from the candidate's program director to the effect that the candidate has met the minimum time requirements, has performed in training in a satisfactory manner and, in the judgment of the program director, is well prepared to enter into the independent practice of neurosurgery.

**Exceptional Modifying Circumstances**

Upon recommendation of the program director and ratification by the Board, credit may be given for previous training if a candidate:

1. Before entering an approved neurosurgical training program, has had substantially more than the prerequisite training in general surgery, medical neurology, or the basic neurological sciences; such credit must be approved by the Board.

2. Transfers from one approved neurosurgical training program to another approved program
   a. with the consent of the directors of both programs, or
   b. without the consent of one of the program directors, but with the approval of the Board.

In the above cases, the director of the program from which the candidate transfers must indicate in writing to the new program director the credit for training, both in time and category, which he/she is prepared to certify that the candidate has successfully completed. A copy of such statement must be submitted to the Secretary of the Board. The new program director may or may not honor such credit, depending upon appraisal of the resident's professional and educational progress in the new program. A statement of how much training credit will be accepted must also be submitted to the Secretary of the Board.

Requests for training away from a parent institution or for transfer from one program to another should be submitted in writing to the Board prospectively, not retroactively.

Training by preceptorship is not considered as fulfilling certification requirements. No credit is given for time spent in such training.

Credit for elective training in foreign or other nonapproved centers may be granted by the Board on an individual basis when this training is carried out as an integral part of the training program and with the advice and approval of the candidate's program director. The Board must be informed of such a rotation prior to its occurrence.

The above provisions in no way alter the basic minimum requirement of 60 months of residency training in neurosurgery, including a minimum of 3 months of training in clinical neurology and 36 months of clinical neurosurgery in accredited institutions, 12 months of which must be as senior resident and 24 months in one institution.

**Primary Examination**

Each applicant for the Board's oral examination must first pass for credit the primary examination, which is a written exam prepared by the Board with the assistance of a professional testing organization. The examination includes information on neuroanatomy, neurobiology, neurochemistry, neurology, neuropathology, neuropharmacology, neurophysiology, neuroradiology, neurosurgery, fundamental clinical skills, and material from other relevant disciplines deemed suitable and important by the Board.

The primary examination is given in March each year at training programs throughout the United States and Canada.

Residents in accredited training programs may take it for self-assessment or credit at the discretion of their program directors and diplomas may take the examination as often as desired for either credit toward certification or self-assessment. It is open for all neurosurgeons who have successfully completed training at accredited programs.

An application must be filed to take the primary examination. The deadline for receipt of this application by the Board is the first of January. The form must be accompanied by the fee set by the Board. This fee will be refunded only if the candidate informs the secretary's office that he/she is not going to sit for the examination prior to the deadline date for receipt of applications.

Examinees are required to sign a pledge that states that they agree to be bound by the Board's ruling regarding credentials irrespective of scores on the examination. By signing the pledge, candidates also grant permission to the American Board of Neurological Surgery and its testing organization to release the results, either for credit or self-assessment, to the examinee's program director.

Candidates should keep in mind that they must be scheduled for oral examination by the Board within 5 years of passing the primary examination for credit or completing a formal training program, whichever occurs later. Compliance with this regulation requires early submission of applications for oral examination and certification after training. If a candidate cannot be scheduled within the 5-year limit due to late submission of an application, he/she must once again pass the primary examination for credit before being scheduled for oral examination within the succeeding 3-year period. Candidates should also keep in mind that usually 18 months are required between submission of an application and oral examination.

**Practice Requirements**

After beginning practice, the candidate shall furnish to the Board the names of three physicians (two neurosurgeons, including one ABNS diplomate) who are knowledgeable about the quality of the candidate's practice. The Board will request reference letters from these physicians and other physicians in the community. It is the prerogative of the Board to send representatives to review the candidate's practice.

In addition, the candidate will submit the names and addresses of either the medical director or chief of staff at each hospital where the candidate has privileges. Letters will be requested to advise the Board of the candidate's status regarding admitting and operating privileges in each hospital where he/she practices. Prior to oral examination, each candidate must be in possession of hospital staff privileges in all hospitals in which he/she cares for patients. Such privileges must be unrestricted in respect to the hospital's requirements for a neurosurgeon.

The candidates must also forward to the Board a typewritten, chronological list of all inpatients for whom he/she has been the responsible physician or surgeon for a current 12 consecutive month
period. No minimum volume of operative procedures is required. The total experience must be tabulated by the candidate in a format defined by the Board. The case material must be accompanied by a summary form signed by the chief of staff, chief of service, president of the medical staff, or hospital administrator of the hospitals where the candidate practices indicating the essential accuracy of the data. These data must be approved by the Board prior to scheduling for oral examination.

Candidates are responsible for retaining duplicate copies of these records.

Certification of Those Training in Canadian Programs

Those satisfactorily completing approved Canadian training programs and holding a fellowship in neurosurgery from the Royal College of Surgeons (Canada) are eligible for certification through the same route as candidates training in the United States, outlined above.

Applications

Applications for oral examination and certification are automatically sent to residents in June of their last year of training. Additional applications and practice data forms are available from the Board’s Office. The application and accompanying information should be filled out and returned to the Board as soon as possible after beginning practice so that inquiries may be made from references and others in the community, the individual’s training program faculty, and hospitals where the candidate practices.

A pledge is part of the application for oral examination. By signing the application, the applicant agrees to abide by all the terms and conditions of this pledge.

Upon receipt of an application, the Board takes such steps as deemed appropriate to verify the statements of facts made in the application. Inquiries are made from references and others familiar with the candidate to obtain information relevant to the requirements for examination.

The Board makes the final decision regarding a candidate’s eligibility for oral examination and potential certification after considering all available information pertaining to the entire process of certification.

Application fees, once received, will not be refunded.

Oral Examination

The oral examination, a clinical problem-solving and patient-management exam, is given twice a year. Candidates are given case histories and, where appropriate, x-rays, scans, and other visual aids to augment the presentation and development of cases. The candidate must be able to explain verbally how he/she would proceed in evaluating and/or managing the case, and planning and performing the proposed operation or operations, if indicated. One hour is devoted to neurological surgery—intracranial disease; one hour to neurological surgery—spinal and peripheral nerve disease; and one hour to a mixture. Neurosurgical neurology is included in all sections. Each of the three hours is conducted in an interview setting with two examiners.

A candidate who passes the oral examination will be forwarded the Board’s certificate, once it has been suitably engrossed and signed by the officers of the Board.

Reexamination Rules

A candidate falling the oral examination once may request reexamination within 3 years. A minimum of 1 year must elapse before taking the examination for the second time. The examination fee must be paid.

A candidate who has failed the oral examination on two or more occasions must pass the primary examination for credit again before becoming eligible to retake the oral exam. Two letters of reference certifying the nature and quality of the candidate’s practice must be submitted to the Board, as well as hospital privilege letters and a year of new practice data. In addition, the candidate must pay the oral examination fee. Under these circumstances, candidates must take the oral exam within 3 years of repassing the primary examination. Should the candidate not apply for or fail to appear for oral examination within the three-year period, the candidate must repass the primary examination before being eligible for oral exam once again.

Payment of Fees

Fees for filing an application and for oral examination will be determined by the Board. They reflect costs that the Board incurs through obligations associated with the certification process. The application fee will not be returned even though the application for examination is denied.

Revocation of Certification

Pursuant to the rules and regulations established by the American Board of Neurological Surgery, the Board has the authority to revoke any certificate issued by it for various reasons, including the person to whom the certificate was issued is convicted of a felony, or his/her license to practice medicine has been lost or encumbered. Should revocation be disputed, there is a hearing mechanism for such an action.

American Board of Nuclear Medicine

James W Fletcher, MD, Chairman, St Louis, Missouri
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Joseph F Ross, MD, President, Los Angeles, California
William H Blahd, Vice President, Los Angeles, California

(These criteria and conditions are subject to change without notice. All applicants are advised to contact the American Board of Nuclear Medicine to ascertain whether the information below is current.)

Requirements for Certification

General Requirements for Each Candidate

Assurance that the applicant represents himself/herself to be a specialist in nuclear medicine.

General Professional Education

Graduation from a medical school approved by the Liaison Committee on Medical Education or from a school of osteopathy. If the applicant is a graduate of a medical school outside the United States or Canada, he/she must hold a currently valid ECFMG certificate issued by the Educational Commission for Foreign Medical Graduates.
Preparatory Postdoctoral Training
Training required for admission to the certifying examination in nuclear medicine shall comprise 1 or more years of preparatory postdoctoral training and 2 or more years of residency training in nuclear medicine.

Preparatory postdoctoral training shall consist of 1 or more years of residency training in programs satisfactory to the American Board of Nuclear Medicine (ABNM). Such programs shall provide broad experience in clinical medicine in which the primary emphasis is on the patient and his clinical problems. Preparatory training may be in any specialty in a residency program in the United States approved by the Accreditation Council for Graduate Medical Education (ACGME), or programs in Canada approved by the Royal College of Physicians and Surgeons of Canada (RCPSC), or the Professional Corporation of Physicians of Quebec (RCPQ).

One year of preparatory postdoctoral training must precede training in nuclear medicine.

Each nuclear medicine residency training program director must ensure that for each resident entering his or her program the preparatory postdoctoral training has been in a United States program approved by the ACGME, or in a Canadian program approved by the RCPSC or the PCPQ.

Special Postdoctoral Training in Nuclear Medicine
1. After completion of the preparatory postdoctoral training programs, there shall be satisfactory completion of a 2-year formal residency training program in nuclear medicine in a nuclear medicine residency training program recognized and approved by the Residency Review Committee for Nuclear Medicine and the ACGME or a Canadian program approved by the RCPSC or the PCPQ as competent to provide a satisfactory training in nuclear medicine.

2. The 2-year formal residency training program in nuclear medicine must include:
   a. A minimum of 18 months of training in clinical nuclear medicine, which will include, but not be limited to, radiopharmaceutical imaging in vitro and in vivo measurements, nuclear imaging, positron emission tomography, nuclear magnetic resonance imaging, therapy with unsealed radionuclides, medical management of individuals exposed to ionizing radiation, the safe management and disposal of radioactive substances, and the direction of radiation safety programs.
   b. Six months of training in allied sciences, which must include medical nuclear physics, radiation biology, radiation protection, instrumentation, radiopharmaceutical chemistry, statistics, and computer sciences; and may also include pathology, physiology, and other basic sciences associated with nuclear medicine. The time spent in training in allied science may be spaced throughout the period of training in nuclear medicine and in a manner that does not exceed 6 complete months of training.
   c. For candidates who have completed residency training programs in clinical disciplines closely related to nuclear medicine in residency programs approved by the ACGME, the RCPSC, or the PCPQ, credit may be given for some of that training. Candidates desiring credit toward the nuclear medicine requirement should write to the Board requesting such credit.
   d. The Board considers demonstration of clinical competence in the management of the nuclear medicine patient of paramount importance in its qualification of the applicant to take the certifying examination. The Board designates the directors of nuclear medicine residency programs and their supporting evaluation committees as the authorities who most appropriately can provide to the Board the necessary documentation of competence in clinical nuclear medicine, and requires that all program directors certify to the Board that each applicant from their programs is competent in clinical nuclear medicine. These reports will be reviewed by the Board before accepting an applicant to take the certifying examination.

If a residency program director's evaluation indicates a candidate's competence in clinical nuclear medicine is unsatisfactory, the applicant will not be admitted to the examination unless the Board finds that the applicant's overall performance meets its standards. An applicant not admitted to an examination on the basis of these findings may appeal in writing to the Board for a special evaluation of competence in clinical nuclear medicine within 45 days of receipt of notification. The appeal should state that a request is made for review of the decision not to admit to the examination and why the candidate considers the decision to be in error. Applicants whose clinical competence is judged satisfactory in this evaluation will be admitted to the next examination for which they apply. Candidates judged not satisfactory in this evaluation are advised to spend an additional year training before applying again for special evaluation of competence.

Applicants submitting false credentials are subject to disqualification from examination or revocation of certification.

Patient Care Responsibility
Candidates for certification in nuclear medicine will have the equivalent of at least 2 years' training in which the primary emphasis is on the patient and his clinical problems. This minimum period may be spaced throughout the entire postdoctoral training but should be of sufficient duration for the trainee to become knowledgeable in the aspects of clinical medicine relevant to nuclear medicine, including patient care.

Canadian Training
Physicians who satisfactorily complete training in Canadian nuclear medicine programs approved by the RCPSC or the PCPQ are eligible for admission to the ABNM certifying examinations.

Completion of Training
All preliminary and nuclear medicine residency training must be completed prior to September 1 of the year the candidate takes the certifying examination.

Approved Residency Training Programs
Residency training programs in nuclear medicine accredited by the ACGME may be found in the Graduate Medical Education Directory published annually by the American Medical Association, or may be obtained by contacting: Secretary, Residency Review Committee for Nuclear Medicine, ACGME, 515 N State St / Ste 2000, Chicago, IL 60610.

Examination
An objective type examination is administered in a morning and an afternoon session. The examination evaluates the candidate's knowledge and competence in the management of patients in the area of clinical nuclear medicine, including, but not limited to, radionuclide imaging, in vitro and in vivo measurements, nuclear imaging, the principles of nuclear magnetic resonance imaging, therapy with unsealed radionuclides, the medical effects of exposure to ionizing radiation, the medical management of persons exposed to ionizing radiation, radiation safety, and the safe management and disposal of radioactive substances. Also included is an evaluation of the candidate's knowledge in the related sciences of medical nuclear physics, radiation biology, radiation protection, instrumenta-
tion, radiopharmaceutical chemistry, computer sciences, and statistics; it may also include pathology, physiology, and other basic sciences associated with nuclear medicine.

Applications
Applicants who wish to be examined by the Board must complete, sign and file with the Board Office an application on the official form together with the supporting data required by the application. The applicant must enclose a check to cover the examination fee and a self-addressed postcard, which will be returned to the applicant when all application materials have been received by the ABNM. It is the responsibility of the applicant to make certain that the required evaluation forms have been completed by his/her program director, and sent to and received by the ABNM.

As soon as determination is made concerning admission or non-admission to the examination, the candidate will be notified by mail, and if admitted, assignment of the candidate number and notification of the examination site will be given. Before the final action on applications, officers, members, and employees of the Board are not authorized to estimate the eligibility of applicants. Applicants are requested not to discuss or write for opinions regarding the status of their application. The Board decides on eligibility to take the examination only by approving or disapproving individual applications, and accordingly has no "Board-eligible" category.

Inquiries concerning the applicability of previous training and experience should be sent with complete documentation of all education and training to the Board Office. A copy of the Board’s response to these inquiries should be forwarded with any subsequent examination application.

Release of Information
Candidates will receive the results of their examinations (pass/fail letter) approximately 4 months after the examination.

A list of diplomates of the ABNM will be found in the Official American Board of Medical Specialties Directory of Board Certified Medical Specialists, published by the American Board of Medical Specialties and Marquis Who’s Who.

Upon request and with the approval of the Board Chairman, the Board releases information on diplomates to federal and state licensing bodies and to educational and professional organizations for specific, limited, and appropriate professional use. An authorization for release of this information is a part of the examination application form.

Policy on Reexamination
Applicants who fail the examination are eligible for reexamination. An examination fee must accompany each completed application for reexamination. If an applicant is disqualified from the examination by reason of dishonesty in the application or in taking the examination and his/her examination is invalidated by the Board, reexamination shall be at the Board’s discretion.

Recertification
The ABNM offers its diplomates voluntary recertification based upon fulfillment of certain requirements including passing an objective cognitive examination. The ABNM will not rescind initial certification granted prior to 1992. Beginning in 1992 certification will be valid for a period of 10 years and may be revalidated by recertification.

Journals Publishing Information on Application and Examination Schedules
Annals of Internal Medicine (Medical News Section)

Journal of the American Medical Association (Examinations and Licensure Monthly Section)
Journal of Nuclear Medicine Radiology
Journal of Clinical Pathology

Changes in Policies and Procedures
The Board reserves the right to make changes in its fees, policies, and procedures at any time, and cannot assume responsibility for giving advance notice thereof. The provisions of this publication are not to be construed as a contract between any candidate and the ABNM.

Fees
The examination fee must accompany the application. If the applicant is rejected by the Board or withdraws prior to August 1, the application processing fee will be retained by the Board. If the applicant withdraws after August 1, the entire examination fee will be retained by the Board.

American Board of Obstetrics and Gynecology
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Mary J O’Sullivan, MD, Vice President, Miami, Florida
William Droegemueller, MD, Director of Evaluation, Chapel Hill, North Carolina
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Philip J DiSaia, MD, Orange, California
Alan H DeCherney, MD, Boston, Massachusetts
Sharon L Dooley, MD, Chicago, Illinois
Wesley C Fowler, Jr, MD, Chapel Hill, North Carolina
Ronald S Gibbs, MD, Denver, Colorado
Luella Klein, MD, Atlanta, Georgia
Donald K Rahhal, MD, Oklahoma City, Oklahoma
Edward E Wallach, MD, Baltimore, Maryland
Gerson Weiss, MD, Newark, New Jersey
Norman F Gant, MD, Executive Director, Dallas, Texas
Deborah L Burkett, EdD, Educational Associate, Troup, Texas
Laurie Daniels, Assistant Executive Director, Dallas, Texas

Division of Gynecologic Oncology
Wesley C Fowler, Jr, MD, Director
Barrie Anderson, MD
William J Hoskins, MD
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Division of Reproductive Endocrinology
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Eli Y Adashi, MD
A F Haney, MD
Robert Rebar, MD
Daniel H Riddick, MD

(These criteria and conditions are subject to change without notice. All applicants are advised to contact the American Board of Obstetrics and Gynecology for the most current information.)
Certification Requirements

Obstetrics and Gynecology to ascertain whether the information below is current.

Types of Board Status

Residency Graduate
An individual for certification is registered with the Board when, upon application, the Board rules that he/she has fulfilled the requirements to take the written examination (see "Requirements" for the written examination).

Active Candidate
1. An individual may achieve active candidate status by passing the written examination.
2. To maintain active candidate status, the candidate must not have exceeded the limitations to admissibility for the oral examination (see "Limitations").
3. Active candidate status that has expired may be regained by repeating and passing the Board's examination.

Diplomate
1. An individual becomes a diplomate of the Board when he/she has fulfilled all requirements, has satisfactorily completed the written and the oral examinations, and has been awarded the Board's certifying diploma.
2. Certificates have limited duration of validity. Certificates will bear a limiting date of 10 years, after which they are no longer valid. Each diplomate must be evaluated again to receive a new certificate.

Certification Process
Certification as a specialist in obstetrics and gynecology is the end of a process lasting many years. The required minimum duration of graduate education is 4 years.

During the final year of graduate training, it is necessary to initiate certain measures. Because most graduate training programs begin on July 1 and end on June 30, the following summary of the certification process is based on these dates. However, applicants who complete residency training at unusual times will have an extended time in the certification process.

Between September 1 and November 30 of the final year of residency, the candidate should request and complete the application for the written examination. If he/she is ruled admissible to take the examination, he/she will do so in June of the final year of residency.

If he/she passes the written examination, the candidate enters a 2-year period of practice in the specialty. The candidate is required to provide a list of patients under his/her care for a 12-month period beginning on July 1 of his/her second year of practice. Between January 1 and February 28 of his/her second year of practice, the candidate should request and complete the application for the oral examination.

The candidate may enter a 2-year Board-approved postresidency fellowship. Upon completion, this candidate will then enter a 1-year period of practice in the specialty. This candidate is required to provide a list of patients under his/her care during this year of practice (January 1 to December 31). Between January 1 and April 30 of this year of practice, the candidate should request and complete the application for the oral examination.

The candidate's list of patients must be mailed to the Board office between January 1 and February 1, following the completion of the 12-month period of patient care. If ruled admissible, the candidate thus takes the oral examination in March or April.

Important Dates in the Certification Process

A. Final Year of Residency
   July 1—Commence
   September 1 to November 30—Apply for written examination
   June—Take written examination

B. Practice
   1. First year of practice
      No Board activities necessary
   2. Second year of practice
      July 1 to June 30—Patient list
      January 1 to February 28—Apply for oral examination
   3. Third year of practice
      August 15—Deadline for submission of patient list
      November—Take oral examination

C. Fellowship in Subspecialty
   1. First year (fellowship)
      No Board activities
   2. Second year (fellowship)
      No basic Board activities
      (September 1 to November 30—Apply for subspecialty written examination)
   3. Third year—First year of practice
      January 1 to February 28—Apply for the oral examination
      January 1 to December 31—Patient list
   4. Fourth year—Second year of practice
      February 1—Deadline for submission of patient list
      March or April—Take oral examination

Responsibility of a Candidate
It is the responsibility of the candidate to seek information concerning the current requirements for certification as an obstetrician and gynecologist. The Board does not assume responsibility for notifying a candidate of changing requirements or the impending loss of his/her admissibility to an examination.

Written Examination
The written examination is a 3½-hour examination consisting of questions of the objective (multiple choice) type. Questions will be chosen from each of the following areas of knowledge
1. Anatomy, embryology, and genetics
2. Physiology
3. Endocrinology, fertility, and infertility
4. Gynecology
5. Obstetrics
6. Medicine, surgery, and psychosomatic problems
7. Pathology
8. Oecology

The candidate will be expected to demonstrate skills necessary to apply basic knowledge to the management of clinical problems. These skills include
1. Obtaining needed information
2. Interpretation and use of data obtained
3. Selecting, instituting, and implementing care
4. Management of complications
5. Following and continuing care

The areas of information and skills examined for are further outlined in Educational Objectives for Resident Education in Obstetrics and Gynecology published by the Council on Resident Education in Obstetrics and Gynecology.

Requirements
1. Degree of doctor of medicine, or an equivalent degree, and unrestricted license (an educational or institutional license will suf-
American Board of Obstetrics and Gynecology

The requirement of unrestricted license must have been met prior to the time that the application is submitted. An educational or institutional license is not satisfactory. Candidates with a DO degree must have graduated from a school of osteopathy accredited by the American Osteopathic Association.

2. The candidate will be required to have completed or be near completion (see Application) of no less than 4 years in clinical programs accredited by the Accreditation Council for Graduate Medical Education (ACGME) or the Council of the Royal College of Physicians and Surgeons of Canada. This must include at least 26 months of obstetrics and gynecology, including the usual time as chief (senior) resident in the program. Completion of a year of "PG 1" plus a 3-year residency program, or a 4-year residency program will fulfill this requirement, but if the program consists of more than 4 years, the entire program must be completed.

Time spent in an osteopathic hospital or in any program not accredited by the ACGME will not fulfill this requirement.

3. A statement signed by the program director certifying that the candidate has
   A. followed satisfactorily the course of instruction designed for this program
   B. taken leaves of absence and vacation not exceeding 6 weeks in any year
   C. completed and submitted to the program director a satisfactory resident experience log
   D. achieved the appropriate knowledge, ability, and judgment in order to provide competent clinical care in obstetrics and gynecology, as documented by ongoing evaluation during the entire resident program, and
   E. demonstrated the necessary technical skills to competently perform
   1. major abdominal and vaginal surgical procedures upon the female pelvis and related structures
   2. spontaneous and operative obstetric deliveries
   3. surgical exploration of the abdomen
   4. endoscopic procedures in the pelvis of proven value
   5. diagnostic evaluation including electronic monitoring, ultrasound, colposcopy, and amniocentesis
   6. diagnosis and treatment of complications of the above, and
   7. demonstrated good moral and ethical character.

Application for Examination in 1995

A candidate who has completed an accredited residency program and a candidate scheduled to complete an accredited residency program on or before August 31, 1996, may apply on or before November 30, 1994, to write the examination on June 26, 1995.

The requirement of unrestricted license must have been met prior to the time that the application is submitted. An educational or institutional license is not satisfactory.

The form on which to apply to write the examination on June 26, 1995, may be obtained by writing to the Board office after September 1, 1994. Each applicant must meet the requirements effective in the year he/she requests admission to the examination. As a part of the application form, endorsement, and verification of the resident's experience, competence, satisfactory performance, and confirmation of the scheduled date for completion of the candidate's residency are requested of the director of the obstetric and gynecologic residency program.

The Board will make the final decision concerning the applicant's admission to the examination after considering all circumstances affecting his/her situation.

A candidate's application to write the examination on June 26, 1995, completed in all details, together with payment of the application fee of $200, must be received in the Board office postmarked on or before November 30, 1994. A copy of the candidate's current license registration also is required.

The requirement of unrestricted license must have been met prior to the time that the application is submitted. An educational or institutional license is not satisfactory.

When the candidate is ruled admissible to the examination he/she will be notified in April (1) that the $300 examination fee is payable and (2) the date the fee must be paid (see "Fees"), if the candidate is to be scheduled to write the examination in June.

If a candidate is found to be involved in litigation or investigation regarding ethical or moral issues, he/she will not be scheduled for examination and the application will be reexamined. Typically, the Credentials Committee will defer such a decision for 1 year to gain further information.

Falsification of data (including case lists) or evidence of other egregious ethical, moral, or professional misbehavior may result in a deferral of consideration of a candidate's application for at least 3 years, and the candidate must meet all eligibility requirements in effect at the end of the deferred period.

When the Credentials Committee rules an applicant not admissible to the written examination, a new application and fee may be submitted at a later date, but the candidate must then have fulfilled the requirements effective in the year of the new application.

Admission to the Written Examination

The candidate ruled admissible to the examination will be sent an authorization for admission form, which must be presented to the proctor at the time and place of examination. When a candidate is scheduled to complete his/her residency program after submission of the application (but before September of that year), verification of the currently satisfactory manner in which the candidate is completing his/her residency must be confirmed by the signature of the director of the residency program on the authorization for admission form, dated within the month the candidate is scheduled to write the examination.

Results of the Examination

The results of the examination written in late June will usually be reported to each candidate in approximately 9 weeks.

A passing grade on the written examination does not establish a candidate's admissibility to the oral examination for certification. (See "Oral Examination and Requirements.")

Requests for Reexamination

A candidate previously scheduled to write the examination who fails to do so, as well as the candidate who writes but fails to pass a previous examination, must write the Board office after September 1, 1994, to request reapplication materials for the 1995 examination. It is necessary for each applicant to meet the requirements effective in the year he/she requests admission to the examination.

The reapplicant must have submitted completed reapplication materials, a copy of current license registration and the reapplication fee of $200, prior to the November 30, 1994, deadline.

The application fee and examination fee (see "Fees") must be paid each year a candidate is to be scheduled to write the examination.

Oral Examination

All correspondence, applications and information directed to the Board must be in English.

All fees must be paid in United States currency.
The oral examination is designed to evaluate the candidate’s knowledge and skills in solving clinical problems in obstetrics and gynecology, and to evaluate actual behavior in independent practice. It is emphasized that candidates will be examined in all areas of obstetrics and gynecology. More than half of the examination will consist of questions concerning patient management problems. The candidate’s list of patients will be used freely by the examiners for this purpose, but additional basic clinical problems will be included. The remainder of the examination will include recall of basic knowledge in obstetrics and gynecology and interpretation of gross and microscopic pathology, X-ray films, sonograms, and related material from photographic slides.

Microscopes and slide projectors will be used. The knowledge and skills required for the oral examination are the same as those listed in regard to the written examination.

Recording devices will not be permitted during the oral examination.

Candidates will be expected to demonstrate that they have acquired the capability to perform, independently, major gynecologic operations, spontaneous and operative obstetric deliveries, to manage the complications thereof, and to perform the essential diagnostic procedures required of a consultant in obstetrics and gynecology.

Candidates will be expected to demonstrate a level of competence that allows them to serve as consultants to physicians who are not obstetrician-gynecologists in their community.

The report of the examining team will be reviewed by the Board of Directors and each candidate is passed or failed by vote of the Board.

You can expect the examination to be completed within a half day.

At the completion of the oral examination, if a candidate believes his examination has not been conducted in a fair and unbiased manner, the candidate may report within the hour to the Board office staff and ask for a second examination. The request must be made written within a 1 hour. If the appeal is granted:

1. A second examination will be provided at the next regularly scheduled annual oral examination at no additional charge.
2. The repeat examination will be conducted by an entirely different team of examiners, no one of whom shall have previously participated in an examination of the candidate.
3. Neither the questions nor the candidate’s answers on the first examination will be known to or taken into account by the second group of examiners, and
4. The decision of the examiners conducting the second examination shall determine the results of the candidate’s oral examination.

**Requirements**

1. Passing grade on the written examination.
2. Good moral and ethical character.
3. Unrestricted license to practice medicine in one of the States or territories of the United States or a province of Canada, since at least February 28, 1944.
4. Actively engaged in (private or nonprivate) unsupervised practice.
   a. Independent unsupervised patient care limited to obstetrics and gynecology
      1. for at least the time from February 18, 1994, through June 30, 1994 (time spent in a critical care fellowship does not meet this requirement), or
      2. for at least the time from July 1, 1994, through June 30, 1995, for candidates who have successfully completed a Board-approved fellowship (this includes critical care fellowship only if taken in continuity with a Board-approved specialty fellowship).
   b. Unrestricted hospital privileges to practice as an obstetrician-gynecologist since at least July 1, 1994. Such privileges must be granted in each of the hospitals in which the candidate has been responsible for patient care during this time. If the candidate is under investigation or on probation, the examination will be deferred until the investigation is completed, the probation is lifted, and full and unrestricted privileges are granted.
5. Submission of typewritten lists (two copies) on or before August 15 preceding the examination, of all patients dismissed from care in all hospitals during the 12 months ending June 30 prior to the scheduled examination, and a list of 40 patients from office practice.

   The candidate is personally responsible for the proper preparation, accuracy, and completeness of the case lists, which will reflect the unsupervised practice (private or nonprivate) activity following residency and fellowship.

6. On the day of the examination, the candidate will be expected to sign the following statement: "There have been no restrictions in my hospital privileges since the date of my application. Candidates who are unable to sign this statement will not be admitted to the examination until and unless they present evidence that full and unrestricted privileges have been restored.

7. Practice that consists of ambulatory care exclusively will not be considered adequate to fulfill these requirements.

   Additional requirements for candidates practicing in a country other than the United States or Canada.

8. Submission with the application of a letter(s) from a senior responsible officer in the hospital(s) where the candidate practices, verifying the candidate’s responsibility for independent, unsupervised care of obstetric and gynecologic patients.

**Limitations**

Duration of active candidate status is limited. Candidates must pass the oral examination within 6 years following passing the written examination and may take the oral examination only three times. If they fail the oral examination three times, or fail to pass the oral examination within 6 years, they become ineligible to repeat the examination at that time. They must repeat and pass the written examination to become admissible to the oral examination again.

**Determination of Qualifications**

The Board will require, by confidential inquiry, documented evidence concerning a candidate’s professional reputation, moral and ethical character, and in-hospital practice privileges from administrative officials of organizations and institutions to whom the candidate and his/her conduct of practice is known.

Time as a “resident” or “house officer” in excess of that necessary to fulfill the requirements to take the written examination, or time in a “student” or a teaching or research appointment that does not involve appointment to the staff of an approved hospital with unrestricted privileges to practice as an obstetrician and gynecologist, will not be acceptable evidence of a degree of responsibility for patient care that is acceptable fulfillment of the required “independent practice.”

Each candidate will be required to furnish the Board with certain prescribed information concerning his/her performance in practice (maternal mortality rate, perinatal mortality rate, cesarean section rate, etc.).

If a candidate is found to be involved in litigation or investigation regarding ethical or moral issues, he/she will not be scheduled for examination and the application will be reexamined. Typically, the Credentials Committee will defer such a decision for 1 year to gain further information.
Falsification of data (including case lists) or evidence of other egregious ethical, moral, or professional misbehavior may result in deferment of consideration of a candidate's application for at least 3 years and the candidate must meet all requirements in effect at the end of the deferred period.

Patient lists (a) not providing the information requested; (b) not prepared in accordance with the format requested; or (c) that do not have sufficient numbers of patients, or do not include sufficient breadth and depth of clinical problems, may disqualify the candidate for admission to the oral examination.

Application for Examination in 1995

Application to take the oral examination in November 1995 must be made on the "application for the 1995 examination" form. The application, complete in all details, with payment of the application fee of $350, must be received in the Board office during January or February 1995. The deadline for receipt of applications in the Board office is a postmark of February 28, 1995. Requests for the appropriate form must be made in writing.

The Board will make the final decision concerning the applicant's admission to the oral examination after considering all circumstances affecting his/her situation.

A candidate ruled admissible to the oral examination in November 1995 will be so notified on or before July 15, 1995. He/she must then submit, on or before August 15, 1995:

1. Duplicate, typewritten, and verified lists of all patients dismissed from his/her care in all hospitals during the 12 months preceding June 30, 1995, and a list of 40 patients from his/her office practice.

   The candidate's lists of patients will be used as a basis for questions during the oral examination and will not be returned to the candidate, and

2. Payment of the examination fee by personal check or money order of $450 (in US funds).

Patient Lists for the Oral Examination

Each candidate for the oral examination must prepare the following patient lists for review by his/her examiners at the time of examination. The candidate's list of patients will be freely used as a basis for questions that will be patient-management oriented. Questions will be developed that test the ability of the candidate to

1. Develop a diagnosis. This includes the necessary clinical, laboratory, and diagnostic procedures
2. Select and apply proper treatment under elective and emergency conditions
3. Manage complications. This includes prevention, recognition and treatment, and
4. Plan and direct follow-up and continuing care

Carelessly prepared or incomplete case lists may contribute to failure to pass the oral examination.

The candidate should bring a duplicate patient list to the oral examination for personal reference. Do not include any information on this duplicate list that did not appear on the case lists sent to the Board office.

The case lists must have sufficient numbers and sufficient breadth and depth of clinical difficulty. They must include 40 office practice patients and a minimum of 50 patients with significant problems. The clinical problems will vary according to the nature of the candidates' practices. However, the problems must be of sufficient variety and severity to permit the evaluation of a candidate's ability to function as a consultant. Ordinarily, these lists will include patients having obstetric management and a variety of major abdominal and vaginal surgical procedures. Candidates who have successfully completed a Board-approved fellowship, and who are active candidates for certification of special qualification, may submit cases in a single specialty within obstetrics and gynecology, if they represent the breadth and depth of that specialty.

The candidate's list must include 40 office practice patients and all hospitalized patients discharged or transferred from the candidate's care during the 12 months ending June 30 of the current year, and must be mailed to the Board office on or before August 15 preceding the November examinations.

The patients listed must be only those for whom the candidate has had personal responsibility for professional management and care. Recording such professional responsibility implies that the candidate has personally controlled the medical and/or surgical management of each patient listed. In the case of partnership or group practice, the patients listed should be only those managed by the candidate.

A patient list should be accurately typed across unbound sheets of white paper 8 1/2 x 11 inches in size. Separate lists are required for each hospital. The headings must conform in all details and provide the information indicated by the format of the forms enclosed with the oral application. Two copies of the complete list must be submitted.

Standard nomenclature should be used. Abbreviations are not acceptable. Only English language will be acceptable.

The duplicate lists of patients will not be returned to the candidate after the examination. The candidate should bring a duplicate list to the examination.

1. Office Practice Patients

A list of 40 patients from the candidate's office practice should be prepared in the format accompanying the application. List separately patients who have presented with any of the following problems. List no more than four patients from any one category. Do not include any patients who appear on the hospital lists.

Genetic problems
Amenorrhea
Infertility
Abnormal uterine bleeding
Developmental problems
Sexual dysfunction
Contraception complications
Hirsutism
Abnormal cervical-vaginal cytology
Pelvic pain
Vaginal discharge/pruritus
Breast problems
Medical complication of pregnancy
Premenstrual tension
Office surgery
Sexually transmitted disease
Asymptomatic pelvic mass
Pelvic relaxation problems
Urinary tract infection
Psychosomatic problems
Menopause

List separately each patient and include the problem (one of the listed categories), diagnostic procedures, treatment, results, and number of office visits during the 12-month period. Group patients together under each separate category.

2. Gynecology

A list of all gynecologic patients hospitalized, ambulatory, or short-stay surgery, should be prepared in the format accompanying the application and listed in order as follows

a. Major operative procedures
b. Minor operative procedures
c. Nonsurgical admissions

The preoperative diagnosis should appear for all major and minor surgical procedures. The size of ovarian cysts must be recorded. For nonsurgical conditions, the admission diagnosis should be recorded. The treatment recorded should include all surgical procedures, as well as primary nonsurgical therapy. Surgical diagnosis refers to the pathology diagnosis. For hysterectomy specimens, the uterine weight in grams must be recorded. In cases without tissue for histologic diagnosis, the final clinical diagnosis should be listed.

Days in hospital on this listing of patients, as well as on all other lists, is the arithmetic difference between date of discharge and date of admission.

The total number of uncomplicated, induced abortions of 12 or less weeks' duration should be reported simply as a total number. Induced abortions of more than 12 weeks' (menstrual age) duration should be listed separately, indicating the duration of pregnancy and the technique employed.

Also list separately, as individual patients, all with complications following induced abortions, either observed or reported to you, regardless of the duration of the pregnancy when abortion was induced.

3. Obstetrics

A list of obstetric patients should be prepared in the format accompanying the application. List separately each patient with a complication or abnormality, as well as medical and surgical intervention during pregnancy, labor, delivery, and the puerperium. In addition, a total of the number of normal, uncomplicated obstetric patients, managed during the same 12-month period, should appear at the end of the obstetric list.

Interpretation of “normal obstetric patients” for this listing implies that:

a. Pregnancy, labor, delivery, and the puerperium were uncomplicated, labor began spontaneously between the 37th and 42nd week of gestation
b. The membranes ruptured or were ruptured after labor began
c. Presentation was vertex, position was occiput anterior or transverse, labor was less than 24 hours in duration
d. Delivery was spontaneous or by outlet forceps, with or without episiotomy, from an anterior position
e. The infant was not asphyxiated (Apger 6 or more), of normal size, and healthy, and
f. The placental stage was normal and blood loss was not excessive

Deliveries not fulfilling these criteria must be listed individually. Include gestational age at admission.

4. Cover Sheets

Each list of patients, gynecologic and obstetric from each hospital, should be verified as illustrated by the form accompanying the application. Note that the record librarian or other hospital official must attest that (a) the patients listed were cared for by the candidate, and (b) that all of the hospitalized patients dismissed from the candidate's care have been separately listed or reported in the totals reported for the period indicated.

5. Summary Sheet

Using the form provided for this purpose, prepare a summary of all cases for all hospitals combined.

Admission to the Oral Examination

If the examination fee has been paid and the two copies of patients have been submitted by August 15, 1994, the candidate will receive an authorization for admission form and a reservation card for the hotel at least 1 month prior to the examination, indicating the day, time, and place to report for the examination. Please keep us informed of your current mailing address.

Ruling Not Admissible

A candidate not admitted to an oral examination may subsequently reapply, but must then submit a new application, pay the application fee, and meet the requirements applicable at the time he/she reapplies.

If the candidate was disqualified because the case lists were judged insufficient for a fair examination, the new case lists will be added to those already submitted. Thus the requirement of sufficient numbers, breadth, and depth in the case list makes time in practice the variable and experience the constant.

Reexaminations

A candidate who is disqualified or who fails to pass the oral examination must reapply in order to take the examination another year by submission of a new application during January or February, with payment of the reapplication fee of $350.

A candidate reapplying for examination will again be asked to provide verification of his/her responsibilities for patient care and will again be notified, early in July, in regard to his/her admissibility to the next examination.

A candidate accepted for reexamination must submit, on or before August 15 prior to examination, new case lists of patients for the 12 months prior to June 30 prior to the oral examination.

The examination fee of $450 is due each time a candidate receives notice that he/she can be scheduled to take the oral examination. Each reexamination will be conducted by examiners who have no knowledge of the fact or circumstances of a candidate's previous failure.

Postponement of Oral Examination

A candidate failing to take an oral examination for which he/she had been scheduled must submit a new application during January or February of the following year, when his/her admissibility to the next examination will be determined on the basis of the candidate's professional activities as reported during the current year. Payment of the $350 reapplication fee must accompany each reapplication.

If notified of his/her admissibility to the next oral examination, he/she must again submit, before August 15, a listing of all patients dismissed from his/her care in all hospitals during the 12 months ending June 30 prior to the oral examination, and a list of 40 patients from office practice.

Fees

Since the fees have been computed to cover the costs of examination and administrative expense, they will not be refunded or credited. All fees must be paid in United States currency. The candidate's canceled check is to be considered the receipt.

A. Written Examination

The application fee of $200 must be enclosed with each application, reapplication, or request to write the examination. The candidate will usually be notified early in April that his/her application or request has been approved, at which time the $300 examination fee will be due. If payment of the examination fee has not been received in the Board office postmarked on or before May 1, the candidate will not be scheduled to write the examination in June.

No application fees will be either credited against a future application or refunded.

Examination fees may be refunded, provided candidates inform the Board office in writing of their inability to write the examination prior to June 1.

B. Oral Examination

The application fee of $350 must be enclosed with each application to take the oral examination. A candidate notified in mid-July of
his/her admittance to the oral examination in November is re-
quired to pay the $450 examination fee before he/she will be sched-
uled to take the oral examination. If the examination fee has not
been received in the Board office postmarked on or before August
15, the candidate will not be scheduled to take the examination the
following November.

No application fees will be either credited against a future applic-
ation or refunded.

Examination fees may be refunded provided candidates inform
the Board office of their inability to write the examina-
tion prior to September 30.

Listings of Certified Diplomates
Each year the Board office notifies the American College of Obstetri-
cians and Gynecologists of the names and addresses of the
diplomates certified in that year. A list of the names of the most re-
cently certified diplomates is sent to the American Medical Asso-
ciation and to the American Board of Medical Specialties with
the request that they be included in the next issues of (1) the Direc-
tory of Physicians in the United States and (2) in the Directory of
Certified Obstetrician-Gynecologists.

A candidate's name will be included in the lists to be published
only if the candidate has authorized inclusion of his/her name in
the specific listings by signing accordingly on the Authorization for
Admission form at the time of his/her oral examination.

After this effort to ensure initial listings of the newly certified
diplomate, the Board assumes no responsibility for a diplomate's
listing in subsequent issues of any directory.

Revocation of Diploma or Certificate
Each candidate, when making application, signs an agreement re-
garding disqualification or revocation of his/her diploma, certifi-
cate, or other evidence of qualification for cause. Revocation may
occur whenever

1. The physician shall not in fact have been eligible to receive the di-
ploma or certificate, irrespective of whether the facts constitut-
ing such ineligible were known to or could have been
ascertained by this Board, its members, directors, examiners, off-
cers, or agents at or before the time of issuance of such diploma
or certificate.

2. Any rule governing examination for a diploma or certificate shall
have been violated by the physician, but the fact of such violation
shall not have been ascertained until after the issuance of his di-
ploma or certificate.

3. The physician shall have violated the moral or ethical standards of
the practice of medicine then accepted by organized medicine
in the locality in which he/she shall be practicing and, without
limitation of the foregoing, the forfeiture, revocation, or suspen-
sion of his/her license to practice medicine, or the expulsion
from, or suspension from, the rights and privileges of member-
ship in a local, regional, or national organization of his/her profes-
sional peers shall be evidence of a violation of such standards of
the ethical practice of medicine.

4. The physician shall fail to comply with the rules and regulations of
this Board.

5. The issuance of, or receipt by, him/her of such diploma, certifi-
cate, or other evidence of qualification shall have been contrary
to or in violation of the Certificate of Incorporation or the Bylaws
of this Board.

6. The Board adheres to The Ethical Considerations in the Practice
of Obstetrics and Gynecology currently published by the Ameri-
can College of Obstetricians and Gynecologists.

Upon revocation of any diploma or certificate by this Board as
aforesaid, the holder shall return his/her diploma or certificate and
other evidence of qualification to the executive director of the
Board and his/her name shall be removed from the list of certified
specialists.

American Board of
Ophthalmology

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Robert L Stammer, MD, San Francisco, California
H Stanley Thompson, MD, Iowa City, Iowa
Fred M Wilson II, MD, Indianapolis, Indiana

(These criteria and conditions are subject to change without no-
tice. All applicants are advised to contact the American Board of
Ophthalmology to ascertain whether the information below is cur-
rent.)

Preface

Around the turn of the century the question of adequate training and
testing of the qualifications of specialists was raised by a num-
ber of leaders in American ophthalmology. These discussions culmi-
nated in 1914 with the formation of a joint committee of the
American Academy of Ophthalmology and Otolaryngology, the
American Ophthalmological Society, and the Section on Ophthal-
mology of the American Medical Association to consider ophth-
almic education. The report of this committee in 1915 led to the estab-
lishment of the American Board for Ophthalmic Examinations May
8, 1916. Following the annual Academy meeting in Memphis, the
Board examined eleven candidates December 13 and 14, 1916, at
the University of Tennessee Medical School. The Board was incor-
porated May 3, 1917. The name was changed from the American Board
for Ophthalmic Examinations to the American Board of Ophthal-
omology in 1883. This was the first American Specialty Board to be estab-
lished, with the American Board of Otolaryngology following in 1824
and the American Board of Obstetrics and Gynecology in 1930.

The directors of the American Board of Ophthalmology are cho-
en for a 4-year term. One additional 4-year term is permitted. The
individuals include clinicians and academicians with specific oph-
thalmologic skills and a broad geographic distribution. The found-
ing organizations, the American Academy of Ophthalmology, the
American Ophthalmological Society and the American Medical Asso-
ciation continue to serve as members of the corporation in an
advisory capacity. The directors of the American Board of Ophthal-
omology are listed in The Official ABMS Directory of Board Certi-
fied Medical Specialists, published by Marquis Who's Who. This is
the authorized publication of the 24 recognized specialty Boards
that certify physicians in medical and surgical specialties.

Up to January 1, 1994, the Board had conducted 183 examina-
tions and issued its certificate to 19,208 ophthalmologists.
Goal of Certification Process

The intent of the certification process of the American Board of Ophthalmology is to provide assurance to the public and to the medical profession that a certified physician has successfully completed an accredited course of education in ophthalmology and an evaluation including an examination. The evaluation is designed to assess the knowledge, experience and skills requisite to the delivery of high standards of quality patient care in ophthalmology.

It has never been the purpose of the Board to define the requirements for membership to hospital staffs or to gain special recognition or privileges for its diplomates in the practice of ophthalmology. Neither is its purpose to state who may or may not practice ophthalmology or to define the scope of ophthalmic practice. The Board does not seek to obtain special privileges for its diplomates over other qualified physicians. The certificate of the Board does not confer any academic degree, legal qualifications, privilege, or license to practice ophthalmology.

Governing Rules and Regulations

The Board’s rules and regulations, which are subject to change from time to time without notice, contain specific provisions concerning eligibility for the examinations administered by the Board; an admission appeals process, which is available under certain circumstances; the application process; the examination process; a definition of the circumstances under which an applicant will be required to reapply for an existing application, or submit a new application, or request or change of an examination; lists of occurrences that could lead the Board to revoke a certificate previously issued by it; to a Diplomate or to place the diplomat on probation; and other matters relating to the Board’s examination and certification processes. Many, but not all, of these provisions are summarized or described in this publication. In the event of any inconsistency between the Board’s rules and regulations and this publication, or any omission from this publication of any provision of the rules and regulations, the rules and regulations shall govern. Copies of the rules and regulations are available upon request from the Board’s executive office.

Requirements

Many physicians write to the Board outlining their training and asking for an estimate of their qualifications and whether further training is required. The Board’s requirements, as published herewith, provide this information and any potential applicant should be able to determine his/her status after studying these requirements. Individual offices or directors of the Board cannot and will not make such determinations. All evaluations of an applicant’s status will be made by the Committee on Admissions in accordance with the Rules and Regulations of the Board, after submission of an application for examination and payment of the registration fee, which must accompany the application. Personal interviews with officers and directors of the Board should not be requested at any time.

It is the responsibility of the candidate to seek information concerning the current requirements for certification as an ophthalmologist. The Board does not assume responsibility for notifying a candidate of changing requirements or the impending loss of his/her eligibility to take an examination.

Educational

All applicants must have graduated from a medical school or from a school of osteopathy.

All applicants entering ophthalmology training programs must have taken a postgraduate clinical year (PG-1) in a program in the United States accredited by the Accreditation Council for Graduate Medical Education (ACGME) or in Canada accredited by the Royal College of Physicians and Surgeons of Canada (RCPSC). The PG-1 year must comprise training in which the resident has primary responsibility for patient care in fields such as internal medicine, neurology, pediatrics, surgery, family practice, or emergency medicine. As a minimum, six months of this year must consist of a broad experience in direct patient care.

In addition to a PG-1 year, all applicants must have satisfactorily completed an entire formal graduated residency training program in ophthalmology of at least 36 months’ duration (PG-4 or better) in either the United States accredited by the ACGME, or in Canada approved by the Royal College of Physicians and Surgeons of Canada. No other training, including any form of fellowship, is acceptable.

The applicant’s chair is required to verify satisfactory completion of an entire formal graduated ophthalmology residency training program of at least 36 months’ duration. When a resident’s graduate education and clinical experience have been gained in more than one residency program, each chairman will be required to complete a satisfactory completion form. Less than 6 months’ service in an accredited program is not acceptable as a part of the required training in ophthalmology. The chairman’s verification form(s) cannot be submitted to the Board until the applicant has completed the entire residency training program.

If a program is disapproved or withdrawn during the course of a resident’s training, he/she must complete the remaining required number of months of training in another accredited program.

Only those applicants who have completed their entire ophthalmology training program, PGY-4 or beyond, by August 1 are eligible to apply for the Written Qualifying Examination given in April of the following year.

Licensure

Graduates of United States and Canadian Medical Schools

A person shall be eligible to apply for and to take any examination administered by the Board only if, as of the date of application and at all times thereafter through and including the date of administration of each examination of the Board taken by the person, the person has a valid and unrestricted license to practice medicine in the place or places in which the person’s practice of medicine is regularly conducted in the United States, or any of its territories, or Canada and in each other place in which the person practices or has practiced medicine and has an unexpired license. Information concerning the Board’s rules and regulations with respect to definition of an invalid or restricted license is available upon request from the Board’s executive office.

Other Medical Graduates

An applicant may have graduated from a medical school of a country other than the United States or Canada. Graduates of foreign medical schools must have a valid and unrestricted license to practice medicine (as defined above and in the Rules and Regulations of the Board), they are also required to have a certificate from the Educational Commission for Foreign Medical Graduates (ECFMG).

Applicant Disclosure Obligations

At the time a person submits an application to the Board and at all times thereafter, the person shall have a continuing obligation to disclose promptly to the Board the existence or occurrence of any circumstances causing the person to fail to satisfy the foregoing condition of eligibility to apply for and take any examination administered by the Board. A person submitting an application to the Board shall inform the Board on or in a written submission accompanying the person’s application in a written submission to the Board before taking any examination administered by the Board, as the case may be, if the person’s license to practice medicine in the United States, any of its territories, or Canada has previously been surrendered or not renewed upon its expiration or if the person’s practice of medicine or license to practice medicine in the United
Applications

An applicant who wishes to be examined by the Board shall complete, sign and file with the executive director an application on the official form then in use by the Board. The application shall be considered complete only when all supporting data required by the application, including the chairman's verification form, are also filed with the executive director. Applications can be obtained from the chairman of accredited residency programs or from the Office of the Board. If an applicant wishes to be considered for a Written Qualifying Examination to be conducted in a particular year, his or her application and all supporting data, including supporting data furnished directly by others with respect to the applicant, must be postmarked between March 1 and August 1 except for the chairman's verification form, which must be postmarked on or before October 1 of the calendar year immediately preceding the calendar year in which the Written Qualifying Examination is to be conducted. By paying a late fee the deadline for postmarking the completed application may be extended from August 1 to September 1. No other exceptions to, or extensions of, these requirements will be made for any reason. The dates of future examinations will be announced in Ophthalmology and the Journal of the American Medical Association.

An applicant who does not receive notification from the Board office by January 15 of the acceptance or rejection of his or her application must contact the Board office in writing to inquire about the status of the application. Failure to contact the Board office in writing by February 15 will result in such applicant's removal from the examination roster.

If a completed application and all required supporting data are not timely postmarked the application will not be valid, and the application fee shall be returned. It is best not to mail application materials just before the postmark deadline because packets are sometimes postmarked a day or two after mailing. If there is a discrepancy between a metered postmark and an official US Postal Service postmark, the latter will be considered official.

The application shall be accompanied by a check payable to the Board for the application fee. No application will be considered to be complete until the fee and all required supporting data, including a copy of your current registration to practice medicine and two recent photographs for identification at the Written Qualifying Examination and the Oral Examination, have been received by the executive director.

The application form contains a pledge that explains the prohibitions regarding improper conduct before, during and after examinations. Candidates must certify that the information they provide in their applications is true and accurate. If (1) any misrepresentation is discovered in the application, in any other information submitted to the Board or in the identity of a person applying to take or taking the examinations; (2) any financial or other benefit is offered by a candidate to any director, officer, employee, proctor, or other agent or representative of the Board in order to obtain a right, privilege or benefit not usually granted by the Board to similarly situated candidates; or (3) any irregular behavior during the examination, such as copying answers, sharing information, using notes, or otherwise giving or receiving aid, is discovered by observation, statistical analysis of answer sheets, or otherwise, the candidate in question shall be given written notice of the charges and an opportunity to respond in accordance with the procedures set forth in the Rules and Regulations of the Board. If the Board determines that a violation has occurred, the Board may permanently bar the person(s) involved in the violation from all future examinations, invalidate the results of prior examinations taken by the person(s), withhold or revoke the certificate of the person(s), or take other appropriate action. If sanctions are imposed pursuant to the Rules and Regulations of the Board, the Board may notify legitimately interested third parties of its action.

When the Board determines that irregular behavior has occurred during an examination, the Board will make every effort to withhold the scores of only those candidates directly implicated in the irregularity. Nevertheless, in some instances the evidence of irregularity, though sufficiently strong to cast doubt on the validity of scores, may not enable the Board to identify the specific candidates involved in the irregularity. In such circumstances, the Board may withhold the scores of candidates not directly implicated in the irregularity and, if necessary, may require those candidates to take an additional examination at a later date to ensure the validity of all scores.

The examination booklets used in the Written Qualifying Examination and the illustrative materials and questions asked in the Oral Examination are copyrighted as the sole property of the Board and must not be removed by the candidate from the test area or reproduced in any way. Any reproduction, in whole or in part, of the Written Examination test booklet or Oral Examination materials and questions is a federal offense and also may subject the applicant to the sanctions listed above. No notes, textbooks, other reference materials, scratch paper or recording devices may be taken into either the Written or the Oral Examinations.

Disabilities

The American Board of Ophthalmology is committed to complying fully with its responsibilities under Section 309 of the Americans with Disabilities Act to any qualified candidate for Board certification who establishes to the reasonable satisfaction of the Board the existence, the specific nature, and the extent of the candidate's disability within the meaning of the Act.

The Board intends to offer its certification examinations in places and in a manner that are accessible to such disabled candidates. The Board intends to select and administer its examinations so as to ensure that when one of its examinations is administered to a candidate with a disability that impairs sensory, manual, or speaking skills, the examination results accurately reflect the candidate's aptitude or achievement level and other factors that the examination is designed and intended to measure, rather than reflecting the candidate's impaired sensory, manual, or speaking skills, except where those skills are among the factors that the examination is designed and intended to measure.

A candidate for Board certification who believes that he or she is disabled within the meaning of Section 309 of the Americans with Disabilities Act and who requests a modification in the form of the certification examination administered by the Board in the manner of its administration to the candidate shall specify on, or in a supplement submitted with, the candidate's timely filed application form to the Board the existence, the specific nature, and the extent of his or her disability and the specific modification requested. The candidate also shall submit with the application, in addition to all materials and information required to be submitted with the application, independent documentary evidence that establishes to the reasonable satisfaction of the Board the existence, the specific nature, and the extent of the candidate's disability and why the modification requested by the candidate is required by the candidate's disability.
Fees
Review of application and registration for Written Qualifying Examination, $815, payable with application.
Review of late application and registration (after August 1 to September 1 postmark), $1,005.
Repeat registration fee, $690.
Late repeat registration fee, (after August 1st to September 1 postmark), $720.

Oral Examination
Due to time constraints, there is no late filing period for oral candidates.
Registration fee, $655, payable on successful completion of the Written Qualifying Examination.
Repeat entire oral examination, $655.
Repeat one subject, $295.
Repeat two subjects, $450.

Cancellations
To cover administrative expenses an additional charge equal to 50% of the original application and registration fee (or repeat registration fee) for that particular Written Qualifying Examination or Oral Examination will be imposed on any applicant who cancels or fails to keep an examination assignment, regardless of the reason. This fee is due at the time of cancellation.
Fees for accepted candidates for the Written Qualifying Examination and the Oral Examination are not refundable.
The fees for examinations shall be established annually by the Board of Directors on the basis of the actual and anticipated costs of the Board in the examination of applicants and the administration of its business. The Directors of the Board serve without compensation except for reimbursement of expenses.

Time Limit
New Applicants
An applicant must successfully complete the Written Qualifying Examination and the entire Oral Examination by December 31 of the sixth year following completion of accredited training in ophthalmology. An applicant who has not become certified within such period and who does not currently have an approved active or inactive application on file with the Board shall have until January 23, 1999, to submit a completed application and to complete certification. Candidates failing to achieve certification within the required time must submit evidence of satisfactory completion of one or more additional years of clinical experience in ophthalmology supervised and sponsored by an ACGME-accredited residency training program before he/she can resubmit an application to the American Board of Ophthalmology.

Active/Inactive Applicants
All individuals who currently have an approved active application and all who have an approved inactive application on file with the American Board of Ophthalmology will be given 6 years from January 23, 1983, to complete certification. If not certified, the candidate must submit evidence of satisfactory completion of one or more additional years of clinical experience in ophthalmology supervised and sponsored by an ACGME-accredited residency training program and reapply under the rules in effect at the time the reapplication is filed.

Written Qualifying Examination
In order to qualify for an Oral Examination, each applicant must pass a Written Qualifying Examination. The Written Qualifying Examination consists of 250 multiple-choice questions. The purpose of the Written Qualifying Examination is to evaluate the breadth and depth of the basic science and clinical knowledge of candidates who have satisfactorily completed an accredited program of education in ophthalmology. Candidates who successfully complete the Written Qualifying Examination will be further evaluated in an Oral Examination.
The following describes aspects of the candidate's ability that are tested
1. Recall of information
2. Understanding and application of basic knowledge
3. Relation of pathogenesis to disease process
4. Evaluation of clinical data
5. Utilization of diagnostic and therapeutic procedures
6. Anticipation and recognition of complications
7. Ethics of ophthalmic practice

Topics covered include:
1. Optics, refraction and contact lenses
2. Retina, vitreous, and uvea
3. Neuro-ophthalmology
4. Pediatric ophthalmology
5. External disease and cornea
6. Glaucoma, cataract and anterior segment
7. Plastic surgery and orbital diseases
8. Ophthalmic pathology

The examination has also been described in the Board's booklet entitled "Written Qualifying Examination."
The Written Qualifying Examination is given simultaneously in designated cities in the United States in April of each year.

Oral Examination
Upon successful completion of the Written Qualifying Examination applicants will be sent specific instructions for registration for the Oral Examination. A check payable to the Board for the amount then in effect for the Oral Examination must accompany the completed registration form and be forwarded to the Board Office within the appropriate time frame.

Oral Examination Schedule
It has been the custom of the Board to hold two oral examinations a year with candidates who have passed the April Written Qualifying Examination assigned either to a group taking the Oral Examinations in the fall of that year or to a group taking the Oral Examinations in the spring of the following year. Candidates who pass the April 1994 Written will be assigned to either the fall of 1994 oral or the spring of 1995 oral. The Board reserves the right to limit the number of candidates admitted to any scheduled examination and to designate the candidates to be examined.

Oral Examination Subjects
The Oral Examination will be divided into the subjects listed and described in the following paragraphs. All subjects are given by appointment within a half day period utilizing a panel system. Information about the examination procedures and scheduling is sent to all candidates after they have been registered for the Oral Examinations.
1. Optics, refraction and visual physiology
2. Pediatric ophthalmology and strabismus
3. Neuro-ophthalmology and orbit
4. External eye and adnexa
5. Anterior segment of the eye
6. Posterior segment of the eye

In each of the oral examinations emphasis will be placed upon the following
Data Acquisition
Recognition by the candidate of depicted abnormalities and diseases that affect the eye, ocular adnexa, and the visual pathways.

Diagnosis
The ability of the candidate to synthesize clinical, laboratory, and histopathologic data in order to arrive at a correct diagnosis and differential diagnosis.

Treatment
Candidates will be expected to provide a reasonable and appropriate plan for medical and/or surgical management of patients with the conditions depicted or described.

These examinations will include developmental, dystrophic, degenerative, inflammatory, infectious, toxic, traumatic, neoplastic, and vascular diseases affecting the eye and its surrounding structures.

1. Optics, Refraction and Visual Physiology
Candidates should be familiar with the basic principles of physical and geometrical optics and the operation of standard optical instruments. They should understand the essentials of visual physiology including visual acuity, light and dark adaptation, accommodation, and color vision. They should know the various forms of ametropia, principles and techniques of refraction, principles of lens design, and methods of correction of ametropia including spectacles, contact lenses, intraocular lenses, and keratorefractive surgery. Candidates should be familiar with the methods for prescribing protective lenses, absorptive lenses, and aids for low vision.

2. Pediatric Ophthalmology and Strabismus
Candidates should be familiar with diseases affecting the eye of infants and children and associated systemic abnormalities. Candidates should understand the anatomy, pathology, and physiology of the neuromuscular mechanisms subserving ocular motility and binocular vision. Candidates should be familiar with the methods of examination for detection and assessment of sensory and ocular motor disorders. They should also know the clinical features, differential diagnosis, natural course, and management of the various types of comitant and noncomitant deviations. They should be familiar with the principles and complications of surgery on the extraocular muscles.

3. Neuro-ophthalmology and Orbit
Candidates should know the anatomy of the orbit and the neuroanatomy of the afferent and efferent visual systems. They should understand the principles and techniques of various diagnostic procedures, including visual field testing, visually evoked responses, ultrasonography, conventional X-ray imaging, CT scanning, and magnetic resonance imaging. Candidates should be familiar with the clinical features, pathology, differential diagnosis, and management of disorders of the orbit, visual pathways, oculomotor system, and pupillomotor pathways, including the indications for, principles of, and complications of orbital surgery.

4. External Eye and Adnexa
Candidates should know the anatomy, embryology, and physiology of the structures comprising the lacrimal system, lids, cornea, conjunctiva, and anterior sclera. They should demonstrate knowledge of the pathologic substrate, differential diagnosis, and medical therapy as well as indications for, principles of, and complications of surgical procedures utilized to alleviate abnormalities and diseases affecting these tissues.

5. Anterior Segment of the Eye
This examination concerns the anatomy, embryology, physiology, and pathology of abnormalities and diseases of the cornea, anterior chamber angle, iris, ciliary body, and lens. Candidates will be expected to discuss conditions affecting these structures and those to be considered in their differential diagnosis. They should also be able to describe and provide indications for medical and surgical therapy directed toward alleviating or curing these conditions.

6. Posterior Segment of the Eye
This examination concerns the anatomy, embryology, physiology, and pathology of abnormalities and diseases of the vitreous, retina, choroid, and posterior sclera. Candidates will be expected to discuss conditions affecting these structures and those to be considered in their differential diagnosis. They should also be able to describe and provide indications for medical and surgical therapy directed toward alleviating or curing these conditions.

Reactivation
Written Qualifying Examination
An applicant shall be required to reactivate his/her application for approval, and submit an additional application fee under the following circumstances, which relate to the Written Qualifying Examination:
1. if a candidate fails to take the Written Qualifying Examination within 24 months after notice has been sent to him/her that his/her application has been accepted;
2. if a candidate does not repeat the Written Qualifying Examination within 24 months after failing;
3. if a candidate receives two consecutive failures on a Written Qualifying Examination on the same application.

Oral Examination
An applicant who fails one or two subjects in an Oral Examination will be required to repeat these subjects. An applicant who fails three or more subjects will be required to repeat all subjects of the Oral Examination. An applicant who fails three or more subjects on the first repeat examination will be required to pass another Written Qualifying Examination before being permitted to repeat the Oral Examination. Additional information on grading is specified in the "Rules for Grading," which are sent to all applicants at the time of their Oral Examination registration.

An applicant shall be required to reactivate his/her application for approval, submit an additional application fee, and pass another Written Qualifying Examination before being admitted to the Oral Examination under the following circumstances:
1. if a candidate does not take the Oral Examination within 24 months after notice has been sent to the applicant that he/she has passed the Written Qualifying Examination;
2. if a candidate who is eligible to do so fails to repeat the Oral Examination within 24 months after failing all or part of such examination;
3. if the candidate does not pass all subjects covered therein in three or fewer partial or complete examinations.

Reactivation Procedure
In order to reactivate an application the following criteria must be met by the postmarked August 1 registration deadline:
1. file a new application;
2. submit current fee;
3. copy of a current valid and unrestricted license to practice medicine in the United States, its territories, or in a Province of Canada (see "Licensure").
4. A letter of endorsement from two certified ophthalmologists in the community.

Those reactivating their applications who have not been certified by December 31 of the sixth year following completion of accredited training in ophthalmology and those who hold an active or inactive application and have not completed certification within 6 years of the January 23, 1983, date must, in addition to the above criteria, submit evidence of satisfactory completion of one or more additional years of clinical experience in ophthalmology supervised and sponsored by an ACGME-accredited residency training program and reapply under the rules in effect at the time the reaplication is filed.

Inactive Applications

When an application has not been reactivated it is considered by the Board to have lapsed. Inquiries to the Board by outside agencies about the certification status of a physician with an inactive application will be answered by stating that said physician is not certified, and is not scheduled for an examination.

Results of Examinations

Within a reasonable time after completion of the Written and/or Oral Examinations, the applicant shall be notified by the executive director as to the results thereof. The decision of the Board as to these results shall be final and conclusive. Grades are not subject to appeal. Because such is the case, individual directors of the Board or Associate Examiners should not be contacted about specific examination results. To preserve confidentiality, results of an examination will not be given over the telephone or by fax.

Certification

An applicant who successfully passes both the Written Qualifying and Oral Examinations within the required time limitations hereinafter set forth, as determined by the Board in its sole discretion, shall be entitled to receive a certificate without further consideration of his/her qualifications by the Board. Physicians who have received the certificate are diplomates of the Board.

Duration of Certification

Certificates issued by the Board after July 1, 1992, will be valid for a period of 10 years. Thereafter, a diplomate will be required to satisfactorily complete a designated renewal program every 10 years in order to extend the validity of his/her certificate. Certificates issued prior to July 1, 1992, are valid during the diplomate's lifetime.

Certificate Renewal by the American Board of Ophthalmology

Part I: Background

When certification by specialty Boards was first introduced, the purpose was to identify members of the profession who had sufficient education and knowledge that they should be equipped to practice the specialty with acceptable competence.

In modern times, the move toward periodic recredentialing is analogous. It is meant to identify members of the profession who have continued their education, keeping current in information and skills, so that they are still equipped to practice competently.

Guiding Principles

1. Primary purpose. The primary purpose of the certificate renewal process is to promote optimum delivery of competent care by certified members of the ophthalmic profession. The process is intended to set a goal that will guide all members of the profession as they strive to keep up to date in knowledge and skills, and to practice competently. A less important function is to identify any who are severely wanting in professional capabilities or behavior and provide incentive and opportunity to improve. The Board is not to be viewed as responsible for discovering, correcting, and disciplining all who are unacceptable practitioners. Licensing Boards, professional societies, quality assurance committees of medical care facilities, and the legal system share in this responsibility.

The process is primarily to act as an incentive to all in the profession to do the best they can. It is thus not a competition in which an arbitrary percentage at the bottom of the scale are unrenewed. The goal is that all who are willing and able will achieve renewal. It is assumed that all who once established a rightful place in the profession by virtue of certification should be able to achieve the certificate renewal standard comfortably by simply maintaining the qualities needed to continue in the profession. The exceptions are those who have become infirm and are therefore unable to maintain certain required qualities, and those who are simply unwilling to participate in the process of continued growth in the professional capabilities that they once demonstrated. Opportunity for remediation rather than exclusion from renewal certification is the mechanism for elevating the few who have slipped below the standard of their peers. Nonrenewal is the action designed to remove the rare individual who is uncorrectably wanting.

2. Flexibility by practice. The process is intended to take into account that individual practitioners may have developed differently in the types of patients they serve, diagnostic problems that present to them, and the therapeutic methods required by the population they serve. The process therefore will contain flexible requirements that can be modified to suit the nature of individual practices.

3. Flexibility by individual preference. Alternate pathways or components will also be provided to permit selection according to individual preference. For example, individual practitioners may have different means for maintaining their knowledge, or may have preference with regard to how they might like to have their continued abilities evaluated.

4. Sequential process. It is desirable that the process of maintaining intellectual and professional qualities be a continual process. It may therefore be appropriate, as well as most acceptable, that certificate renewal be achieved by an ongoing process. The educational and the assessment requirements of the plan would be capable of being satisfied over a period of time with completed items accumulated until the requirement is satisfied, with opportunity to repeat and strive for improvement in any element that is not accomplished satisfactorily at first.

5. Time for remediation. Standards need to be sufficiently high that they are meaningful, and thus sometimes might not be met on first attempt. For elements that are judged unsatisfactory, timely opportunities need to be provided for satisfactory performance. This approach is intended to make the process both palatable (no element of last minute, one time "pass" or "fail") and effective in its purpose (bring all up to a certain high standard, through additional work as necessary). The result should be a higher level for the profession as a whole than might have occurred without time-limited certificates and the renewal process. This is in fact the primary purpose.

6. Assess certain ingredients of competence, not competence itself. Competence is difficult to define, much less evaluate, and judgments may differ concerning an acceptable manner of delivering care. It is not intended to establish an arbitrary standard of what might or might not be judged adequate competence as an ophthalmic specialist, or to decide between various outlooks on different manners of ethically conducting a practice. It is intended...
only to set standards with reference to certain ingredients that are necessary for competence.

Thus the process will expect continued update of relevant knowledge and require participation in educational experience. It will expect that the educational experience has been assimilated and document the assimilation by testing. It will expect the updated knowledge to be applied in practice. As is feasible, it may also assess whether the practice reflects a caring attitude toward patients and ethical behavior appropriate to a profession, or at least ascertain a commitment to these goals.

In the end it is not possible to ensure that every certified individual is fully competent. The process of renewal therefore simply seeks to encourage competence and to document that the certified practitioner has exhibited some of the verifiable essential ingredients of competence. Certificate renewal does not necessarily mean that a diplomate has all the ingredients or that he or she is indeed fully competent.

We hope that the process developed from these guiding principles will not be feared by the diplomates who face a time of renewal, but will be embraced by all members of the profession as a means to dedicate themselves to the goal of maintaining the highest standards of patient care for a lifetime.

Part II: Requirements

Certificates issued by the American Board of Ophthalmology in 1992 and thereafter will be time-limited, expiring in ten years, and are subject to renewal. Although the first certificate renewal will not be required until the year 2002, the ABO has planned the renewal process.

Eligibility

1. The individual must hold a time-limited certificate issued by the American Board of Ophthalmology in 1992 or thereafter. Certificate renewal can be achieved before or after the expiration date of the time-limited certificate. Renewal will be for ten years from the date of completing the requirements or ten years from the expiration of the previous certificate, whichever is later. (An identical or similar process to reaffirm the certification of those with lifetime certificates issued before 1992 will be made available only if the holder is required by law to be recertified and the law provides that its recertification requirement is satisfied by such reaffirmation of certification by a specialty Board.)

2. The applicant must pay an annual assessment to the ABO each year after the time-limited certificate is issued, with a delinquency fee for each annual assessment not paid on time. These annual assessments are applied toward the renewal fee due at the time of certificate renewal.

3. The applicant must hold a valid, unrestricted license to practice medicine in the United States or Canada in every jurisdiction in which the applicant practices medicine, in keeping with the American Board of Ophthalmology requirements for certification. This valid, unrestricted licensure requirement applies to the time at which knowledge assessment and review of practice requirements are conducted and also to the date on which certificate renewal is issued. Loss of valid, unrestricted license after certification or certificate renewal may result in loss of certification.

4. During the renewal process, the applicant must sign a statement affirming commitment to practice in an ethical manner.

Educational Requirements

Although exposure to an educational experience does not ensure assimilation or utilization of knowledge, a high standard of ophthalmic care cannot be rendered without an ongoing educational experience that is relevant to the individual’s practice. Therefore it is required that the candidate have an average of 90 hours per year of Accreditation Council for Continuing Medical Education (ACGME)-approved Continuing Medical Education (CME) credits since the date of time-limited certification. At least 60% of the hours must be met from among category I CME activity, and the remaining 40% may be met by programs composed of category II or category I credits. (These requirements are subject to change based on revisions of ACGME classifications.) A listing of the educational experience will be required. The educational experience should be of a type and content appropriate for the practice of the applicant. It should include educational programs in general ophthalmology, in any subspecialty interest of the applicant, in general medicine, and in ethics and humanism. At least 50% of the 500 hours of required CME must be obtained in the last 5 years of the 10-year certificate renewal process.

Knowledge Assessment

As an encouragement to utilize continuing education resources of quality, as an encouragement for self-study, and as a verification of the effectiveness of these educational endeavors, an evaluation of knowledge is required. This requirement can be satisfied by any one of four methods:

1. Certificate Renewal Written Examination: The examination is directed toward clinically relevant new information disseminated in clinical journals and educational media during the preceding decade. The examination will consist of several parts: a general examination required of all candidates choosing this pathway and a spectrum of modules dealing with different categories of disease from which the candidate will select a specified number most relevant to his or her practice. The general and modular tests will each be offered annually. They will be multiple choice questions in an "open book" test mailed to the candidate, to be returned within a specified time. The candidate can take some or all of the required subtests in any year during the 5 years prior to the date of certificate renewal. The general and modular tests may be taken annually as often as may be needed, until the required general examination and the required number of modular tests are passed.

2. Certificate Renewal Oral Examination: This will consist of Patient Management Problems (PMP), some dealing with common general ophthalmic topics and others selected to coincide with the nature of the candidate’s practice. Emphasis will be on management of patients, including utilization of advances in medical knowledge within the preceding decade.

3. Combined Chart Stimulated Recall (CSR) and PMP Examination: From patient charts submitted by the candidate, cases will be selected to be the basis of an oral examination reviewing the diagnosis and management of these patients, including the reasoning behind the diagnosis and differential diagnosis as well as alternative treatments. The examination will be supplemented by simulated Patient Management Problems relating to general ophthalmic topics and chosen according to the nature of the individual’s practice. The combined CSR/PMP examination thus resembles the pure PMP examination except that actual cases of the candidate substitute for some of the hypothetical cases that constitute the pure PMP examination.

4. The Oral Examination currently being used for candidates undergoing initial certification.

To satisfy this requirement, the applicant must satisfactorily pass any one of these four examination methods during the 5 years preceding the date of certificate renewal. If a candidate fails in any one of the four pathways, the examination may be repeated as often as required, or a different option may be selected.
Review of Practice
Practice review can be satisfied by one of two methods:
1. The Chart Stimulated Recall (CSR) Examination of knowledge will simultaneously satisfy the requirement for review of practice.
2. Those not taking the CSR oral examination will be asked to complete scan sheets from representative office records with regard to such questions as whether the exact visual disability (symptom) of a cataract patient is recorded, whether ophthalmoscopy was performed postoperatively, et cetera. This information will be used not only to judge the individual applicant but importantly also to document the frequency of certain practice habits within the profession generally. This survey will form the basis for discussion and education within the profession.

The ABO may make office site visits to a limited number of candidates to verify the validity of the CSR examination and scan sheets method.

Identification of Practice-Type
No sooner than 5 years before the date of certificate renewal, just preceding the time when the applicant undertakes to complete the knowledge assessment and review of practice requirements, the candidate will complete an application form that includes identification of categories of patients that are seen in the applicant’s practice commonly, are seen only occasionally, or are seen rarely (if ever). This information will help the applicant select modules to attempt in the Written Certificate Renewal Examination or help the ABO select PMP modules for an oral examination relevant to the practice of the individual. Additionally, the applicant will submit representative patient records (with patient identification masked for confidentiality) from which will be selected cases for the CSR examination or review by scan sheets. Certain categories of clinical problems are thus excluded from assessment by virtue of being seen infrequently by the individual candidate. However, the renewal certificate will not indicate a limitation of the scope of certification by virtue of the fact that certain disease categories were excluded. Neither will the certificate indicate subspecialty by virtue of a limited type of practice. The renewal certificate for all successful applicants will be identical, and the characterization of practice in the application is only for the purpose of guiding the mechanism for certificate renewal.

Synopsis of Certificate Renewal
Along with eligibility requirements, completion of requirements in each of four areas
1. Licensure: A candidate must possess and maintain a valid and unrestricted license to participate in the renewal process. During periods of discontinuity of unrestricted licensure, no participation in knowledge assessment or practice review is permitted or credited.
2. Continuing Medical Education (CME): An average of 50 ACCME approved credit hours per year relevant to the diplomate’s practice is required: Minimum of 60% in Category I. Minimum of 50% of the 500 hours achieved in the 5 years prior to the renewal date.
3. Knowledge Assessment: Any one of the following four methods satisfies this requirement: certificate renewal written examination (“take home”); certificate renewal patient management problem (PMP) oral examination; certificate renewal chart stimulated recall (CSR) oral examination combined with an abbreviated PMP examination; certification oral examination.
4. Practice Assessment: One of the following required: Office record scan review; chart stimulated review oral examination.
   Licensure + CME + one of these 4 alternatives:
   Certificate renewal written exam + office record scan/or
   Certificate renewal PMP oral exam + office record scan/or

Certificate renewal CSR oral exam (includes PMP)/(or)
Certifying oral exam + office record scan
All diplomates holding a time-limited certificate will be required to pay an annual nonrefundable assessment of $100 to the American Board of Ophthalmology. These annual assessments are applied toward the renewal fee due at the time of certificate renewal and will be used to offset the cost of developing and administering time-limited certification. A 10% per annum penalty will be assessed on unpaid fees.

Disciplinary Sanctions
The Board shall have the authority to impose disciplinary sanctions upon a candidate or a diplomate for any of the following reasons:
1. Violation of Rules and Regulations of the Board relating to the Written Qualifying and Oral Examinations and applications to take the examinations.
2. Issuance of a certificate contrary to or in violation of the Rules and Regulations of the Board.
3. Ineligibility of the person to whom the certificate was issued to receive the certificate.
4. Substantial misstatement or omission of a material fact to the Board in an application or in any other information submitted to the Board.
5. Presenting or distributing, or aiding or assisting another person(s) to present or distribute, a forged document or other written instrument purporting to have been issued by or under the authority of the Board to evidence that a candidate, diplomate, or any other person(s) is currently or was previously certified by the Board, when that is not the case, or claiming orally or in writing, or assisting another person(s) to claim, that a candidate, diplomate, or any other person(s) is currently or was previously certified by the Board, when that is not the case.
6. Revocation of the license to practice of a person to whom a certificate was issued.

Statements of Eligibility
The Board does not issue statements of “eligibility” for its examinations. The only information the Board will divulge is whether a physician or is not certified or is or is not scheduled for an examination.

American Board of Medical Specialties
The American Board of Medical Specialties (ABMS) was established in 1933 to serve in an advisory capacity to the American Specialty Boards and to cooperate with organizations that seek its advice concerning the certification of medical specialists. The American Board of Ophthalmology is officially recognized by the ABMS, and contributes an annual fee of $2,000 in addition to a per-capita fee for each diplomate certified, to the American Board of Medical Specialties as do all other medical specialty boards, in support of the activities of ABMS.

The American Board of Ophthalmology provides an annual listing of new diplomates for inclusion in the Official ABMS Directory of Board Certified Medical Specialists and in the Official ABMS Directory of Board Certified Ophthalmologists. Both are published by Marquis Who's Who. Each diplomate will be contacted directly for biographical information and to update information every year.

Associate Examiners
All associate examiners are informed by the Board that they shall not promote, or permit others to promote, his or her participation in commercial or educational activities under circumstances that exploit, or might be perceived to exploit, his or her familiarity with
examinations administered by the American Board of Ophthalmology or otherwise compromise the integrity of those examinations.

American Board of Orthopaedic Surgery

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(These criteria and conditions are subject to change without notice. All applicants are advised to contact the American Board of Orthopaedic Surgery to ascertain whether the information below is current.)

I. Introduction

A. Definition
Orthopaedic surgery is the medical specialty that includes the preservation, investigation, and restoration of the form and function of the extremities, spine, and associated structures by medical, surgical, and physical methods.

B. Purpose
The American Board of Orthopaedic Surgery, Inc., was founded in 1934 as an avowed, voluntary, nonprofit, autonomous organization. It exists to serve the best interest of the public and of the medical profession by establishing educational standards for orthopaedic residents and by evaluating the initial and continuing qualifications and competence of orthopaedic surgeons. For this purpose, the Board reviews the credentials and practices of voluntary candidates and issues certificates as appropriate. It defines minimum educational requirements in the specialty, stimulates graduate medical education and continuing medical education, and aids in the evaluation of educational facilities and programs.

The Board does not confer any rights on its diplomates, nor does it purport to direct licensed physicians in any way in the conduct of their professional duties or lives. It neither intends nor the purpose of the Board to define requirements for membership in any organization or for staff privileges at any hospital.

C. Directors
The directors of the American Board of Orthopaedic Surgery are elected from diplomates of the Board who are nominated by the American Orthopaedic Association, the American Medical Association, and the American Academy of Orthopaedic Surgeons. They serve without salary.

D. Organization
Directors of the Board elect a president, president-elect, secretary, and treasurer annually. An executive director, who is a diplomate, serves as an ex-officio director of the Board. The president appoints directors to serve on standing committees on credentials, examinations, finance, graduate education, and research. Other committees may be formed as deemed necessary. The Board holds regularly scheduled meetings yearly.

E. Directory
A current directory of certified orthopaedic surgeons is maintained and published by the Board. The names of diplomates also appear in the Official ABMS Directory of Board Certified Medical Specialists.

II. General Statement of Educational Goal for Orthopaedic Surgery
The goal of orthopaedic education is to prepare orthopaedic residents to be competent and ethical practitioners of orthopaedic surgery. In fulfillment of this goal, applicants for certification must have received through orthopaedic residency

A. Education in the entire field of orthopaedic surgery, including inpatient and outpatient diagnosis and care as well as operative and nonoperative management and rehabilitation.

B. The opportunity to develop, through experience, the necessary cognitive, technical, interpersonal, teaching, and research skills.

C. The opportunity to create new knowledge and to become skilled in the critical evaluation of information.

D. Education in the recognition and management of basic medical and surgical problems.

E. An evaluation of ethical performance.

III. Minimum Educational Requirements for Board Certification
The Board has established the following minimum educational requirements for certification. These requirements should not be interpreted as restricting programs to minimum standards. Throughout these rules, the term "accredited" denotes accredited by the Accreditation Council for Graduate Medical Education (ACGME).

A. Exception to Requirements
These educational requirements shall apply to all residents who began their first year of accredited orthopaedic surgery residency on or after January 1, 1985, with the following exception:

1. Residents in programs providing only 3 years of orthopaedic education may receive credit for 2 years of accredited nonorthopaedic clinical education if they entered the orthopaedic program before January 1, 1989.

2. This exception is available only to residents enrolled in a 3-year orthopaedic program that has specifically requested the Board to make their residents eligible for this exception and has presented the Board with a plan for implementing a 4-year program. The deadline for receiving such a plan was December 31, 1985.

3. Residents entering orthopaedic residency programs structured for 4 or 5 years may receive credit for 1 but not 2 years of accredited nonorthopaedic clinical education.

B. Time Requirements
1. Five years (60 months) of accredited postdoctoral residency are required.
Certification Requirements

2. Four of these years (48 months) must be served in a program whose curriculum is determined by the director of an accredited orthopaedic surgery residency.
   a. Three of these years (36 months) must be served in an accredited orthopaedic surgery residency program.
   b. One year (12 months) may be served in an accredited graduate medical educational program whose educational content is determined by the director of an accredited orthopaedic surgery residency program.
3. Each program may develop individual sick and vacation times for the resident in accordance with overall institutional policy. However, one year of credit must include at least 46 weeks in full-time orthopaedic education. Vacation or leave time may not be accumulated to reduce the 5-year requirement.
4. Program directors may retain a resident for as long as needed beyond the minimum required time to ensure the necessary degree of competence in orthopaedic surgery. According to the current Special Requirements of the Residency Review Committee for Orthopaedic Surgery, the committee must be notified of such retention. This information must also be provided to the Board on the Record of Residency Assignment form.

C. Content Requirements

1. General Requirements
   A minimum of 9 months during the first year of graduate medical education must be broadly based in clinical services other than orthopaedics. This requirement may be fulfilled by a year of accredited residency in any broadly based program involving patient care.

2. Orthopaedic Requirements
   a. Minimum distribution. Orthopaedic education must be broadly representative of the entire field of orthopaedic surgery. The minimum distribution of educational experience must include:
      1. Twelve months of adult orthopaedics
      2. Twelve months of fractures/trauma
      3. Six months of children's orthopaedics
      4. Six months of basic science and/or clinical specialties
   b. Scope. Orthopaedic education must provide experience with all of the following:
      1. Children's orthopaedics. The educational experience in children's orthopaedics must be obtained in an accredited position in the specific residency program in which the resident is enrolled or in a children's hospital in an assigned accredited residency position.
      2. Anatomic areas. All aspects of diagnosis and care of disorders affecting the bones, joints, and soft tissues of the upper and lower extremities, including the hand and foot; the entire spine, specifically including intervertebral discs; and the bony pelvis.
      3. Acute and chronic care. Diagnosis and care, both operative and nonoperative, of acute trauma (including athletic injuries), infectious disease, neurovascular impairment, and chronic orthopaedic problems including reconstructive surgery, neuromuscular disease, metabolic bone disease, benign and malignant tumors, and rehabilitation.
      4. Related clinical subjects. Musculoskeletal imaging procedures, use and interpretation of clinical laboratory tests, prosthetics, orthotics, physical modalities and exercises, and neurological and rheumatological disorders.
      5. Research. Exposure to clinical and/or laboratory research.
      6. Basic science. Instruction in anatomy, biochemistry, biomaterials, biomechanics, microbiology, pathology, pharmacology, physiology, and other basic sciences related to orthopaedic surgery. The resident must have the opportunity to apply these basic sciences to all phases of orthopaedic surgery.
c. Options. Twelve months of the four required years under the direction of the orthopaedic surgery residency program director may be spent on services consisting partially or entirely of:
   1. Additional experience in general adult or children's orthopaedic or fractures/trauma
   2. An orthopaedic clinical specialty
   3. Orthopaedics-related research
   4. Experience in an accredited graduate medical educational program whose educational content is preapproved by the director of the orthopaedic surgery residency program

D. Accreditation Requirements

1. The educational experience in orthopaedic surgery obtained in the United States must be in an approved position in programs accredited by the Residency Review Committee for Orthopaedic Surgery and by the Accreditation Council for Graduate Medical Education.
   All other clinical education obtained in the United States must be in programs accredited by the Accreditation Council for Graduate Medical Education and the appropriate Residency Review Committee. The Directory of Graduate Medical Education Programs Accredited by the Accreditation Council for Graduate Medical Education, published annually by the American Medical Association, 515 N State St, Chicago, IL 60610, lists accredited rotations of 6 months or longer.
2. During the 5 years of accredited residency, a total period of no more than 6 months may be served in unaccredited institutions.
3. Credit for time spent in residency education will be granted only for the period during which the residency program is accredited, and only for time served in an approved position within an accredited program.
4. If an orthopaedic residency program has its accreditation withdrawn by the Residency Review Committee for Orthopaedic Surgery and the Accreditation Council for Graduate Medical Education, no educational credit will be granted past the effective date of withdrawal of accreditation.
5. Educational credit may be granted for clinical experience in the United States military and/or public health services if the experience is accepted by the director of the orthopaedic surgery residency program that the applicant enters. Up to 1 month of credit may be granted for 2 months of clinical experience, not to exceed 12 months of credit. Credit earned in this manner is subject to approval by the Board's Credentials Committee. This approval should be sought prior to entry into the program.
6. Educational experience obtained in Canada must be on services approved by the Royal College of Physicians and Surgeons of Canada and must extend over a minimum of 5 years. The content requirements outlined in III.C must be met.
7. The Board does not grant credit for foreign educational experience, other than as permitted in III.D.2 and III.D.6.
8. The term "fellow" is not synonymous with the term "resident" for the purpose of obtaining Board credit for educational experience. A resident is an individual enrolled in an approved position in an accredited educational program.

E. Achievement Requirements

1. The director of the program providing general graduate medical education must certify the satisfactory completion of that segment of education.
2. In orthopaedic surgery residency programs, the program director must certify the satisfactory completion of each rotation for which credit is awarded. (See III.G.)
3. The program director responsible for the final year of the resident's education must certify that the resident has achieved a satisfactory level of competence and is qualified for the certifying process.

4. The certification referred to in 2 and 3 above must be made on the appropriate Record of Residency Assignments form and must be countersigned by the resident.

5. Medical practice activity outside of residency duties must not be allowed to interfere with the educational experience. Residents may not engage in such activities without the specific prior approval of the program director. Approval must be based on the judgment that rotations are being completed without compromise and that the circumstances of the resident warrant such activity.

F. Continuity Requirements

The resident should have progressively increasing patient care responsibility. A part-time or pleceenage approach to residency requirements is discouraged. The final 24 months of orthopaedic residency education must be obtained in a single orthopaedic residency program unless prior approval of the Credentials Committee is obtained.

G. Documentation Requirements

1. For orthopaedic education obtained in the United States, the program director must provide the Board with yearly documentation during the residency. Each June, directors will receive two computer diskettes containing Record of Residency Assignment forms on which the required information will be recorded. The appropriate forms are to be printed after the data have been entered, then signed by the program director and the resident. The printed, signed forms and the diskettes are to be returned to the Board office within 30 days of the end of the academic year.

2. The Record of Residency Assignment forms are to be completed for each resident as follows:
   a. Form 1 will be submitted the year the resident enters the program.
   b. Form 1-A must be provided for residents receiving educational credit in a nonorthopaedic ACGME accredited program and for nonorthopaedic education received within the ACGME accredited orthopaedic residency.
   c. Form 2-A must be completed yearly for each resident in the orthopaedic program. It must indicate the content and time spent on rotations, information on any unaccredited rotations, and whether credit was granted for a full year.
   d. Form 3 is the final evaluation form.

3. The computer diskettes and printed, signed forms are due in the Board office within 30 days of completion of the academic year. Part 1 examination results for candidates who take the examination in the same year they complete their residencies will not be mailed either to the candidates or to the program directors until the diskettes and forms have been received by the Board office.

4. When a resident leaves a program prematurely, the program director must notify the Board office in writing within 30 days. The letter must record the reasons for leaving and confirm credit granted for rotations during the academic year in which the resident left. At the end of the academic year, Form 2-A and Form 3 must be completed.

5. Before a resident enters a new program, the new program director must obtain copies of the resident's Record of Residency Assignments forms from the Board office and review them thoroughly in order to develop an appropriate individual program that will meet the minimum educational requirements and include progressively increasing responsibility.

IV. Requirements for Taking the Certifying Examination

The certifying examination is divided into two parts. Part I is a written examination that may be taken at any time after the completion of the educational requirements. Part II is an oral examination that may be taken after passing Part I, completion of the practice requirement, evaluation of the applicant's practice, and admission to the examination. A candidate must pass both parts of the certifying examination to be certified.

After taking and passing the written examination, candidates have 5 years to pass the oral examination. Candidates who do not pass the oral examination within those 5 years must retake and repass the written examination before applying to take the oral examination. Time spent in fellowship education after passing Part I will not count as a part of the 5-year time limit.

An applicant seeking certification by the American Board of Orthopaedic Surgery must satisfy the educational requirements that were in effect when he or she first enrolled in an accredited orthopaedic residency. For all other requirements, an applicant must meet the specifications in effect at the time of application.

A. Educational Requirements

1. An applicant must satisfactorily complete and document the minimum educational requirements in effect when he or she first enrolled in an accredited orthopaedic residency.

2. Upon successful completion of 54 months of the 60 months of required education and upon the recommendation of the program director, a candidate may apply to take Part I of the examination.

3. In order to be admitted to the examination, the candidate must complete the full 60 months of required education.

4. An applicant who has received orthopaedic surgery residency education in Canada must have fulfilled the requirements of the American Board of Orthopaedic Surgery and must have passed the qualifying examination in orthopaedic surgery of the Royal College of Physicians and Surgeons of Canada before applying for either part of the Board's certifying examination.

B. License Requirement

Applicants who are in practice at the time they apply for Part I and all applicants for Part II must either possess a full and unrestricted license to practice medicine in the United States or Canada or be engaged in full-time practice in the United States federal government, for which licensure is not required. An applicant will be rendered ineligible for any part of the certifying examination by limitation, suspension, or termination of any right associated with the practice of medicine in any state, province, or country due to a violation of a medical practice act or other statute or governmental regulation; to disciplinary action by any medical licensing authority; or by voluntary surrender while under investigation.

C. Practice Requirement

1. The applicant must be continuously and actively engaged in the practice of orthopaedic surgery other than as a resident or fellow (or equivalent) for at least 22 full months immediately prior to the Part II examination. An applicant who interrupts the 22 months of practice with a fellowship can count the months of practice that preceded the fellowship as part of the 22-month requirement.

2. The applicant must be in one practice location for a minimum of 12 consecutive months during the required 22-month period. A change in location, type of hospital practice, or practice association may result in deferral. The practice must be located in the United States or its territories, Canada, or a United States service installation.
3. The practice must include hospital admitting and surgical privileges in effect at the time of application for the examination and at the time of examination.

4. The applicant must demonstrate professional competence and adherence to acceptable ethical and professional standards. The practice must allow independent decision-making in matters of patient care.

5. A reduction, restriction, suspension, termination, or resignation at the request of a hospital of all or any portion of an applicant's surgical staff privileges, or pending action to do so, will normally result in a deferral until such action is finally resolved and the applicant's practice has stabilized sufficiently for it to be evaluated.

6. An applicant in the United States uniformed services may satisfy the practice requirement if assigned as an orthopaedic surgeon for at least 22 full months prior to the date of the Part II examination. The applicant must submit a letter from his or her immediate supervisor evaluating his or her capability in the practice of orthopaedic surgery, as well as any other documentation the Credentials Committee may require to demonstrate professional competence and adherence to acceptable ethical and professional standards.

D. Evaluation of Applicant

1. Individuals who do not engage in traditional orthopaedic surgery cannot be adequately evaluated for the Part II examination and will not be certified.

2. Qualifications for taking the Part II examination will be determined by the Credentials Committee after review of the application, letters of recommendation, and other relevant information.

3. It is the responsibility of the applicant to provide the information on which the Credentials Committee bases its evaluation of the qualifications of the applicant. This responsibility extends to information that the Credentials Committee requests from other persons. If the Credentials Committee does not receive requested information from the applicant, a program director, a reference, a hospital representative, or another source by February 1, the Board will notify the applicant and defer the decision on admission to the examination until the information is received.

4. Representatives of the Board may visit the site of an applicant's practice if the Credentials Committee believes that this is necessary for adequate evaluation of the applicant's work.

V. Impaired Physicians

A. Chemical Dependency

Applicants who have a history of chemical dependency will not be admitted to either Part I or Part II of the certifying examination unless they present evidence from the appropriate agencies, hospitals, and physicians demonstrating to the Board that they both (1) have satisfactorily completed the program of treatment prescribed for their condition and (2) have been drug-free for a period sufficient to indicate recovery (normally, at least 3 years). This documentation must accompany the completed application form. The maintenance of any such applicant's certification may be conditional upon periodic drug testing. In addition, any such applicants for Part II of the examination may be site-visited at their practices by representatives of the Board as described in IV.D.4.

B. Mental and Physical Impairment

Applicants who have a mental or physical impairment that could affect their ability to practice orthopaedic surgery will not be admitted to either Part I or Part II of the certifying examination unless they present medical evidence from the appropriate physicians, treatment centers, and hospitals demonstrating to the Board that the impairment does not compromise their ability to render safe and effective care to their patients. This documentation must accompany the completed application form. In addition, any such applicants for Part II of the examination may be site-visited at their practices by representatives of the Board as described in IV.D.4.

VI. Procedure for Application for Part I and Part II of the Certifying Examination

A. Application Dates and Requests

1. The dates, locations, and application deadlines for Part I and Part II of the certifying examination are announced in the Journal of Bone and Joint Surgery. Examination dates may be changed at the discretion of the Board. Confirmation of published examination dates can be obtained from the Board's office.

2. All applications must be requested in writing.

B. Application Deadlines

1. Part I. A completed application on an original form provided by the Board for Part I must be postmarked by registered mail on or before March 1 of the year of the examination. The application must be accompanied by a nonrefundable examination fee of $750.

2. Part II. A completed application on an original form provided by the Board for Part II must be postmarked by registered mail on or before October 1 of the year preceding the examination. The application must be accompanied by a nonrefundable application and credentialing fee of $575.

3. Late or incomplete applications. Applications postmarked after the deadlines for Part I or Part II of the certifying examination and applications received incomplete will be returned to the applicant together with the fee check.

a. If a Part I applicant wishes to resubmit the Part I application by registered mail postmarked on or before March 31, the nonrefundable examination fee of $750 and a nonrefundable late fee of $250 must be enclosed.

b. If a Part II applicant wishes to resubmit the Part II application by registered mail postmarked on or before November 30, the nonrefundable application and credentialing fee of $575 and a nonrefundable late fee of $250 must be enclosed.

4. No applications will be accepted after the final deadlines.

C. Notifying the Board of Application Changes

1. It is the responsibility of all applicants to notify the Board office of any change of address, practice association, or hospital affiliation.

2. If a Part II applicant changes practice location or practice association or acquires new hospital staff affiliations, new references will be solicited by the Board.

3. An applicant is also required to notify the Board of the denial of any request for hospital privileges; of any action to restrict, suspend, or terminate all or any portion of surgical staff privileges, or any request by a hospital to resign all or any portion of surgical staff privileges; and of any action by a governmental agency that would result in the restriction, suspension, or probation of the applicant's license or any right associated with the practice of medicine.

D. Notifying the Applicant of Examination Admission

1. For Part I, the applicant will receive examination information, an assigned examination number, and an admission card not later than 30 days prior to the examination date.

2. For Part II, the decision of the Credentials Committee is mailed to the applicant not later than 60 days prior to the examination date.

E. Fees

1. For Part I, the nonrefundable examination fee of $750 must be submitted with the application form.
2. For Part II:
   a. The nonrefundable application and credentialing fee of $875 must be submitted with the application form.
   b. The candidate must also submit an examination fee of $750 on or before the April date specified in the letter of notification of admission to the examination. This fee will be forfeited if the candidate fails to appear for the examination or cancels after being scheduled.
3. There will be a $50 charge levied for any application or examination fee that is returned not paid by the Board’s bank.
4. The fees paid to the American Board of Orthopaedic Surgery, Inc., are not tax deductible as charitable contributions, but may be deductible under some other provision of the Internal Revenue Service code.

**F. Practice-Based Oral Requirements**

The Part II examination includes a standardized portion and a practice-based portion. The purpose of the practice-based portion is to evaluate a candidate's own practice as broadly as possible. This exercise will be conducted much as rounds or conferences are during residency, with the candidate presenting his or her cases and responding to the examiner’s questions and comments.

1. **Case selection process.** The Board will select 15 cases from the applicant’s 6-month case list(s) from which the applicant will then select ten cases to bring to the examination for detailed presentation.

   The case selection process involves the following steps. Applicants are urged to attend to details and follow procedures carefully and exactly in order to ensure admission to the examination.

   a. **Case collection.** The applicant is to collect all operative cases, including same-day surgery, for which he or she was the responsible operating surgeon for 6 consecutive months beginning July 1 of the year before the Part II examination. If time is taken off during those 6 months, the starting point for the collection period must be backed up by the amount of time missed. For example, case collection for an applicant who took a 2-week vacation in August would begin mid-June.

   All cases must be collected from each hospital or surgery center at which the applicant has operated during the 6-month period.

   b. **Case lists.** Once all cases have been collected, a separate list must be prepared for each hospital or surgery center using forms provided by the Board. Use only these forms. All information must be typed.

   1. Cases are to be grouped according to the ten general categories listed in F.I.c. and recorded chronologically within each category. A separate, complete list containing a minimum of ten pages, one for each category, must be prepared for each hospital or surgery center.

   2. For each case, information provided must include patient name or initials, unit or hospital number, sex, age, diagnosis, treatment, or surgical procedure, length of follow-up, and outcome, including complications.

   3. The first pages of each category for each case list must be certified by the hospital administrator or director of medical records. This means a total of ten certifications for each location. If no cases are reported for a category, indicate “No cases in this category” on the category sheet, complete the certifications, and include the sheet with the case list.

4. Again, it is imperative that all cases be listed, each under the single most appropriate category, and that each case list contain at least one page for each category.

**c. Case categories.** Regardless of how specialized or general an individual’s practice may be, it should be possible for all applicants to use these general categories to group their surgical cases

1. **Incision.** Includes such procedures as arthroscopy with exploration, soft tissue biopsy, superficial abscess drainage, removal of calcific deposits, etc.
2. **Excision.** Includes such procedures as synovectomy, meniscectomy, sequestrectomy, excision of tumors of bone and soft tissue, etc.
3. **Introduction or Removal.** Foreign body removal, injections of steroids, antibiotics, etc.
4. **Repair, Revision or Reconstruction.** Includes arthroplasty, osteotomy, tenodesis, capsular arthroplasty, repair of nonunion with or without bone graft, etc.
5. **Fracture and/or dislocation.** Includes open reduction and/or internal fixation of fractures and dislocations, closed reductions of fractures and dislocations, etc.
6. **Manipulation of a knee or shoulder, etc., under anesthesia.**
7. **Arthrodesis.** All techniques.
8. **Amputation.** Any level.
9. **Miscellaneous.** Any surgical procedure that does not fit into any of the categories listed.
10. **Complications.** Systemic complications occurring in perioperative period up to six weeks post-op, such as pulmonary embolus, cardiac abnormalities, abdominal problems such as ileus, stress ulcer, cerebrovascular accident, and urinary difficulties. Local complications, such as wound infection, failure of fixation, dislocation of a total joint arthroplasty, skin slough, compartment syndrome, neurologic and/or vascular impairment, etc., related to a surgical procedure.
11. **Common categorization questions**

   1. **If a case listed in one of the first nine categories incurs a complication, indicate that the case also appears in the complications category by making a notation in the “Length of Follow-up and Outcome” column. Then list the complication in the tenth category.**

   2. Arthroscopic procedures that do not fit into categories one through eight should be listed in category nine.

e. **Submission and selection of cases**

   1. The applicant must send the original and one copy of his or her complete case lists to the Board by certified mail on or before January 31 of the year of the examination. Remember that these must be on the forms provided by the Board and that each list must contain a minimum of ten pages, one for each category.

   Before mailing, the applicant should make an additional copy of all lists for his or her files. Copies must also be brought to the exam. (See 2.a.2. below.)

   2. The Board will select 15 cases, a list of which will be sent to the applicant. The applicant will then choose any ten of these 15 cases to present in detail at the examination.

2. **Examination materials.** Once the candidate has received the Board’s list of 15 cases, he or she must gather all of the following to bring to the examination

   a. **Lists**

      1. Three copies of the list of 15 cases selected by the Board.

      2. Three copies of the complete six-month case lists, one for each hospital or surgery center. All of the ten cases selected by the candidate for presentation should be circled in red or highlighted wherever they appear on the case lists.
b. Documentation for the ten cases selected by the candidate for presentation, including  
1. Images. The pertinent preoperative, intra- or immediate postoperative, and most recent follow-up x-rays for each case selected by the candidate for presentation. Before the examination begins, x-rays should be arranged in order of presentation and clearly marked in terms of date pre- and postoperative. Pertinent images in CT and MRI panels must also be marked.  
2. Notes. Copies of admission and discharge notes, operative notes, office notes, and any other patient chart material that will aid in case presentation.  
3. Vide prints or photographic prints for arthroscopy cases selected, showing the initial lesion(s) and the lesion(s) after treatment.  
4. For any selected case that is a complication, copies of consultations and x-rays pertinent to the complication and its treatment.

C. Because the examination is to be anonymous, the candidate should obliterate his or her name wherever it appears on any material brought to the examination, including the 6-month case list(s) and the Board’s list of 15 selected cases.

3. Although the examiners will concentrate on cases brought for presentation, they may ask questions pertaining to a candidate’s case list or practice. The candidate should not be concerned if all material brought to the examination is not covered. Discussion may focus on one area, or candidate and examiners may become involved in a few cases in such detail that time will not allow presentation of all patients. The candidate will not be penalized for this during the grading.

4. Applicants who have questions about materials and procedure for the practice-based oral portion of the Part II examination should call or write the Board office well before the exam. Failure to comply with the steps outlined may invalidate an examination.

VII. Falsified Information and Irregular Behavior

A. If it is determined that an applicant has falsified information on the application form or failed to provide material information, the applicant will not be considered for either part of the examination not already passed and must wait 3 years before being allowed to file a new application. The applicant will not be considered for admission to either part of the examination during this 3-year period.

B. Examination applicants should understand that the following may be sufficient cause to bar them from future examinations, to terminate participation in the examination, to invalidate the results of an examination, to withhold or revoke scores or certificates, or to take other appropriate action:

1. The giving or receiving of aid in the examination, as evidenced either by observation or by statistical analysis of incorrect answers of one or more participants in the examination.

2. The unauthorized possession, reproduction, or disclosure of any materials, including, but not limited to, examination questions or answers, before, during, or after the examination.

3. The offering of any benefit to any agent of the Board in return for any right, privilege, or benefit that is not usually granted by the Board to other similarly situated candidates or persons.

C. The following are examples of behavior considered to be irregular and cause for invalidation of the examination or imposition of a penalty:

1. Referring to books, notes, or other devices at any time during the examination. This prohibited material includes written information or information transferred by electronic, acoustical, or other means.

2. Any transfer of information or signals between candidates during the test. This prohibition includes any transfer of information between the candidate and any other person at any time during the testing period, including bathroom breaks.

3. Any appearance of looking at the answer sheet or the examination booklet of another candidate during the examination.

4. Allowing another candidate to view one’s answer sheet or examination booklet or otherwise assisting another candidate in the examination.

5. Taking any examination material outside the examination room. All examination materials are the property of the Board and must be left in the room at the end of the examination.

D. Applicants should also understand that the Board may or may not require a candidate to retake one or more portions of the examination if presented with sufficient evidence that the security of the examination has been compromised, notwithstanding the absence of any evidence of a candidate’s personal involvement in such activities.

VIII. Credentials Decisions

A. Determining Admission to Examinations

1. The Credentials Committee meets at least once each year to consider applications for the examinations. At this meeting, a decision about each applicant will be made either to approve admission to the next examination, to deny admission, or to defer decision pending further evaluation.

2. A decision approving admission to an examination applies only until the next available examination and does not carry over from one examination until the next. A new application is required for each examination.

B. Deferral of Admission Decision

A decision on an applicant’s admission to either Part I or Part II of the examination may be deferred if information is insufficient for the Credentials Committee to make a judgment.

Typically, the committee will defer such a decision for 1 year to gain further information. If information is still insufficient, the decision will be deferred for a second year to enable representatives of the Board to conduct a site visit as described in IV.D. A deferral of not more than 2 consecutive years is not viewed by the Board as an adverse action; thus, no appeal from a decision of the Credentials Committee is permitted unless an applicant has been denied admission or has been deferred for more than 2 consecutive years.

C. Appeal of Admission Decision

An applicant denied admission to the examination will be informed of the basis for such action and may request a hearing by an appeals committee of the American Board of Orthopaedic Surgery. (See XII.)

IX. Certification and Recertification by the American Board of Orthopaedic Surgery

A. Awarding Certificates

The American Board of Orthopaedic Surgery awards a certificate to a candidate who specializes in orthopaedic surgery, has met the educational requirements of the Board, has demonstrated competence in orthopaedic surgery and adherence to ethical and professional standards, and has passed both parts of the certifying examination. Certificates awarded after 1985 are valid for 10 years. This portion of the Board’s responsibility is discharged by issuance of a certificate to an individual found qualified as of the date of certification.

B. Certificate Revocation

A certificate may be revoked prior to its expiration date because of intentional and substantial misrepresentation to the Board of the
applicant's education and other requirements for admission to either part of the examination. Early revocation may also occur because of limitation, suspension, or termination of the right to practice medicine in any state, province, or country due to a violation of a medical practice act, statute, or governmental regulation; disciplinary action by any medical licensing authority; or voluntary surrender while under investigation. Before a certificate is revoked, the diplomat will be informed of the basis of such action and will be afforded a hearing according to procedures formulated by the American Board of Orthopaedic Surgery.

C. Certificate Reinstatement
Should the circumstances that justified revocation or surrender of the diplomat's certificate be corrected, the Board may reinstate the certificate after appropriate review of the individual's qualifications and performance, using the same standard applied to other applicants for certification.

D. Recertification Process
Diplomates are encouraged to renew their credentials periodically through the Board's recertification process. Information about recertification options can be obtained from the Board office.

X. Unsuccessful Candidates
Unsuccessful Part I candidates may repeat the examination by submitting a new application form for the examination and again being found admissible. (See VI.B.1.)

Unsuccessful Part II candidates may repeat the examination by submitting a new application form for the examination and again being found admissible. (See VI.B.2 and VIII.) Candidates who do not pass Part II within 5 years after passing Part I must retake and repass Part I before applying to take Part II, except as noted in IV.

XI. Program Accreditation
Institutions offering orthopaedic education must meet the General and Special Requirements of the Accreditation Council for Graduate Medical Education and the Residency Review Committee for Orthopaedic Surgery as stated in the Directory of Graduate Medical Education Programs Accredited by the Accreditation Council for Graduate Medical Education. (See III.D.)

A. Residency Review Committee for Orthopaedic Surgery
Program accreditation is issued by the Residency Review Committee for Orthopaedic Surgery, an autonomous committee composed of three representatives from each of the three sponsoring organizations: the American Board of Orthopaedic Surgery, the Council on Medical Education of the American Medical Association, and the American Academy of Orthopaedic Surgeons. In evaluating orthopaedic residency programs, the Residency Review Committee considers the number of residents, training period, program organization, educational experience, and institutional responsibility. The committee meets twice yearly.

B. Changes in Accreditation
Programs seeking changes in accredited positions or institutional affiliations can obtain information and application forms from the secretary of the Residency Review Committee for Orthopaedic Surgery at the Accreditation Council for Graduate Medical Education, 515 N State St, Chicago, IL 60610.

Completed forms are to be returned to the secretary at the above address.

C. Program Surveys
Programs applying for accreditation or changes in accreditation will be surveyed at the earliest feasible date by a specialist site visitor or by a field representative for the Accreditation Council for Graduate Medical Education. A report of the survey is submitted to the Residency Review Committee for Orthopaedic Surgery for evaluation and official action. The Residency Review Committee makes a determination regarding the accreditation of the program under authority delegated by the Accreditation Council for Graduate Medical Education, and it notifies the program director and the hospital.

D. Number of Residents
The total number of residents assigned to any orthopaedic residency program and the number at each level of education must have prior approval by the Residency Review Committee for Orthopaedic Surgery.

XII. Appeals Procedure
A. An individual who has received an unfavorable ruling from a committee of the Board may appeal such determination by mailing a notice of appeal to the office of the American Board of Orthopaedic Surgery within 60 days of the date such ruling was mailed to him or her. Exception: The decisions by the Examinations Committee that a candidate has failed either part of the certifying examination may be appealed only in the manner and to the extent provided in paragraphs G and H below.

B. Upon receipt of a notice of appeal, the concerned Board committee shall consider any information submitted therewith by the individual in support of his or her appeal and make such further investigation as it deems appropriate. If the committee then decides in a manner favorable to the individual, it shall so notify the individual. If the committee does not so determine, it shall notify the individual and the president of the American Board of Orthopaedic Surgery.

C. The individual shall then have the right to an appeal hearing to decide whether the determination of the concerned Board committee shall be confirmed, modified, or overruled in accordance with the hearing process described in this appeals procedure.

1. The president of the American Board of Orthopaedic Surgery shall appoint an ad hoc appeals committee consisting of three directors of the Board who did not participate in making the determination being appealed, one of whom shall be designated by the president as chairman of the appeals committee.

2. In event that the subject matter of the appeal involves complex issues of fact or issues not solely dependent upon medical, surgical, or professional standards, the president of the American Board of Orthopaedic Surgery, at his or her sole discretion, may appoint a hearing officer to conduct the appeal hearing and to submit a full written report and a recommended decision to the ad hoc appeals committee. The hearing officer appointed at the discretion of the president shall be an impartial physician, lawyer, or other professional.

3. The chairman of the appeals committee shall convene a hearing before the appeals committee or the hearing officer, if one is appointed, within a reasonable time after their respective appointments, but not less than 60 days after the appointment of the appeals committee and the hearing officer, whichever is later.

D. Prior to the hearing
1. The concerned Board committee shall provide the executive director with such written information concerning its decision as it deems appropriate; a list of witnesses, if any, whom it expects to call to testify; copies of any written material that it considered in making the determination appealed (but only if it intends to present such material at the hearing); and a list of information and documents that the individual is required to produce at the hearing. This material, together with written notice stating the time and place of the hearing, shall be sent to the individual by the executive director not less than 30 days prior to the hearing. Not less than 7 days prior to the
hearing, the concerned Board committee shall provide the executive director and the individual with copies of any written reports, affidavits, or statements of experts that the concerned Board committee intends to present at the hearing.

2. Not less than 7 days prior to the hearing, the individual shall provide the executive director and the concerned Board committee with such written information concerning his or her position as he or she deems appropriate; a list of witnesses, if any, whom he or she expects to call to testify; and copies of any written reports, affidavits or statements of experts that he or she intends to present at the hearing.

3. The executive director shall submit the written material referred to in this section D to the members of the appeals committee of the hearing officer, if one has been appointed, prior to the hearing. Copies of this material must also be submitted to the individual and to the concerned Board committee no later than the time when submitted to the appeals committee or the hearing officer.

E. The hearing, whether conducted before the appeals committee or a hearing officer, shall be a hearing de novo. The concerned Board committee and the individual shall have the right to present all relevant information and evidence in support of their respective positions, and neither the concerned Board committee nor the individual shall be limited to the information and evidence considered by the concerned Board committee in making its original determination or its reconsideration of the original decision.

1. The concerned Board committee shall have the burden of proving at the hearing that the determination being appealed should be confirmed. The standard of proof to be applied by the appeals committee and the hearing officer in deciding whether the information and evidence presented at the hearing is sufficient to warrant confirmation of the determination being appealed is by the preponderance or greater weight of the evidence.

2. At the hearing, the concerned Board committee and its legal or other representatives shall present such relevant information and evidence as it deems appropriate to support its previously made determination. However, the committee shall not have the right to present any information or evidence not previously provided as required in D.2. The committee may call, examine, and cross-examine witnesses.

3. The individual shall have the right to be represented at the hearing by legal counsel or any person of his or her choice. He or she may present such relevant information and evidence as he or she deems appropriate in support of his or her position. However, the individual shall not have the right to present any information or evidence not previously provided as required in D.2. The failure of the individual to produce information or documents requested by the concerned Board committee as required in D.2 shall be grounds for upholding and confirming the determinations of the concerned Board committee. The individual may call, examine, and cross-examine witnesses.

4. The individual and the concerned Board committee may submit written statements at the close of the hearing. A written record of the hearing shall be made available to the individual at one-half the cost of its preparation.

F. After the conclusion of the hearing:

1. If the hearing has been conducted before a hearing officer, the hearing officer shall prepare a written report based upon the information and evidence presented, including the findings of fact determined by the hearing officer and a recommended decision as to whether the determination being appealed should be confirmed, modified, or overruled. The hearing officer shall submit the written report of the appeals committee and send copies to the individual and the concerned Board committee. The individual and/or the concerned Board committee may file objections to the report and recommendations of the hearing officer with the appeals committee within 10 days after receipt of the report. The opposing party shall then have 10 days to file its response to such objections with the appeals committee.

2. The appeals committee shall make its decisions following the hearing. If the hearing has been conducted before a hearing officer, the appeals committee will first receive the written report and recommendations of the hearing officer and the objections and responses filed thereto by the parties. If a majority of the members of the appeals committee determine, on the basis of the information and evidence presented, including, when applicable, the report and recommendations of the hearing officer, that the determination of the concerned Board committee should be confirmed or modified, the appeals committee shall so declare. If a majority determines that the concerned Board committee's determination should be overruled, the appeals committee shall so declare. The appeals committee shall inform the individual and the concerned Board committee of its decision in writing within a reasonable time following the hearing, explaining the basis for its judgment. The decision of the appeals committee shall be final and binding.

G. A candidate who believes that the Part II examination was administered in an unfair or inaccurate manner or that one or more of his or her oral examiners was acquainted with him or her or was not impartial may immediately, upon completion of the examination, request that he or she be reexamined. The request shall be made to the chairman of the Oral Examinations Committee and reviewed by the president and the secretary. If, after discussing the matter with the candidate and making such other investigations as they may deem appropriate, a majority of the president, the secretary, and the chairman of the Oral Examinations Committee determine that reasonable grounds exist for the candidate's request, he or she shall be immediately reexamined by another panel of oral examiners. In such event, the first oral examination will be disregarded and only the candidate's performance on the reexamination shall be considered in determining his or her score on the examination.

H. A candidate who fails the Part I examination may request in writing that his or her examination be rescored by hand to verify the accuracy of the results as reported to him or her. Such a request is to be made within 60 days of his or her being notified of the results of the examination. The request must be accompanied by a check for $10 payable to the American Board of Orthopaedic Surgery to cover the cost of hand scoring. There shall be no further appeal of a failure on the Part I examination.

American Board of Otolaryngology
M Eugene Tardy, Jr, MD, President, Chicago, Illinois
Eugene N Myers, MD, Vice President/President Elect, Pittsburgh, Pennsylvania
D Thane Boddy, MD, Treasurer, Ponte Vedra Beach, Florida
Byron J Bailey, MD, Immediate Past President, Galveston, Texas
Warren Y Adkins, MD, Charleston, South Carolina
Roger L Crumley, MD, Irvine, California
Charles W Cummings, MD, Baltimore, Maryland
Transfers
A resident wishing to transfer from one residency program to another must notify the ABO in writing, and explain the circumstances of the proposed transfer.

Letters from the current and prospective directors of training must also be submitted. The letter from the current program director must verify the exact amount of training successfully completed in the program. The letter from the prospective program director must verify that sufficient residency positions, accredited by the Residency Review Committee for Otolaryngology of the Accreditation Council for Graduate Medical Education (ACGME), exist in the program to provide the transferring resident with the training necessary to meet the requirements of this Board for certification.

General Requirements
There is no required time interval between completion of the residency program and making application for examination. However, all residency training must be successfully completed before the date of the examination in any given year.

The applicant must possess high moral, ethical, and professional qualifications as determined by, and in the sole discretion of, the Board.

The applicant must be a graduate of an approved school of medicine or osteopathy.

The applicant must submit verification of a valid, unrestricted license to practice medicine.

Training Requirements
Training programs in otolaryngology-head and neck surgery in the United States are evaluated by the Residency Review Committee for Otolaryngology, which consists of representatives from the American Medical Association, the American College of Surgeons, and the ABO, and are accredited by the ACGME. Information concerning approved educational programs is contained in the Graduate Medical Education Directory published by the American Medical Association.

All training specified below must be successfully completed in ACGME-approved programs, or in programs in Canada accredited by the Royal College of Physicians and Surgeons of Canada.

The applicant whose residency training began July 1, 1981, or thereafter must have satisfactorily completed a minimum of 5 years of residency training as follows:

1. At least 1 year of general surgical training. It is preferred that the general surgical residency be taken prior to otolaryngologic training, but it may not be taken following otolaryngologic training.

2. At least 3 years of residency training in otolaryngology-head and neck surgery. This training must involve increasing responsibility each year and must include a final year of senior experience. This final year must be spent within the accredited program in which the previous year of training was spent, unless prior approval is obtained from the Board.

3. An additional year of residency training, which may be in otolaryngology, general surgery or other residencies or internships. If this year of training is not in otolaryngology, it must be taken prior to the final year of otolaryngology residency.

All residency training must be completed in a manner acceptable to the head of that residency program.

The applicant whose residency training begins July 1, 1997, or thereafter will be required to complete 1 year of general surgical training and 4 years of otolaryngologic training, for a total of 5 years of residency training.

Beginning in 1997, the ABO will examine only the number of residents graduates from a program in any given year that is the RRC (ACGME) approved number of graduates for that year.
Foreign Training
An applicant who completed otolaryngologic training in the United Kingdom or the Republic of Ireland in a program accredited by the Specialist Advisory Committee, and who has received a certificate of accreditation in otolaryngology from the Joint Committee on Higher Surgical Training in the United Kingdom and the Republic of Ireland may be considered for examination.

An applicant who completed otolaryngologic training under the New Zealand program after January 1, 1984, and passed the examination leading to Fellowship in the Royal Australasian College of Surgeons or who completed training under the Australian program after January 1, 1986, and has passed the examination leading to Fellowship in the Royal Australasian College of Surgeons may be considered for examination.

Application for Examination
Application materials for the written examination in any given year become available January 2 and must be completed and returned by May 1 of that year. The application consists of the following:

1. Application, signed by the program director and another ABO diplomate. A current photograph, signed on the front, must be attached to the application. A duplicate photograph, also signed on the front, must be attached to a signature card provided with the application.

2. Verification of medical degree (official transcript or letter from Dean).

3. Verification of otolaryngology residency form, signed by the program director, attesting to satisfactory completion of the training program.

4. Verification of surgery residency form, signed by the chief of surgery, attesting to satisfactory completion of the training program.

5. Verification of additional residency form, signed by the appropriate program director, attesting to satisfactory completion of the training program or internship.

6. Credentials questionnaire, regarding practice privileges, licensure actions, etc.

7. Candidate authorization, for release of information from the Federation of State Medical Boards.

8. Verification of all licenses to practice medicine, showing nonrestricted status and date of expiration.

   Individuals who have completed residency training but who will enter a fellowship program utilizing an institutional license must submit a statement from the program director as evidence of this fact.

   Individuals who have completed residency training but who will go on to practice medicine in a foreign country not requiring licensure must make a written request to be accepted for the examination without medical license. Such requests should be submitted with the application.

9. Operative experience report (dissected and printed), which lists procedures assisted in and performed by the applicant during otolaryngology residency.

Additional information may be requested by the Board from the following: local medical society, Board certified otolaryngologists from the geographical area in which the applicant practices, the director of the applicant's training program, hospital chiefs of staff, and/or other individuals and entities who may have knowledge of the applicant's moral and ethical standing, qualifications, or abilities.

Applications are approved by the Credentials Committee in June, and applicants are then notified if they have been approved for examination. The Board reserves the right to reject any application. Applications are valid for one written exam and three oral exams. At the conclusion of this period, or upon failure of the written exam, the application expires, and individuals are required to submit new forms.

Leaves of Absence
Leaves of absence and vacation may be granted to residents at the discretion of the program director in accordance with local rules. The total of such leaves and vacation may not exceed 6 weeks in any one year. If a longer leave of absence is granted in any year, the required period of graduate medical education may be extended accordingly.

Applicants With Special Disabilities
The ABO offers examinations in a place and manner accessible to persons with disabilities or offers alternative accessible arrangements for such individuals. Requests for such accommodations should be submitted with the application prior to May 1 of any given year.

Fees
General Information
- 1. Fees are not refundable, nor can they be "held over" to a subsequent exam.
- 2. All fees must be paid in US funds. Applicants residing outside the United States must submit payment by International Money Order.
- 3. Fees must be paid in full by the stated deadlines. Applications without payment will not be processed.
- 4. A fee of $200 will be charged for any application or portion thereof postmarked between May 1 and May 15. Applications are not accepted after May 15.
- 5. A fee of $25 will be charged for any check returned by the bank for insufficient funds.
- 6. Fees are subject to change at the discretion of the board.

New Applicants
1. The examination fee is $1,600. First-time applicants must submit $800 with the application by May 1. The additional $800 is due by July 15.

2. Individuals who become candidates for the oral examination (by achieving the qualifying score on the written examination) take their first oral examination at no additional cost.

3. Candidates are given three consecutive opportunities to take the oral examination. A fee of $900 will be charged for the second and/or third oral examination.

Reapplicants
1. If an individual fails the written examination, or if a passing score is not achieved after three oral exams, the individual must reapply to take the written exam and $1,600 must accompany the reapplication form.

2. Individuals who again become oral candidates follow the same procedure and pay the same fees as outlined in paragraph 3 of the new applicants section above.

Board Eligibility and Status Inquiries
The ABO does not recognize or use the term "Board-eligible." The Board states whether an individual is certified, is not certified, or is in the process of being examined (i.e., between written and oral examinations).

Purpose of Examination
The purpose of the examination is to determine the candidate's knowledge, skill, and understanding in the following categories:

1. Morphology, physiology, pharmacology, pathology, microbiology, biochemistry, genetics, and immunology relevant to the head and
neck; the respiratory and upper alimentary systems; the communication sciences, including knowledge of audiology and speech-language pathology; the chemical senses and allergy, endocrinology, and neurology as they relate to the head and neck.

2. Diagnosis and diagnostic methods including audiolologic and vestibular assessments, electrophysiologic techniques, and other related laboratory procedures for diseases and disorders of the ears, the respiratory and upper alimentary systems, and the head and neck.

3. Therapeutic and diagnostic radiology, including the interpretation of medical imaging techniques relevant to the head, neck, and thorax, including the temporal bone, skull, nose, paranasal sinuses, salivary and thyroid glands, larynx, neck, lungs, and esophagus.

4. Diagnostic evaluation and management of congenital anomalies, allergy, trauma, and other diseases in the regions and systems mentioned above.

5. The cognitive management, including operative intervention with its preparative and postoperative care, of congenital, inflammatory, endocrine, neoplastic, degenerative, and traumatic states, including
   a. Temporal bone surgery
   b. Paranasal sinus and nasal surgery
   c. Skull base surgery
   d. Maxillofacial surgery including the orbits, jaws, and facial skeleton
   e. Esthetic, plastic and reconstructive surgery of the face, head, and neck
   f. Surgery of the thyroid, parathyroid, pituitary, and salivary glands
   g. Head and neck reconstructive surgery relating to the restoration of form and function in congenital anomalies and head and neck trauma, and associated with ablative operations
   h. Endoscopy, both diagnostic and therapeutic
   i. Surgery of the lymphatic tissues of the head and neck

6. The habilitation and rehabilitation techniques and procedures pertaining to respiration, deglutition, chemoreception, balance, speech, and hearing.

7. The current literature, especially pertaining to the areas listed above.


In order to assist otolaryngology program directors in evaluating their programs, the Board reports each applicant's examination results to the director of the program in which the applicant completed his/her senior resident year.

**Examination Procedure**

The Board vigorously enforces the highest standards of honesty and integrity in its examination process. Accordingly, the following are considered a breach of ABO policy and are forbidden, and may be sufficient cause for the ABO to terminate an applicant's participation in the examination, to invalidate the results of the examination, to withhold an applicant's score or certificate, to bar an applicant permanently from all future examinations, to revoke a certificate, or to take other appropriate action:

1. Pseudonymization of the application or the submission of any falsified documents to the ABO
2. The giving or receiving of aid in the examination, including, but not limited to, copying answers from another candidate or permitting one's answers to be copied, as evidenced by observation at the time of the examination or by statistical analysis afterward
3. The offer of any financial or other benefit to any director, officer, employee, proctor, or other agent or representative of the ABO in return for any right, privilege, or benefit that is not usually granted by the ABO to other similarly situated candidates or persons
4. The unauthorized possession, reproduction, recording, discussion or disclosure of any material, including but not limited to, written or oral examination questions or answers before, during, or after the examination.

Proctors are required to report any suspected irregularity during an examination. A candidate may be moved to a more isolated area, or his or her participation in the examination may be terminated. Additionally, the ABO's educational consultants may undertake statistical studies of a candidate's answers compared with the answers of other participants in the examination to provide evidence that would support or fail to support a suspected irregularity. If, in the opinion of the ABO, there exists a probability that an irregularity occurred, the ABO will afford the suspected individual(s) procedural due process in order to assure fairness in the determination as to whether an irregularity has occurred.

The ABO will not report scores or grant certification on the basis of scores that it has determined to be invalid, and reserves the right to take whatever legal action is indicated with regard to violation of ABO copyright or examination violations.

**Certification, Rejection and Revocation (from the Bylaws, Article VI)**

The Board shall issue an appropriate certificate of qualification in otolaryngology (or in a subdivision thereof) to those who show themselves worthy of such certification according to the requirements of training, experience, and demonstrated competence as stated in the current ABO Booklet of Information.

No certificate shall be issued, and any certificate issued by the Board shall be subject to revocation at any time by the board, if it shall determine that the person involved:

1. Did not possess the required qualifications and requirements for examination, whether or not such deficiency was known to the Board or any director thereof, or could have been ascertained by the Board prior to examination or at the time of the issuance of a certificate as the case may be.
2. Made a material misstatement or withheld information in his/her application or any other representation to the Board or any Committee thereof, whether intentional or unintentional.
3. Has been convicted by a court of competent jurisdiction of any felony or misdemeanor involving moral turpitude, and in the opinion of the board, having a material relationship to the practice of medicine.
4. Had a license to practice medicine revoked, or shall have been disciplined or censured by any court or other body having proper jurisdiction and authority because of any act or omission arising from the practice of medicine.

If the Board determines to withhold or revoke any certificate for any reason, the person affected thereby shall be given written notice of the reasons therefor. Such actions by the Board shall be regarded as final unless such person requests a review of such action within 30 days after notice thereof has been mailed by the board.
A. Primary Certification

In addition to accredited pathology training, all applicants for primary certification must meet the credential training/experience requirement of 1 full year of clinical training, clinical experience, or clinically related research (see Section IV, The Credentialing Year).

1. Training. The candidate must satisfactorily complete pathology training in a program accredited by the ACGME as outlined.
   a. Combined Anatomic and Clinical Pathology (APCP) Certification
      Four full years of full-time, approved training in an accredited APCP-4 program that includes at least 18 months of formal (structured) training in anatomic pathology and 18 months of formal (structured) training in clinical pathology, and either an additional 12 months of full-time, continued formal (structured) training in anatomic pathology or 12 months of full-time approved flexible training in a specialty facet of pathology as part of the defined 4 year accredited APCP training program.
   b. Anatomic Pathology (AP) Certification
      1. Three full years of full-time, approved training in anatomic pathology in an accredited APCP-4 or AP-3 program that includes at least 24 months of formal (structured) training in anatomic pathology, and either an additional 12 months of full-time, continued formal (structured) training in anatomic pathology or 12 months of full-time approved flexible training in a specialty facet of pathology as part of the defined accredited training program.
      2. Primary certification in clinical pathology and 2 full years of full-time, approved training in anatomic pathology in an accredited APCP-4 or AP-3 program, with at least 18 months being formal (structured) training in anatomic pathology. Six months may be full-time approved training in a specialty facet of pathology as part of the defined accredited training program.
   c. Clinical Pathology (CP) Certification
      1. Three full years of full-time, approved training in clinical pathology in an accredited APCP-4 or CP-3 program that includes at least 24 months of formal (structured) training in clinical pathology, and either an additional 12 months of full-time, continued formal (structured) training in clinical pathology or 12 months of full-time approved flexible training in a specialty facet of pathology as part of the defined accredited training program.
      2. Primary certification in anatomic pathology and 2 full years of full-time, approved training in clinical pathology in an accredited APCP-4 or CP-3 program, with at least 18 months being formal (structured) training in clinical pathology. Six months may be full-time approved training in a specialty facet of pathology as part of the defined accredited training program.

2. Experience. Only under special circumstances will experience credit be given toward the pathology training requirements for primary certification. Two months of full-time practice experience in pathology acceptable to the ABP is equivalent to 1 month of accredited pathology training. The substitution of experience credit for a portion of accredited pathology training requires the assessment and approval of the director of the pathology training program to ensure that such will permit the continuation of an adequate broad experience of good quality in anatomic and/or clinical pathology.

Under exceptional circumstances, credit for extensive full-time pathology practice experience in a country other than the United States or Canada may be granted toward the requirements for primary certification, provided that the candidate has...
had a total of 8 years of full-time practice experience in pathology acceptable to the ABP, with at least 4 years having been in the United States or Canada. For AP qualification, the experience must have been in the actual practice of AP; for CP, in the actual practice of CP; and for combined AP/CP, 4 years in AP and 4 years in CP.

3. Advanced Pathology Training Credit Mechanisms. Under special circumstances, advanced credit will be given by the mechanisms described. The acceptance of advanced credits as substitutes for accredited pathology training toward primary certification is not automatic and is evaluated on an individual basis. Credit is given only for activities that have occurred in either the United States or Canada. The total combined period of advanced pathology training credit allowed for paragraphs a, b, and c in this section will not exceed 1 year (12 months) and can only be applied to the flexible year of required pathology training necessary for certification in AP/CP, AP, or CP.

To avoid any misunderstanding, potential applicants should communicate with the office of the ABP early in the training period to ascertain if credit may be acceptable.

The training program director will be asked to assess the proposal and to provide a recommendation as to the amount of credit that the director believes the candidate should receive.

The Board will notify the director of the pathology training program of such potential credit. Prior to admission to the certifying examination, the director of the final year of training must certify that the candidate is fully qualified to sit for the examination.

a. Student fellowship training during medical school. Credit toward the training requirements for primary certification may be granted for medical student fellowship training or research taken after successful completion of the medical school course in pathology. Provided the candidate did not receive credit for research toward graduation from medical school that the training was full-time and is validated by the director of the student fellowship program, and that it is approved as an acceptable experience by the director of the accredited pathology training program in which the candidate is registered. The training or research must take place in a department of pathology that has an accredited training program. No credit is given for elective or for courses that are part of the medical school curriculum.

b. Candidates holding a PhD degree in a specialty discipline of pathology or a basic science related to pathology may under certain circumstances obtain pathology training credit regardless of whether it was received before or after the medical degree. The evaluation and approval of the amount of training credit will depend on an assessment by the ABP regarding the relevance of the subject to anatomic or clinical pathology.

c. Research with a direct application to the practice of anatomic or clinical pathology, and not leading to an advanced degree, may be considered for credit not to exceed 1 year (12 months) in combination with other advanced credits. The research must be full-time. No credit is given for research employment as a technician or technologist. The ABP encourages research and believes that all candidates should carry on investigation, teaching, and the publication of scientific papers during primary training.

4. Post Pathology Course Fellowship—criteria for acceptance. Under certain circumstances, candidates may receive advanced pathology training credit toward the primary certification requirements for post pathology course fellowship training in pathology. Such credit is NOT given toward the requirements for special or added qualification certification. The credit is assessed on an individual basis. Granted credit will be assigned to the flexible year of required primary training. Credit will not be given toward the required 18 months of formal (structured) anatomic pathology training or the required 18 months of formal (structured) clinical pathology training necessary to qualify for combined anatomic and clinical pathology certification.

Advanced credit toward single certification in anatomic pathology or single certification in clinical pathology will be given toward the flexible year of required pathology training and not toward the 24 months of required formal (structured) training. The guidelines for acceptable post pathology course fellowship training for credit are:

a. Fellow must have fully and satisfactorily completed the sophomore year of medical school.

b. Fellow must not receive credit for fellowship activities toward the requirements for graduation from medical school.

c. Training must be full-time in a department of pathology that has a fully accredited pathology training program.

d. Training must be under the direction of the director of the pathology training program or the chairman of the department of pathology.

e. A description of proposed activities, responsibilities, and assignments for anatomic pathology, clinical pathology, and research must be available and on file prior to beginning of fellowship. If a formal institutional program exists, a copy should be filed with the ABP.

f. A validation and evaluation report must be submitted on completion of the fellowship by the program director or chairman of the department of pathology if the fellow wishes credit toward certification requirements.

5. Additional Training or Experience. A candidate for primary certification who has completed the required pathology training 5 years or more prior to the date of submission of an application for examination must have either 1 year of additional training in pathology in a program accredited for such training by the ACGME or 2 full years of additional practice experience in pathology in the United States or Canada in a situation acceptable to the Board. This additional requirement must be met during the 5-year period immediately preceding the date of submission of an application.

B. Special Qualification Certification

All candidates applying for special qualification certification must hold a primary certificate from the ABP or, where permissible, from another primary medical specialty Board of the American Board of Medical Specialties (ABMS).

Credit is not given for pathology training taken outside the United States and Canada. Also, credit is not given for training in areas of special qualification that were part of the training program leading to the requirements necessary to qualify to sit for the primary examination in AP and/or CP.

No advanced credit will be given toward the requirements for special qualification certification by the mechanisms described in Section III A 3, Advanced Pathology Training Credit Mechanisms.

1. Blood Banking/Transfusion Medicine (BB/TM)

a. Applicants who hold a certificate in anatomic and clinical pathology, clinical pathology only, or a primary certificate plus a special qualification certificate in hematology from another primary medical specialty Board of ABMS

1. One full year of additional training in blood banking/transfusion medicine in a program accredited for such training by the ACGME or approved for such training by the ABP or

2. Two additional years of full-time experience or its equivalence in blood banking/transfusion medicine under circumstances acceptable to the ABP.
b. Applicants, other than those described in 1a, who hold a primary certificate from a primary medical specialty Board of ABMS: 2 years of full-time training in blood banking/transfusion medicine in a program accredited for such training by the ACGME.

c. Applicants seeking combined certification in clinical pathology and blood banking/transfusion medicine (CP/BB/PM): see Section III D, Combined Primary and Subspecialty Certification.

2. Chemical Pathology (Chem P)
a. Applicants who hold a certificate in anatomic and clinical pathology or clinical pathology only:
   1. One full year of additional training in chemical pathology in a program accredited for such training by the ACGME or approved for such training by the ABP or
   2. Two additional years of full-time experience or its equivalence in chemical pathology under circumstances acceptable to the ABP.

b. Applicants, other than those described in 2a, who hold a primary certificate from a primary medical specialty Board of ABMS: 2 years of full-time training in chemical pathology in a program accredited for such training by the ACGME.

c. Applicants seeking combined certification in clinical pathology and chemical pathology (CP/Chem P), see Section III D, Combined Primary and Subspecialty Certification.

3. Dermatopathology (DP)
Certificate in dermatopathology is a joint and equal function of the ABP and the American Board of Dermatology (ABD). Such function relates to qualifications of candidates, standards of examinations, and the form of the certificate.

All candidates applying for examination must hold a currently valid, full, and unrestricted license to practice medicine or osteopathy in either the United States or Canada.

a. Prerequisites
   The ABP and the ABD will admit candidates to examination for certificates of special qualification in dermatopathology who are otherwise qualified and who have met one of the following requirements:
   1. Applicants who are diplomats of the ABP and the ABD.
   2. Applicants already holding a primary certificate from the ABP (anatomic pathology, or combined anatomic and clinical pathology) or the ABD and the addition of at least 1 year of training in dermatopathology in a program accredited for such training by the ACGME. This additional training must be taken after the candidate has met the full training requirements for certification in pathology or dermatology.

b. Training
   Training programs in dermatopathology are a joint and equal function of the departments of pathology and dermatology. The pathologist applicant must spend one-half of the required training in clinical dermatology.

Committee for Dermatopathology
Ronald J Barr, MD, Orange, California
Merle W Delmer, MD, San Antonio, Texas
Mark A Everett, MD, Oklahoma City, Oklahoma
Loren E Golitz, MD, Denver, Colorado
Dwight K Oxley, MD, Wichita, Kansas
Kay Herrin Woodruff, MD, San Pablo, California

Candidates may obtain an application as follows
Pathologists
William H Hartman, MD
Executive Vice President
American Board of Pathology
PO Box 25915
Tampa, FL 33622-5915

4. Forensic Pathology (FP)
a. Applicants who hold a certificate in anatomic and clinical pathology, anatomic pathology only, or in special instances, clinical pathology only:
   1. One full year of additional supervised training in forensic pathology for such training by the ACGME or approved for such training by the ABP or
   2. Two additional years of full-time experience in forensic pathology or its equivalence in a situation comparable to that of a program accredited for such training by the ACGME.

b. Applicants seeking combined certification in anatomic pathology and forensic pathology (AP/FP), see Section III D, Combined Primary and Subspecialty Certification.

5. Hematology (HEM)
a. Applicants who hold a certificate in anatomic and clinical pathology, clinical pathology only, or a primary certificate plus a special qualification certificate in hematology from another primary medical specialty Board of ABMS:
   1. One full year of additional supervised training in hematology (pathology) in a program accredited for such training by the ACGME or approved for such training by the ABP or
   2. Two additional years of full-time experience or its equivalence in clinical laboratory hematology under circumstances acceptable to the ABP.

b. Applicants, other than those described in 5a, who hold a primary certificate from a primary medical specialty Board of ABMS: 2 years of full-time training in hematology (pathology) in a program accredited for such training by the ACGME.

c. Applicants seeking combined certification in clinical or anatomic pathology and hematology (CP/HEM, AP/HEM): see Section III D, Combined Primary and Subspecialty Certification.

6. Immunopathology (IP)
a. Applicants who hold a certificate in anatomic and clinical pathology
   1. One full year of additional supervised training in immunopathology in a program accredited for such training by the ACGME or approved for such training by the ABP or
   2. Two additional years of full-time experience in immunopathology or its equivalence under circumstances acceptable to the ABP.

b. Applicants who hold a certificate in anatomic pathology only or clinical pathology only:
   1. Two full years of additional supervised training in immunopathology in a program accredited for such training by the ACGME or approved for such training by the ABP or
   2. Four additional years of full-time experience in immunopathology or its equivalence under circumstances acceptable to the ABP.

c. Applicants who hold a certificate in anatomic pathology only or clinical pathology only plus a certificate of Special Qualification in blood banking/transfusion medicine, hematology, medical microbiology, or chemical pathology
   1. One full year of additional supervised training in immunopathology in a program accredited for such training by the ACGME or approved for such training by the ABP or
2. Two additional years of full-time experience in immunopathology or its equivalent under circumstances acceptable to the ABP.

d. Applicants seeking combined certification in anatomic pathology or clinical pathology and immunopathology (AP/PP, CP/IP), see Section III D, Combined Primary and Subspecialty Certification.

7. Medical Microbiology (MMB)

a. Applicants who hold a certificate in anatomic and clinical pathology, clinical pathology only, or a primary certificate plus a special qualification certificate in infectious disease from another primary medical specialty Board of ABMS

1. One full year of additional training in medical microbiology in a program accredited for such training by the ACGME or approved for such training by the ABP or

2. Two additional years of full-time experience or its equivalent in clinical laboratory medical microbiology under circumstances acceptable to the ABP.

b. Applicants, other than those described in 7a, who hold a primary certificate from a primary medical specialty Board of ABMS: 2 full years of full-time training in medical microbiology in a program accredited for such training by the ACGME.

c. Applicants seeking combined certification in clinical pathology and medical microbiology (CP/MMB); see Section III D, Combined Primary and Subspecialty Certification.

8. Neuropathology (NP)

a. Applicants who hold a certificate in anatomic and clinical pathology, or anatomic pathology only: 2 full years of additional supervised training in neuropathology in a program accredited for such training by the ACGME or approved for such training by the ABP.

b. Applicants who hold a certificate in clinical pathology or a primary certificate from another primary medical specialty Board of ABMS

1. One full year of approved training in anatomic pathology in a program accredited for such training by the ACGME or approved for such training by the ABP, plus

2. Two full years of additional supervised training in neuropathology in a program accredited for such training by the ACGME or approved for such training by the ABP.

c. Applicants seeking combined certification in anatomic pathology and neuropathology (AP/NP), see Section III D, Combined Primary and Subspecialty Certification.

9. Pediatric Pathology (PP)

a. Applicants who hold a certificate in anatomic and clinical pathology or anatomic pathology only from the ABP or anatomic pathology or general pathology from The Royal College of Physicians and Surgeons of Canada

1. Two full years of additional supervised training in pediatric pathology in a program accredited for such training by the ACGME or approved for such training by the ABP or

2. Four additional years of full-time practice experience in pediatric pathology or its equivalent in a situation offering experience opportunities comparable to those of an accredited or approved training program in pediatric pathology and acceptable to the ABP.

b. The pediatric pathology training or experience should occur after the completion of the full training requirements necessary to qualify for certification in AP/CP or AP.

C. Added Qualification Certification

All candidates applying for added qualification certification must hold a primary certificate from the ABP.

Credit is not given for training or experience occurring outside the United States and Canada. Also, credit is not given for training in an area of added qualification that was part of the training program leading to the requirements necessary to qualify to sit for the primary examination in AP or AP/CP.

No advanced credit will be given toward the requirements for added qualification certification by the mechanisms described in Section III A 3, Advanced Pathology Training Credit Mechanisms.

1. Cytology, Cytology (CP)

a. Applicants who hold a certificate in anatomic pathology or combined anatomic and clinical pathology

1. One full year of full-time supervised training in cytopathology in a program accredited for such training by the ACGME or approved for such training by the ABP, or

2. Two years of full-time experience in cytopathology or its equivalent under circumstances acceptable to the ABP.

b. Applicants seeking combined certification in anatomic pathology and cytopathology (AP/CYP), see Section III D, Combined Primary and Subspecialty Certification.

D. Combined Primary and Subspecialty Certification

Under certain circumstances, special qualification or added qualification training may be arranged in conjunction with the primary training requirements, permitting a candidate to qualify for a combined certificate. All applicants for combined certification must also meet the additional credentialing/experience requirement of 1 year of clinical training, clinical experience, or clinically related research. (See Section IV, Credentialing Year.)

Advanced credit will not be given toward the requirements for combined certification (invoking primary training and special or added qualification training) by the mechanisms described in Section III A 3, Advanced Pathology Training Credit Mechanisms.

- The acceptable combinations of certification and the required training are

1. Anatomic pathology and forensic pathology (AP/FP)—2 full years of approved training in anatomic pathology in a program accredited for such training by the ACGME and 1 full year of approved training in forensic pathology in a program accredited for such training by the ACGME and 1 additional year of approved training in anatomic pathology or in one of the specialty areas of pathology such as neuropathology, toxicology, or chemical pathology.

2. Anatomic pathology and neuropathology (AP/NP)—two full years of approved training in anatomic pathology and 2 full years of approved training in neuropathology in a program accredited for such training by the ACGME with adequate experience in diagnostic neuropathology.

3. Anatomic pathology and hematology (AP/HEM)—2 full years of approved training in anatomic pathology in a program accredited for such training by the ACGME and 2 full years of approved training in hematology in a program accredited for such training by the ACGME with adequate training or experience in the clinical pathology aspects of hematology.

4. Anatomic pathology and immunopathology (AP/IP)—2 full years of approved training in anatomic pathology in a program accredited for such training by the ACGME and 2 full years of approved training in immunopathology in a program accredited for such training by the ACGME.

5. Clinical pathology (CP) plus special qualification—3 full years of approved training in clinical pathology in a program accredited for such training by the ACGME plus 1 full year of approved special qualification training in blood banking/ transfusion medicine, chemical pathology, hematology, or medical microbiology in a program accredited for such training by the ACGME as defined in Section III B, Special Qualification Certification, or 2 full years of approved training in clinical pathology plus 2 full years of approved special qualification training in blood banking/ transfusion medicine, chemical pathology, hematology,
immunopathology, or medical microbiology in a program accredited for such training by the ACGME as defined in Section III B, Special Qualification Certification.

6. Anatomic pathology and cytopathology (AP/CYP)—3 full years of approved training in anatomic pathology in a program accredited for such training by the ACGME and 1 full year of approved training in cytopathology in a program accredited for such training by the ACGME or approved for such training by the ABP.

IV. Credentialing Year

The requirement of 1 full year of clinical training, experience, or clinically related research is in addition to the required pathology training in an accredited program. It must be taken after having obtained the medical degree.

The ABP considers the most appropriate and, for applicants, the most beneficial approach to meeting this requirement to be 1 full year of full-time, approved clinical training in the United States or Canada (Pathway A). The Board recognizes that such is not always possible and thus offers alternate pathways to meeting the requirement.

The requirement can be met by

A. One full year of full-time, approved graduate medical education in a transitional year training program; or in a clinical area of medicine such as internal medicine, surgery, obstetrics and gynecology, pediatrics, emergency medicine, or family practice, or

B. One full year of full-time research in pathology or in another clinical discipline, provided that the research was done in the United States or Canada and has clearly defined clinical implications. The guidelines for acceptance of research activity are

1. Research activity must have taken place after the candidate has obtained a recognized medical degree.
2. The candidate must have a clearly defined investigator role in the research program.
3. The research must involve patients directly, or materials obtained from patients, or techniques that can be applied directly to the diagnosis of human disease or to the understanding of the basic mechanisms of disease.
4. Prospective approval of a research program for credentialing credit must be given in writing by the director of the pathology training program.
5. Credit for research activity prior to entering a pathology training program must be approved by the director of the pathology training program and the ABP. Such research must have occurred in an institution in the United States or Canada, or

C. One year of training in one of the recognized specialty fields of pathology that includes clinical correlation and patient contact (this year cannot be used to meet the requirements for both the credentialing year and special or added qualification certification), or

D. The satisfactory completion of 1 full year of a combination of clinical training, clinical experience, clinical research, or subspecialty pathology training in addition to the required pathology training necessary to qualify for certification in anatomic and clinical pathology anatomic pathology, or clinical pathology. The training director is responsible for defining and justifying this year of clinical activity to the ABP. In meeting the credentialing year requirement by combinations of pathways A, B, and C, the ABP recommends that the period of activity be at least 4 months in duration wherever possible.

Under certain circumstances, credit toward the credentialing year may be given for a pathology experience if the applicant holds a primary certificate in pathology issued by the independent national certifying body in a country other than the United States or Canada and provided that the certification was by national examination following 4 full years of approved training in pathology.

Clinical Training Outside the United States and Canada

Under certain circumstances, clinical training taken in countries other than the United States and Canada may be acceptable toward meeting the ABP credentialing year, provided that the following criteria are fully met and validated:

1. The clinical training was taken after obtaining a medical degree acceptable to the ABP.
2. Satisfactory completion of 1 full year of full-time training in clinical medicine in a multidisciplinary training program (internship) or in a training program in internal medicine, pediatric medicine, general surgery, or obstetrics and gynecology.
3. Proof from the training institution that the program in question has been inspected and approved for graduate medical education.
4. Indication from the director of the clinical training program that the candidate was registered in the program, completed the training satisfactorily, and was the physician of record in the diagnosis and treatment of patients throughout the full 12 months.
5. Recommendation from the pathology program director in regard to the person's request.

The acceptability of clinical training toward meeting the ABP requirements is assessed on an individual basis, and it is imperative that an opinion be obtained from the ABP well in advance of the submission of an application for certification. The amount of advanced credit for clinical training outside the United States and Canada toward the ABP requirements for certification cannot exceed a total of 12 months.

It is the responsibility of the person seeking credit to ensure that all validating items for these criteria are submitted to the ABP for consideration. No assessment of possible credit will be given until all validating and reference information has been received

Application for Examination

Requests for application forms must be made in writing to the office of the ABP. Completed original forms should be returned with the required credentials and the application-examination fee. An application cannot be given consideration unless it is accompanied by the application-examination fee.

Fees

The application-examination fee schedule for 1995 is as follows

- Anatomic pathology only $1,000
- Clinical pathology only $1,000
- Anatomic pathology portion of combined AP/CY $1,000
- Clinical pathology portion of combined AP/CY $1,000
- Combined anatomic and clinical pathology $1,200
- Special qualification $1,200
- Added qualification $1,200
- Anatomic or clinical pathology combined with special qualification or added qualification (both parts taken at one sitting) $1,400

The application-examination fee includes a nonrefundable processing fee of $100. If the different divisions of the AP/CY and the combined primary and special or added qualification examinations are taken at separate sittings, there is a separate examination fee for each sitting. If the candidate fails in the examination, admission to a repeat examination is permitted, but any reexamination must occur within the 3-year period of qualification described under Qualification Period for Examination. The applicant must pay the examination fee according to the current fee schedule before another examination will be given. If, after having applied for a specific examination, the candidate requests a transfer in writing to a
future examination prior to the final filing date, there is a transfer fee of $100.

In the event of the candidate’s illness at the time of the examination, validated by the candidate’s attending physician, a major portion of the application-examination fee will be either transferred to the next examination or refunded.

Vacation, Maternity, and Other Leave
Each institution sponsoring a pathology training program may develop individual sick, vacation, and other leave policies for the resident. However, one year of approved training credit toward ABP certification requirements must be 52 weeks in duration and must include at least 48 weeks of full-time pathology training. Furthermore, unused vacation and other leave time may not be accumulated to reduce the overall duration of training.

Irregular Behavior
In the interest of protecting the integrity of the ABP and its certification examinations, the following irregular behaviors may be sufficient to bar a person from future examinations, to terminate one’s participation in the examination, to invalidate the results of one’s examination, to cause the withholding or revocation of one’s score or certificate, or to merit other appropriate action by the Board.
1. The giving or receiving of aid in the examination as evidenced by either observation or by statistical analysis of candidates’ answers.
2. The unauthorized possession, reproduction, or disclosure of any ABP examination-related materials, including, but not limited to, examination questions or answers, before, during, or after the examination; and/or
3. The offering of any benefit to any agent of the Board in return for any right, privilege, or benefit that is not usually granted by the Board to other similarly situated candidates or persons.

In addition, the Board may withhold a candidate’s scores and require that the candidate retake one or more portions of the examination presented with sufficient evidence that the security of the examination has been compromised, notwithstanding the absence of any evidence of the candidate’s personal involvement in such activities.

Chemical Dependency
Applications for certification from persons who have had a history of chemical dependency as reported to the Board will not be accepted unless the applicant submits documented evidence acceptable to the Board that the disease is known to be under control for 5 years from the time of its most recent occurrence.

Candidates who have been declared qualified to sit for the certifying examination and who have a current problem of chemical dependency as reported to the Board will not be admitted to examination. Denial of admission to examination may result in the loss of opportunities for examination and, ultimately, in the decision to declare the candidate’s application void for failure to complete the requirements for certification within the qualification time period allotted to every candidate.

Qualification Period for Examination
The ABP does not recognize or use the term “Board-eligible” and does not issue statements concerning “Board eligibility.” An applicant is declared qualified for examination only after a formal application has been received and approved by the Credentials Committee.

The ABP will permit a candidate who has qualified for examination on the basis of approved training and/or experience to sit for the examination during a period not to exceed 3 years after being declared qualified to take the examination. When this period has expired, additional periods of qualification for examination will be permitted upon submission of documented evidence that the candidate has obtained further training or experience subsequent to the termination of the period of qualification. This must be in the form of an additional year of approved training in an accredited program or 2 years of experience acceptable to the ABP. The additional training or experience must be in the area of pathology in which the candidate was unsuccessful.

At any time after declaring a candidate qualified for examination, the Credentials Committee, at its discretion, may withdraw such qualification or, as a condition, may require satisfaction by the candidate of specified conditions. In the exercise of its discretion under this regulation, the Credentials Committee shall be entitled to act without reason assigned.

If it is determined that an applicant has falsified information in the application form, the applicant will not be approved for the certifying examination and must wait a period of 3 years before being permitted to file a new application. The applicant will not be considered qualified to sit for the certifying examination during the 3-year interim.

Examination Dates and Sites
Examinations are held at the discretion of the Board. The tentative schedules for forthcoming examinations are:

Anatomic and Clinical Pathology Examinations
May 15, 16, 17, 1995—Indianapolis, Indiana
November 6, 7, 8, 1995—Dallas, Texas
May 21, 22, 23, 1996—Chicago, Illinois

Examinations for Special and Added Qualification
The examinations for special qualification in clinical pathology, medical microbiology, and immunopathology will be given every 2 years. Examinations will be given in 1995 and every other year thereafter.

May 18, 1995—Indianapolis, Indiana
FIP, HEM, IP, NP, PP, CYP
After July 1, 1995 (dates to be determined)
BB/MTM, Chem P, MMB

Dermatopathology Examination
The dermatopathology examination is scheduled separately at a time and place mutually agreed upon by the ABP and the ABD.

The examination in dermatopathology will be given every 2 years. An examination will be given in 1995 and every other year thereafter.

October 20, 1995—Chicago, Illinois

Final Filing and Cutoff Dates
The final filing dates for receipt of applications or registrations are as follows:
February 1 for spring examinations
April 1 for summer examinations
August 1 for fall examinations
June 1 for dermatopathology examinations

If the candidate cancels an appearance for the examination after these dates or does not appear for the examination, the entire application-examination fee is forfeited.

Issuance of Certificate
Upon satisfactorily passing the appropriate examination(s), a candidate will be issued a certificate by the ABP in those fields of pathology for which the ABP accepted the credentials. Thus, a candidate who is qualified for the combined examination in anatomic and
Clinical pathology, having fulfilled the minimum pathology requirement of 48 months and the credentialing clinical requirement of 12 months will receive a certificate only after both parts (anatomic and clinical pathology) of the examination have been passed.

Candidates qualified for examination in anatomic or clinical pathology, and a specialty area of pathology, and claiming qualification on the basis of the required training in each area will receive a certificate only after each of the examinations has been passed.

A candidate who has fulfilled all the prerequisites, including the minimal requirement of 36 months of approved training in anatomic pathology only or clinical pathology only, plus the 12 credential months of activity, will receive a certificate after passing the examination in anatomic pathology or in clinical pathology.

If a candidate's certificate is lost or destroyed, the ABP will issue a duplicate certificate upon written request and justification, together with the necessary engraving and handling charge of $50.

Revocation of Certificate

In its discretion, the ABP may revoke a certificate for due cause, including, but not limited to, the following causes:

1. The candidate did not possess the required qualifications and requirements for examination, whether or not such deficiency was known to the ABP or any committee thereof prior to examination or at the time of the issuance of the certificate, as the case may be.

2. The candidate made a material misstatement or withheld information in his or her application or in any other representation to the ABP or any committee thereof, whether intentional or unintentional.

3. The candidate engaged in irregular behavior in connection with an examination of the ABP (as described under "Irregular Behavior"), whether or not such practices had an effect on the performance of the candidate on an examination.

4. The candidate was convicted by a court of competent jurisdiction of any felony or misdemeanor involving moral turpitude and, in the opinion of the ABP, having a material relationship to the practice of medicine, or

5. There has been a limitation or termination of any right of the candidate associated with the practice of medicine in any state, province, or country, including the imposition of any requirement of surveillance, supervision, or review by reason of violation of a medical practice act or other statute or governmental regulation, disciplinary action by any medical licensing authority, entry into a consent order, or voluntary surrender of license.

Revocation of certificates shall be governed by procedures set forth in the ABP Bylaws as amended from time to time.

Update of ABP Certificate

The ABP will permit diplomates of the Board to retake the examination in the area of pathology in which they are already certified for the purpose of updating their certificate(s). The examination fee and the passing requirements are the same as for initial candidates. Successful candidates will be issued new, currently dated certificates.

Limitation of SO/AO Certificates

As a condition of admission to an examination for special or added qualification in pathology, an individual holding two or more certificates of special competence, special qualification, and/or added qualification shall surrender a sufficient number of certificates to reduce their number to one. In the event that the individual fails the examination and the period of Board qualification terminates, the surrendered certificate(s) shall be restored. This action does not include certificates of Special Competence (Qualification) in Radios isotopic Pathology or in Dermatopathology.

Candidates With Disabilities

1. Policy. The ABP supports the intent of the Americans with Disabilities Act. The Board will endeavor to provide qualified Board candidates who have documented disabilities the necessary auxiliary aids and services that do not fundamentally alter the measurement of the skills or knowledge the Board examination is intended to test or result in an undue burden.

2. Documentation of Disability. Board candidates requesting an accommodation due to a disability must provide documentation of the disability. Such documentation should include a specific diagnosis of the disability and include medical records or other documentation of the diagnosis of the disability by an appropriate medical professional. The ABP reserves the right to verify the disability and to request additional documentation as necessary. All required documentation acceptable to the Board must be received in the Board Office no later than the application deadline.

3. Type of Accommodation. Board candidates requesting an accommodation must identify the type of accommodation requested. The Board, however, will determine the type of accommodation to be made for a candidate with a verified disability. Accommodations that fundamentally alter the measurement of skills or knowledge that the examination is intended to test will not be offered.

4. Application Deadline. Candidates requesting accommodations are urged to contact the Board as far in advance of the examination as possible. Requests for accommodation and documentation of disability must be received no later than the application deadline.

Appeals Procedure

An individual who has received an unfavorable ruling regarding qualification to take the examination may initiate an appeal of such determination by making a written request for reconsideration to the ABP office within 90 days of the date such ruling was mailed. A candidate who fails a certifying examination may request that the examination be rescord to verify the accuracy of the results as reported. Such request must be made in writing within 90 days of the date of mailing of the results of the examination to the candidate and must be accompanied by the fee of $50 per certifying examination or part thereof. There shall be no further appeal from failure of an examination.

American Board of Pediatrics

Robert K Kelch, MD, Chairman, Iowa City, Iowa
Catherine DeAngelis, MD, Chairman-Elect, Baltimore, Maryland
Herbert T Abelson, MD, Secretary-Treasurer, Seattle, Washington
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Thomas L W Roe, MD, Eugene, Oregon
Sara Rosenbaum, JR, Washington, District of Columbia
Jon B Tingelstad, MD, Greenville, North Carolina
Walter W Tunnessen, Jr, MD, Philadelphia, Pennsylvania
Grace S Wolff, MD, Miami, Florida

(These criteria are subject to change. All applicants are advised to consult the American Board of Pediatrics [ABP] to ascertain any changes that may have been made, especially before undertaking any variations in the training program.)

Requirements for Admission to Examination
An applicant for examination for certification must meet the following general requirements

1. The applicant must be a graduate of an accredited medical school in the United States or Canada or of a foreign medical school that is listed by the World Health Organization (WHO).

2. For a new applicant, a valid (current), unrestricted license to practice medicine in one of the states, districts or territories of the United States or a province of Canada is a requirement for admission to the examination, but it may be submitted separately from the initial application.

For an applicant who is reregistering, a copy of the license must be on file in the ABP office before reregistration material is sent unless a waiver of the requirement has been granted.

If an applicant has any action pending regarding the right to have an unrestricted license to practice medicine, admission to the examination may be denied.

3. The applicant must complete 3 years of pediatric training in programs accredited by the Accreditation Council for Graduate Medical Education (ACGME) on the advice of the Residency Review Committee for Pediatrics (RCPSC) or in programs in Canada accredited by the Royal College of Physicians and Surgeons of Canada (RCPSC).

4. The ABP will require program directors to verify satisfactory completion of training and to evaluate the acceptability of the applicant as a practitioner of pediatrics.

5. The ABP reserves the right to withhold permission to take its examinations and/or certification in the event of circumstances demonstrating that an applicant is not capable of performing the role of physician and advocate for infants, children, and adolescents. In such instances, the applicant will be notified; the applicant may appeal the decision to the Credentials Committee of the ABP.

Graduation From Medical School
The applicant must be a graduate of a medical school that has been accredited by the Liaison Committee on Medical Education (LCME) in the United States, by the RCPSC, in Canada or by the American Osteopathic Association (AOA).

An applicant who is a graduate of a medical school that has not been accredited by the LCME, RCPSC or AOA, but is listed by WHO, may apply for examination if he/she has a standard certificate either from the Educational Commission for Foreign Medical Graduates (ECFMG) or the Medical Council of Canada.

The graduate of a foreign medical school must submit a photocopy of the medical school diploma showing the medical degree and the date it was awarded. A certificate showing that the applicant has passed a final examination is not acceptable.

Training Requirements
An applicant must complete 3 years of postgraduate pediatric training in programs accredited by the RCPSC or in Canada, by the RCPSC. The training curriculum must be compatible with the Special Requirements for program accreditation, which are published annually in the Graduate Medical Education Directory. During this period of training, the applicant is expected to assume progressive responsibility for the care of patients. Credit will not be given for training completed before the medical degree is awarded. A year of supervisory experience must be an integral part of the total 3-year program; this year must include 6 months of direct supervisory responsibility in general pediatrics.

The ABP recognizes four levels of pediatric training (PL-1 through PL-4) and defines these levels as follows:

PL-1: The first postgraduate year in general comprehensive pediatric training in an accredited program.

PL-2: The second postgraduate year in general comprehensive pediatric training in an accredited program following PL-1, but with increased responsibility for patient care and for the supervision of junior house staff and medical students.

PL-3: The third postgraduate year in general comprehensive pediatric training in an accredited program, but with increasing responsibility for patient care and supervision of junior house staff and medical students.

PL-4: The fourth postgraduate year in general pediatric training in an accredited program when the applicant is designated as a chief resident.

Special Alternative Pathway
The ABP recognizes that occasionally there will be an exceptional candidate who should be given special consideration to begin subspecialty training after the completion of the PL-2 year of general comprehensive pediatrics. Before the start of the PL-2 year, the department chairman or program director must petition that a resident be considered for the Special Alternative Pathway (SAP), indicating that the candidate has superior overall competence.

There must also be a letter from the subspecialty program director outlining the clinical and research training. In addition, such candidates will be required to take a screening examination. The application material and the score on the screening examination will be reviewed by the Credentials Committee. An applicant who is approved for the SAP may not take the certifying examination until all training (no less than 5 years) is completed.

Training programs: The ABP approves applicants for admission to its certifying process. The ABP does not accredit training programs. Information regarding accreditation should be addressed to Executive Secretary, Residency Review Committee for Pediatrics, 515 N State St, Chicago, IL 60610.

Credit for training in accredited programs other than pediatrics: A physician transferring to pediatric residency training from another accredited residency, eg, family practice, internal medicine, transitional year, must correspond with the ABP to determine whether partial credit may be awarded for this training. Requests for credit must be submitted either by the candidate or the pediatric residency program director before the candidate enters pediatric residency training.

Credit for pediatric training in nonaccredited programs: The ABP has established requirements for a physician who has had at least 3 years of pediatric training in programs not accredited by the RCPSC in foreign training or in accredited osteopathic programs in the United States. The interested physician or the department chairman/program director must write to the ABP before

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1. Throughout the document the term candidate will be synonymous with applicant.
2. Hereafter, accreditation will refer to accreditation by the RCPSC.
Special Programs

Medicine/Pediatrics (Med/Ped) Program
A special agreement exists with the American Board of Internal Medicine (ABIM) whereby an applicant may fulfill the training requirements of both the ABP and ABIM by completing 2 years of accredited training in general comprehensive pediatrics and 2 years of accredited training in general comprehensive internal medicine. The 4 years should be completed in the same combined training program. Exceptions must be approved by both the ABP and ABIM. Continuity clinics in each specialty must be provided throughout the 4 years. Guidelines for combined training have been approved by both the ABP and ABIM and are available by writing either office. A list of institutions offering combined programs is published in the Graduate Medical Education Directory. An applicant may not take the certifying examination of the ABP until all training has been completed.

Pediatrics/Neurology Program
A special agreement exists with the American Board of Psychiatry and Neurology (ABPN) whereby an applicant who completes at least 2 years of accredited training in general comprehensive pediatrics and the neurology training necessary to meet the requirements for certification in neurology with special competence in Child Neurology fulfills the training requirements of both the ABP and the ABPN. An applicant may not take the certifying examination of the ABP until all training has been completed.

Pediatrics/Physical Medicine and Rehabilitation Program
A special agreement exists with the American Board of Physical Medicine and Rehabilitation (ABPMPR) whereby a physician interested in pediatric rehabilitation can qualify for admission to the certifying examinations of both the ABP and ABPMPR. The residency training can be completed in 5 years in programs accredited by the RRCs of ABP and ABPMPR. Proposed programs must be submitted to the ABP and ABPMPR for approval before a candidate can be accepted into the joint training program. All training should be completed at one academic institution; any deviation must be approved prospectively by both the ABP and ABPMPR. Interested applicants may obtain details from either office. An applicant may not take the certifying examination of the ABP until all training has been completed.

Pediatrics/Emergency Medicine Program
A special agreement exists with the American Board of Emergency Medicine (ABEM) whereby an applicant may fulfill the training requirements of both the ABP and ABEM by completing joint training in 6 years. All 5 years should be completed in the same combined training program. Exceptions must be approved by both the ABP and ABEM. Training programs must be approved prospectively by both the ABP and ABEM. Guidelines for combined training have been approved by both the ABP and ABEM and are available by writing to either office. They were published in Annals of Emergency Medicine, 1991;20:98-100. An applicant may not take the certifying examination of the ABP until all training has been completed.

Pediatrics/Psychiatry/Child and Adolescent Psychiatry Program
The ABP, the American Board of Psychiatry and Neurology (ABPN), and the Committee on Certification in Child and Adolescent Psychiatry have formed a committee to accredit programs that will satisfy the training requirements for certification in all three areas. Training includes 24 months of general comprehensive pediatrics, 18 months of child and adolescent psychiatry and 18 months of adult psychiatry. Physicians pursuing training in these programs may take the certifying examination of the ABP in the fall of the fifth year of training, provided that all pediatric training (except continuity clinics) is completed by the date of the examination. Credit for training via this route may be obtained only by training in one of these programs. Further information concerning these combined training programs may be obtained by contacting the ABPN, 500 Lake Cook Rd/St 335, Deerfield, IL 60015.

Graduate school courses: It is a fundamental concept of the ABP that a residency training program should provide for properly organized progressive responsibility for the care of children. The ABP believes that this can be accomplished through continuity of clinical experience under the supervision of attending physicians who are responsible for the care of these children. The substitution of a formal graduate or postgraduate school course that does not carry the essential ingredient of responsibility for patient care is inconsistent with this principle. Accordingly, the ABP will not accept such courses in fulfillment of its training requirements.

Military service: Military assignments will not be accepted in lieu of a year of required training unless served as a resident in a military hospital that is accredited by the RRC.

Special situations: The ABP recognizes that situations may arise that are not explained by the preceding information. A physician may have worked in a pediatric field for many years yet be deficient in the formal training requirements for examination, or a physician may have completed specialized training not explained in the above requirements. In such cases, the individual should present his/her credentials to the ABP, who may ask the Credentials Committee to review them and to decide whether permission should be given to enter the certification process.

Statement of eligibility: If a candidate applies to take the certifying examination and the credentials are approved, the candidate will be considered to be board eligible. The ABP will verify that a physician is certified, not certified or eligible to take the certifying examination. The credentials of an applicant who does not meet the licensure requirement will be disapproved, and he/she will not be board eligible. The application by an applicant that he/she has completed the required training (and, therefore, is board eligible) without review and approval by the ABP is not acceptable.

Tracking, Evaluation, and Verification of Training by Directors of Pediatric Training Programs
The ABP regards the evaluation of trainee competency as a continuum that begins during training and concludes with the certifying examination following formal training. The ABP believes that the program director(s) and faculty play significant roles in the certification process and are the key to a responsible system of determining which applicants should be admitted to the certifying examination. The program director is able to provide a meaningful overview of the resident's professional competence, especially in skills such as clinical judgment, moral and ethical behavior, professional attitudes and behavior, procedural skills, and humanistic qualities.

The ABP resident tracking and evaluation program is part of the certifying process of the ABP. The program director is required to indicate annually whether each resident's performance is satisfactory, marginal, or unsatisfactory. If a resident's performance is unsatisfactory, the resident will not receive credit for that period of training. A marginal evaluation indicates a need for remediation. If a resident receives a marginal rating for 2 consecutive years of training (eg, PL-1 and PL-2), he or she will not receive credit for the second marginal year and will have to repeat that entire year of training. If a resident receives a marginal rating for one year (eg, PL-1) and receives a satisfactory rating for the following year (eg, PL-2), then both the marginal year and the satisfactory year will be considered
to be satisfactory. The resident who receives a marginal rating in the final year of training (eg, PL-3) will be reviewed by the ABP Credentials Committee before being allowed to take the certifying examination in general pediatrics.

The tracking system also identifies residents who transfer from one program to another or to a new specialty and ensures that the new program director recognizes those residents who need remediation.

The ABP requires the program director to verify completion of training and to sign either Statement A or Statement B on the Verification of Clinical Competence Form. Statement A is as follows: "I certify that the above-named applicant has demonstrated the necessary attitudes, knowledge, clinical judgment, technical skills, and interpersonal skills and is judged to be fully prepared for independent responsibility as a general pediatrician; to my knowledge he/she has moral and ethical integrity. The applicant is recommended for examination."

In recommending an applicant for the certifying examination, a program director should keep in mind the definition of a qualified applicant as determined by the ABP:

An applicant shall demonstrate the following abilities as they pertain to infants, children and adolescents:
1. Assessment of the clinical issues and formulation of a management plan for any medical or health maintenance problem
2. Execution of the management plan with the patient and family, without further medical consultation, for all common problems of disease and health maintenance and for all medically life-threatening situations
3. Consultation, when appropriate, with physicians and other professionals regarding common problems and life-threatening situations, and
4. Arrangement for help for the patient and knowledge of what to anticipate from the consultant, being prepared personally to guide further management with assistance, when appropriate, for unusual problems requiring subspecialty, surgical, or other specialized skills.

Each applicant must have verification of training and verification of clinical competence on file in the ABP office to be admitted to the certifying examination. It is the applicant's responsibility to be sure the program director submits all the required documents by the appropriate deadline.

When an applicant has not attained the appropriate knowledge and skills, the program director should sign Statement B on the Verification of Clinical Competence Form. By signing this statement, the program director is recommending that the applicant not be admitted to the certifying examination.

If an applicant's training is not verified and/or he/she is not recommended for admission to the certifying examination, the applicant will be required to complete an additional period of training in general comprehensive pediatrics in an accredited program in the United States or Canada before reapplying to the ABP. The director of the program where the additional training occurred must complete a separate Verification of Clinical Competence Form. Alternatively, the applicant may appeal to the Credentials Committee. The Credentials Committee will gather additional information about the applicant and decide if permission to take the examination should be given. For an appeal, the applicant will be asked to submit copies of certificates of satisfactory completion of training. If the applicant has been denied such certificates, then admission will be refused on the basis of incomplete training. However, possession of such certificates will not automatically admit the person to the ABP's certification process. Most training certificates attest to the achievement of a minimal level of competence or the fulfillment of an employment contract. Therefore, the program director's statement on the Verification of Clinical Competence Form will take precedence over the certificate from the hospital. The ABP must have the program director's assurance that an applicant meets the standards expected of a certified pediatrician. Program directors are urged not to issue certificates of successful completion of training when the resident is deemed not to have met those standards.

The duration of training is 36 months. Absences in excess of 3 months, eg, vacation, sick leave, maternity leave, must be made up unless the program director believes that an absence of more than 6 months is justified, in which case a letter of explanation must be sent for review by the Credentials Committee.

The program director is required to provide further information about the applicant. The program director is asked to evaluate the applicant on a nine-point scale in the following areas: gathering data by history, by physical examination, and by laboratory studies; assessing data and arriving at a diagnosis; managing problems and maintaining health; interpersonal relationships with patients and families; interpersonal relationships with other members of the health team; and work habits and personal qualities.

The program director is asked to rate the applicant's overall clinical competency by indicating which of the following phrases best describes the applicant's ability to care for children in the United States or Canada. In these phrases, the word "manage" is defined as identifying the nature of the problem, determining methods of resolving or alleviating the problem, and carrying out management plans, including the appropriate and timely use of consultants.

1. Unable to manage many pediatric problems including the most routine ones
2. Able to manage only the most routine problems of pediatrics
3. Able to manage the common problems of pediatrics adequately
4. Able to manage most pediatric problems in an effective way
5. Able to manage almost any pediatric problem in a highly effective manner

If the program director signs Statement A but gives a rating of 3 or less in any single area or a rating of 4 or less for overall clinical competency, the Credentials Committee requires that the program director submit documentation with the completed Verification of Clinical Competence Form. If the Credentials Committee agrees with the program director, the applicant must complete an additional period of training in general comprehensive pediatrics in an accredited program either in the United States or Canada before reapplying to the ABP. The director of the program where the additional training occurred must complete a separate Verification of Clinical Competence Form. Alternatively, the applicant may appeal to the Credentials Committee.

Program directors are encouraged to have all residents in their programs take the In-training Examination (ITE). The results of the ITE can provide valuable information for both the resident and the program.

To be compliant with the general requirements for program accreditation established by the ACGME, the program director and the faculty must develop evaluation procedures for assessment of physician performance. Examples are medical record audits, rating scales for assessment of work habits, observational checklists for

*Numbered text reflects an ABP nine-point rating scale, for program director use, indicating the applicant's overall clinical competency.
assessment of technical skills, oral examinations, and consumer questionnaires.

**Disability Policy**
An applicant who wishes to request special accommodations due to a disability should notify the ABP office at the time the application is submitted. The applicant will be sent the ABP policy on disabilities. The deadline for notifying the ABP is May 31, 1995 (postmarked).

**Policy Regarding Chemical Use and Dependency**
An applicant who has a history of chemical dependency, as reported to the ABP, and who submits documentation acceptable to the ABP that the disease is known to be under control for at least 2 years may apply to take a certifying examination provided he/she meets the admission requirements. This policy also pertains to individuals who wish to participate in recertification programs. A candidate may appeal to the Credentials Committee for waiver of the 2-year policy.

An applicant who has a history of chemical dependency as reported to the ABP, who cannot submit documentation acceptable to the ABP that the disease is under control will not be allowed to take the certifying examination or to participate in recertification programs.

**Certifying Examination**
Application material for admission to the certifying examination of the ABP may be obtained by contacting the ABP office. PL-3 residents will be sent an application in early December 1994; residents should contact the ABP office if the application is not received by December 20.

The certifying examination is given once a year in the fall in a number of locations throughout the United States. The examination is a 2-day examination. There are two sessions, each of 3 hours' duration, each day with a lunch break between sessions. The dates of the 1995 certifying examination are October 10–11. Applicants for the certifying examination must complete their training by the date of the examination.

The ABP does not sponsor or maintain records about any courses that claim to be review courses in preparation for its certifying examinations.

The content of the examination for certification is appropriate for the practice of general comprehensive pediatrics. Emphasis is placed on practical aspects; however, good practice is founded on sound scientific knowledge, and the candidate should be prepared to demonstrate an understanding of basic science.

The examination consists of multiple-choice questions. Examples of the types of questions to be used are mailed to registered candidates before the administration of each examination. Some questions on the examination are included for experimental purposes only. These questions will not contribute to the score.

The validity of the performance of candidates on the certifying examination of the ABP is secured by every means available. The ABP office should be contacted in the event of irregular behavior such as giving or obtaining unauthorized information or aid before, during, or after the examination or offering financial or other benefit to a proctor, employee, or agent of the ABP.

Each candidate's examination score will be reported to his/her general pediatric program director. Periodically, the ABP conducts research utilizing data it has compiled, in which case, the candidate's anonymity is guaranteed.

For failing candidates who are concerned that their answer sheets were not scored correctly, hand scoring is available for a fee of $60. However, candidates are not encouraged to request this service since neither mechanical nor computer errors have ever been found. Requests should be made in writing accompanied by check or money order. Hand scoring is available for 11 months following the date of the examination.

Beginning in 1990, a new candidate must achieve certification within 7 years of initial application. Candidates who were admitted to the certification process in 1986–1989 have 10 years to complete the certification process. A candidate who was admitted to the certification process before 1986 and is considered to have active status will have until December 31, 1996, to complete the certification process. A candidate who has not been certified within the time limit will be considered to be inactive and no longer will be board eligible. To regain active (and eligibility) status, a candidate must reaply and pass a reentry examination before being readmitted to the certification program.

For new applicants, the regular registration period begins December 1 and extends through February 28. An application postmarked by February 28, 1995, must be accompanied by the application fee of $1,135 (unless the partial payment plan is being used). Late registration for new applicants begins March 1 and extends through April 29, 1995. An additional nonrefundable late fee of $225 will be required for an application postmarked between March 1 and April 29. New applications that are postmarked after April 29, 1995, will not be accepted.

Regular reregistration begins February 15 and extends through April 29, 1995. Reregistration material postmarked by April 29 must be accompanied by the re-registration fee of $1,035. Late reregistration will begin May 1 and extend through May 31, 1995. An additional nonrefundable late fee of $225 will be required for all reregistration material postmarked between May 1 and May 31, 1995. Reregistration material that is postmarked after May 31, 1995, will not be accepted.

Many deadlines set by the ABP are postmark deadlines. If there is a discrepancy between a meted postmark and an official US Postal Service postmark, the latter will be considered official.

Acknowledgment of receipt of the application will be sent promptly. The ABP office should be contacted if acknowledgment of receipt is not received within 30 days of submission of the application. Applications received by the deadlines will be processed and evaluated, and the ABP will request directors of general pediatric training programs to verify successful completion of training. Applicants who meet the training requirements of the ABP and who are recommended by their program director(s) will be accepted and registered for the certifying examination. An applicant who does not receive notification of the acceptance or rejection of his/her application by August 10 should contact the ABP office to inquire about the status of the application.

**Fees**
The cost of certification includes the following fees, payable only in United States dollars:

- **Fees for New Candidates**
  - Processing and Evaluation: $325
  - Examination: $810
  - Total New Candidate Fees: $1,135

- **Fees for Reregistrants**
  - Processing and Evaluation: $225
  - Examination: $810
  - Total Reregistrant Fees: $1,035

For individuals not using US banks, the fee must be paid in US dollars using one of the following vehicles: (1) money order, (2) cashier's check or (3) certified check. To be accepted for payment, these vehicles must be payable through a US bank.
The ABP offers a program of partial payment of the examination fees for new applicants. The details are provided with the application material.

Applicants should retain their acknowledgment letters and canceled checks as proof of payment. No other receipts will be issued.

If an applicant is not approved to take the ABP certifying examination, the $810 examination fee will be refunded. The processing and evaluation fee is not refundable, nor is the late fee. If the applicant wishes to pursue certification in the future, he/she will be required to complete a new application and submit the full fee again.

After the ABP has accepted an application, the applicant is expected to take the next certifying examination offered. However, an applicant may withdraw by submitting a written notice postmarked no later than August 15, 1995. The applicant will be issued a refund of the examination fee ($810). An applicant whose withdrawal letter is postmarked after August 15 or who does not appear for the examination will forfeit all fees paid and will be required to submit a reapplication fee before being admitted to a future examination. Reregistration material will be sent to approved applicants during the reevaluation period for the next examination.

Certification by the ABP

The ABP awards certificates to those individuals who have met the eligibility requirements, have passed the examination, and have met the following license requirements:

The applicant must have a valid, unrestricted license to practice medicine in one of the states, districts, or territories of the United States or a province of Canada or unrestricted privileges to practice medicine in the United States armed forces. A copy of the valid license must be received by October 6, 1995.

Foreign nationals practising abroad may be exempted from this policy upon presentation of proof of licensure equivalency in the country in which they reside. This proof must be received by October 6, 1995.

The license requirement will be waived if, during the academic year 1995-1996, the applicant is in pediatric subspecialty training, nonpediatric specialty training, or is serving as a chief resident (PL-4) in a state, province, or district in which the medical licensing board does not require an unrestricted license. In order to obtain a waiver, the program director must submit written confirmation of the applicant's training to the ABP by October 6, 1995.

An applicant who takes the certifying examination, but who does not meet the October 6, 1995, deadline for licensure, will have the examination invalidated and he/she will be disqualified, will be board eligible and will not receive a refund of the examination fee.

The names of certified pediatricians, but not their scores, will be sent to appropriate organizations, directories, and journals. The certificate will reflect the candidate's degree at the time of graduation from medical school, eg, MD, MB, BS, or DO. Degrees awarded either before or after graduation from medical school will not be included on the certificate.

Recertification in Pediatrics

In November 1985, the ABP established a policy of time-limited certification. This policy became effective for those individuals certified in general pediatrics and in the subspecialties of pediatrics after May 2, 1988. The Program for Renewal of Certification in Pediatrics (PRCP) is the process by which the ABP recertifies the diplomates in general pediatrics. Diplomates who wish to be issued a new certificate after the 7-year period must successfully complete PRCP for renewal of certification in pediatrics.

Diplomates certified before May 1, 1988, will not be affected by the policy of time-limited certification; however, those who choose to achieve certification renewal on a voluntary basis may do so by completing PRCP; their certification will not be affected if they are not successful in completing PRCP.

Revocation of Certificates

All certificates issued by the ABP are subject to the provisions of the articles of incorporation and the bylaws of the ABP. Each certificate is subject to possible revocation in the event that

1. The issuance of such certificate or its receipt by the physician so certified shall have been contrary to or in violation of any of the provisions of the ABP's articles of incorporation or bylaws, or
2. The physician so certified shall not have been eligible to receive such certificate, irrespective of whether the facts constituting him/her so ineligible were known to any or all of the members of the ABP at the time of the issuance of such certificate, or
3. The physician so certified shall have made any misstatement of fact in his/her application for such certificate or in any other statement or representation to the ABP, its members, representatives, or agents, or
4. The physician so certified shall have been convicted by a court of competent jurisdiction of a felony or of any misdemeanor involving, in the opinion of the Board of Directors, moral turpitude in connection with his/her practice of medicine, or
5. The physician so certified shall have had one or more of his/her licenses to practice medicine revoked or shall have been placed on probation by any court or other body having proper jurisdiction and authority or if the physician surrendered his/her license to avoid disciplinary action, or
6. The physician so certified has repeatedly made statements contrary to sound medical science and practice, raising fundamental questions about his/her competency. If the ABP obtains probable cause to believe that a certificate should be revoked for any of the reasons set forth above, it may institute proceedings for revocation thereof by mailing written notice to the holder of such certificate that a hearing will be held to determine whether the certificate should be revoked. The steps to be taken are outlined in the Rules of Appellate Procedure of the ABP, which may be obtained by writing to the ABP office.

Reinstatement of Certificates

When a certificate issued by the ABP has been revoked, the certificate may be restored once the physician has submitted a request for reinstatement and the Credentials Committee's recommendation for reinstatement is approved by the Board of Directors.

Other Certification

The ABP, in conjunction with the ABIM and its Conjoint Board, the American Board of Allergy and Immunology (ABAI), offers a Certificate of Added Qualifications in clinical and laboratory immunology. Further information may be obtained by contacting the ABAI, University City Science Center, 3624 Market St, Philadelphia, PA 19104.

A Certificate of Added Qualifications in sports medicine is offered by the American Board of Family Practice (ABFP), the ABEM, the ABIM, and the ABP. Further information may be obtained by contacting the ABP.

A Certificate of Added Qualifications in medical toxicology is offered by the ABEM, the ABP, and the American Board of Preventive Medicine. Further information may be obtained by contacting the ABP.

Certification in the Pediatric Subspecialties

The ABP issues a Certificate of Special Qualifications in the following subspecialties: adolescent medicine, pediatric cardiology, pediatric critical care medicine, pediatric emergency medicine,
pediatric endocrinology, pediatric gastroenterology, pediatric hematology-oncology, pediatric infectious diseases, neonatal-perinatal medicine, pediatric nephrology, pediatric pulmonology, and pediatric rheumatology.

**Adolescent Medicine**
Robert W Blum, MD, PhD, Minneapolis, Minnesota
S Jean Emans, MD, Boston, Massachusetts
Sherrei L Hammar, MD, Honolulu, Hawaii
Alber C Hergenroeder, MD, Houston, Texas
Charles E Irwin, Jr, MD, Chairman, San Francisco, California
Iris F Litt, MD, Palo Alto, California

**Pediatric Cardiology**
D Woodrow Benson, Jr, MD, PhD, Chicago, Illinois
Edward B Clark, MD, Rochester, New York
David J Driscoll, MD, Rochester, Minnesota
Howard P Gutgesell, MD, Charlottesville, Virginia
Charles S Kleinman, MD, New Haven, Connecticut
Richard M Schieken, MD, Richmond, Virginia
Rebecca A Snider, MD, Baltimore, Maryland
Norman S Talner, MD, Medical Editor, Pittsboro, North Carolina
Grace S Wolf, MD, Consultant, Miami, Florida

**Pediatric Critical Care Medicine**
Debra H Fiser, MD, Little Rock, Arkansas
Robert W Katz, MD, Albuquerque, New Mexico
David G Nichols, MD, Baltimore, Maryland
Daniel A Noterman, MD, New York, New York
J Julio Perez Foncal, MD, St Louis, Missouri
Ann E Thompson, MD, Chairman, Pittsburgh, Pennsylvania
Jerry J Zimmerman, MD, Madison, Wisconsin
George Lister, MD, Medical Editor, New Haven, Connecticut

**Pediatric Emergency Medicine**
Ronald A Dieckmann, MD, San Francisco, California
Marianne Gausche, MD, Hermosa Beach, California
Jane F Knapp, MD, Kansas City, Missouri
Stephen Ludwig, MD, Philadelphia, Pennsylvania
Robert W Schafermeyer, MD, Chairman, Charlotte, North Carolina
Michael W Shannon, MD, Boston, Massachusetts
Albert Tsai, MD, Minneapolis, Minnesota
Joseph A Weinberg, MD, Germantown, Tennessee
Jonathan I Singer, MD, Medical Editor, Dayton, Ohio

**Pediatric Endocrinology**
Steven D Chernausek, MD, Cincinnati, Ohio
S Douglas Fraser, MD, Sylmar, California
Joseph M Gertner, MD, BCHP, New York, New York
Morey W Hamond, MD, Chairman, Jacksonville, Florida
Stephen H LaFranchi, MD, Portland, Oregon
Lenore S Levine, MD, New York, New York
Edward O Reiter, MD, Springfield, Massachusetts
Louis E Underwood, MD, Medical Editor, Chapel Hill, North Carolina

**Pediatric Gastroenterology**
Susan S Baker, MD, Charleston, South Carolina
John T Boyle, MD, Cleveland, Ohio
Kathleen B Schwartz, MD, Baltimore, Maryland
Judith M Sondheimer, MD, Chairman, Denver, Colorado
Frederick J Suchy, MD, New Haven, Connecticut
James L Sutphen, MD, Charlottesville, Virginia
Jon A Vanderhoof, MD, Omaha, Nebraska
Martin H Ulshen, MD, Medical Editor, Chapel Hill, North Carolina

**Pediatric Hematology-Oncology**
George B Buchanan, MD, Chairman, Dallas, Texas
Edwin N Forman, MD, Providence, Rhode Island
Bertil E Glader, MD, Palo Alto, California
C Thomas Kisker MD, Iowa City, Iowa
Bevery J Lange, MD, Philadelphia, Pennsylvania
Ruth A Seeler, MD, Chicago, Illinois
Susan B Shurin, MD, Cleveland, Ohio

**Pediatric Infectious Diseases**
Carolyn E Hall, MD, Rochester, New York
Richard S Johnston, Jr, MD, White Plains, New York
Sarah S Long, MD, Chairman, Philadelphia, Pennsylvania
Jamer C Overall, Jr, MD, Salt Lake City, Utah
Georges Peter, MD, Providence, Rhode Island
Larry K Pickering, MD, Norfolk, Virginia
Richard J Whitney, MD, Birmingham, Alabama
Julia A McMillan, MD, Medical Editor, Baltimore, Maryland

**Neonatal-Perinatal Medicine**
Roberta A Ballard, MD, Philadelphia, Pennsylvania
Edward F Bell, MD, Iowa City, Iowa
Robert D Christensen, MD, Gainesville, Florida
Thomas N Hansen, MD, Houston, Texas
M Douglass Jones, Jr, MD, Chairman, Denver, Colorado
James A Lemons, MD, Indianapolis, Indiana
Ann R Stark, MD, Boston, Massachusetts
Philip Sunshine, MD, Medical Editor, Palo Alto, California

**Pediatric Nephrology**
Raymond D Adelman, MD, Norfolk, Virginia
Michel G Baum, MD, Dallas, Texas
Barbara R Cole, MD, St Louis, Missouri
Allison A Eddy, MD, Toronto, Ontario, Canada
Craig B Langman, MD, Chicago, Illinois
Michael A Lipska, MD, Chairman, Boston, Massachusetts
Thomas E Novins, MD, Minneapolis, Minnesota
Norman J Siegel, MD, Medical Editor, New Haven, Connecticut

**Pediatric Pulmonology**
Henry L Dorkin, MD, Boston, Massachusetts
Thomas A Hazinski, MD, Nashville, Tennessee
Margaret W Leigh, MD, Chapel Hill, North Carolina
Gerald M Loughlin, MD, Chairman, Baltimore, Maryland
John T McBride, MD, Rochester, New York
Michael A Wall, MD, Portland, Oregon
Robert W Wilmott, MD, Cincinnati, Ohio
Victor Chernick, MD, Medical Editor, Winnipeg, Manitoba, Canada

**Pediatric Rheumatology**
Balu Athreya, MD, Philadelphia, Pennsylvania
Norman T Ilowite, MD, New Hyde Park, New York
Idly M Katona, MD, Bethesda, Maryland
Deborah W Kredich, MD, Durham, North Carolina
Carol B Lindsay, MD, Chairman, Kansas City, Kansas
Daniel B Magliav, MD, Cambridge, Massachusetts
Carol A Wallace, MD, Seattle, Washington
Peter B Dent, MD, Medical Editor, Hamilton, Ontario, Canada
James T Cassidy, MD, Consultant, Columbia, Missouri

**General Criteria for Certification in Pediatric Subspecialties**
In addition to the training requirements, which are specific to each of the pediatric subspecialties, the following are required of candidates seeking certification in the pediatric subspecialties of adolescent medicine, cardiology, critical care medicine, emergency medicine, endocrinology, gastroenterology, hematology-oncology, infectious diseases, neonatal-perinatal medicine, nephrology, pulmonology, and rheumatology. Each candidate must be familiar with specific subspecialty training requirements, as well as the policies.
stated in the current booklet of information, including 3 years of general pediatric training at the PL-1, 2, and 3 levels.

I. General Eligibility Criteria

A. Certification by the ABP

An applicant must take and pass the certifying examination in general pediatrics before being permitted to take a pediatric subspecialty certifying examination. However, the application for the subspecialty certifying examination may be submitted before taking the subspecialty certifying examination in general pediatrics.

B. Licensure

An applicant must have a valid, unrestricted license to practice medicine in any of the states, districts, or territories of the United States, or provinces of Canada, or have unrestricted privileges to practice medicine in the US Armed Forces. A copy of the unrestricted license must accompany the application material. A written request for waiver of this requirement will be considered on a case-by-case basis.

C. Verification of Training

An applicant will be asked to list the program(s) where subspecialty residency training occurred as well as the name(s) of the program director(s). The ABP will send a Verification of Competence Form to the program director(s) for completion. The role of the program director in the certification process is to verify completion of training and to sign the following statement on the Verification of Competence Form:

"I certify that the above named applicant has demonstrated the necessary attitudes, knowledge, clinical judgment, research abilities, technical skills, and interpersonal skills and is judged to be fully prepared for independent responsibility as a pediatric subspecialist; to my knowledge, he/she has moral and ethical integrity. The applicant is recommended for examination."

An applicant must have Verification and/or Evaluation Form(s) on file at the ABP in order to be admitted to the pediatric subspecialty examination. If an applicant's training is not verified and/or he/she is not recommended for admission, the applicant will be required to complete an additional period of subspecialty residency training before reapplying. Alternatively, the applicant may appeal to the Credentials Committee of the Subboard. The Credentials Committee will gather additional information about the applicant and decide if permission should be given to take the examination. For an appeal, the applicant will be asked to submit copies of certificates of satisfactory completion of training. If the applicant has been denied such a certificate, then admission will be refused on the basis of incomplete training. However, possession of such a certificate will not automatically admit the person to the certification process. Most training certificates attest to the achievement of a minimal level of competence or the fulfillment of an employment contract. Therefore, the program director's statement on the Verification of Competence Form will take precedence over the certificate from the institution. No credit toward subspecialty qualification will be allowed for elective time spent in subspecialty areas during the usual general pediatric residency years (PL-1, 2, 3).

An applicant seeking certification in more than one subspecialty on the basis of practice and/or training, may not apply the same period toward fulfillment of the requirements of another pediatric subspecialty.

D. Principles Regarding the Assessment of Meaningful Accomplishment in Research

Each candidate must meet these principles:

1. Research experience is an essential part of the training of subspecialists.

2. The RRC and RCPSC accreditation process must include the evaluation of opportunities for research experience. The Subboards should avoid duplicating RRC functions.

3. A requirement for admission to the certifying subspecialty examination must be evidence of productive research participation.

4. The program director must rate the overall research competence on the Verification of Competence Form. In addition, the program director must provide evidence of meaningful accomplishment in research as defined in paragraph 5 of these Principles.

5. Evidence of meaningful accomplishment in research must be submitted.

a. A list of acceptable evidence should allow the majority of applicants to be approved without putting the Subboard in the position of judging the quality of research efforts.

b. Acceptable evidence could include one of the following:

1) First author of a research paper accepted for publication in a peer-reviewed journal deemed acceptable by the Subboard.

2) Submission of a research grant proposal that has been approved by an extramural organization with a critical review process.

3) A postgraduate degree in a field of science relevant to the subspecialty.

4) A thesis accepted as partial fulfillment of the requirements for a postgraduate degree in a field of science relevant to the subspecialty.

5) A research progress report (signed by both the applicant and preceptor) no more than five pages in length to include (a) a statement of hypothesis, (b) delineation of methodology, (c) results and analysis, and (d) significance of the research. This report could be acceptable in the following situations: where the data were lost; where the research could not be completed because of the nature of the work; or where a research paper had been submitted, but notice of acceptance for publication had not been received. A copy of the manuscript must accompany the progress report. This report will be reviewed by the Credentials Committee.

c. Any other evidence acceptable to the Subboard must be approved by the ABP before it can be included as evidence of productive research and participation.

6. The program director is responsible for notifying all residents of the research requirements necessary for certification upon entry to the subspecialty training program.

7. Subspecialty certifying examinations will include questions on research design, analysis, and interpretation.

8. The research should be performed in a laboratory that best suits the candidate's interests. For example, the ABP is strongly supportive of the Pediatric Scientist Development Program, initiated by Association of Medical School Pediatric Department Chairmen (AMSPDC).

II. Special Requirements for Training Programs

Special Requirements for Training Programs in Pediatric Cardiology, Pediatric Critical Care Medicine, Pediatric Endocrinology, Pediatric Gastroenterology, Pediatric Hematology-Oncology, Neonatal-Perinatal Medicine, Pediatric Nephrology, and Pediatric Pulmonology have been approved by the ACGME or by the RCPSC.

Special Requirements for Training Programs in Pediatric Adolescent Medicine, Pediatric Emergency Medicine, Pediatric Infectious Diseases, and Pediatric Rheumatology have not yet been approved.
by the ACGME. Copies of the Special Requirements and lists of accredited programs are available from the office of the Residency Review Committee for Pediatrics, 515 N State St, Chicago, IL 60610, or the Office of Training and Evaluation, the Royal College of Physicians and Surgeons of Canada, 74 Stanley, Ottawa, Ontario, K1M 1P4. The Special Requirements are published in the Graduate Medical Education Directory or in the RCPSC booklets of general information.

III. Subspecialty "Fast Tracking"

A subspecialty resident who is believed to have demonstrated meaningful accomplishment in research, either before or during residency, may have a part of the training waived. Examples might include a PhD degree or being first author of a research paper in a peer-reviewed journal. The subspecialty program director may ask the Subboard to waive the research requirement's and to reduce the time of subspecialty training by as much as 1 year. This petition must be made either before the beginning of training or during the first year of training. A candidate for this pathway must have completed 3 core years of pediatrics in an accredited program in the United States or Canada, and would not have the option of the Special Alternative Pathway. Furthermore, a subspecialty resident who receives a waiver by the Subboard must complete at least 2 years of training in the subspecialty with at least 1 year of broad-based clinical training.

IV. Certifying Examination

The examination consists of multiple-choice questions. Examples of the types of questions to be used are mailed to registered candidates before the administration of each examination. Some questions on the examination are included for experimental purposes only. These questions will not contribute to the score.

The examination result will be reported by name and score to the pediatric department chairman and subspecialty program director where training occurred.

The validity of the performance of candidates on the subspecialty certifying examination is secured by every means available. The ABP should be contacted in the event of irregular behavior such as giving or obtaining unauthorized information or aid before, during, or after the examination, or offering financial or other benefit to a proctor, employee, or agent of the ABP.

The ABP does not sponsor or maintain records on any courses that claim to be review courses in preparation for the subspecialty certifying examination.

A physician who has a disability and who wishes to be granted special consideration will be required to submit documentation of the disability before appearing for the certifying examination. The applicant should notify the ABP of special considerations that were desired at the time the initial application was submitted.

Except for certifying examinations given in the spring, an applicant for a subspecialty certifying examination must complete training by the date of the examination. A written request for waiver of this policy will be considered on a case-by-case basis.

Information concerning the dates of the subspecialty examinations is widely distributed in journals, sent to program directors, and is contained in the Booklet of Information, which is available on request from the ABP.

Application material for admission to a subspecialty certifying examination of the ABP may be obtained by contacting the ABP at 919-929-0461, or by writing to the American Board of Pediatrics, 111 Silvercrest, Box 208, Chapel Hill, NC 27514-1651. Application forms are available only during the registration period for a particular examination.

As part of the application, the applicant must sign a statement attesting to the fact that he/she has never been convicted of a felony nor is under indictment for a felony at the present time.

1. Has never been convicted of a felony nor is under indictment for a felony at the present time.
2. Has never had a license to practice medicine denied, revoked, suspended, or restricted in the United States or any other country.
3. Has no action pending against him/her before any state licensing board at this time.
4. Has never been chemically dependent.
5. Has not been the subject of any disciplinary action, proceeding, or investigation by any medical society within the last 5 years.
6. Has not been the subject of any investigation or disciplinary proceeding in any hospital, practice group, or medical institution with which he/she has been associated, nor has he/she resigned from any such organization while the subject of a complaint or proceeding within the last 5 years.

Each applicant is considered individually and must be acceptable to the Subboard. Each Subboard recognizes that situations may arise that are not explained by the preceding information. Questions concerning eligibility will be considered by the Credentials Committee of the Subboard.

After the Subboard has approved an application, the candidate becomes board eligible and is expected to take the next examination offered. A candidate who withdraws from the examination after the approval letter/site assignment cards are prepared will forfeit a portion of the fees paid. A candidate who withdraws after the date set for postponement will forfeit all fees paid. To register for a future examination, payment of the reregistration fee will be required.

A candidate who fails an examination will be admitted to the next examination pending application and payment of the reregistration fee.

V. Certification

Beginning in 1980, new applicants must achieve certification within 7 years. A candidate who has an active status as of December 31, 1985, will have until December 31, 1995, to complete the certification process. A candidate who was admitted to the certification process in 1986 to 1989 will have 10 years to complete the process. A candidate who has not been certified within the time limit is no longer board eligible and must pass a reentry examination to regain eligibility status.

A Certificate of Special Qualifications, valid for 7 years, is awarded by the ABP to a candidate who has met the requirements and has passed the certifying subspecialty examination. A program for renewal of subspecialty certification (PRCP-S) has been developed by the ABP. The candidate will be sent registration material in a timely manner.

The names of these certified are sent to the American Board of Medical Specialties (ABMS) for publication in the Directory of Certified Pediatricians and to various pediatric journals. Scores are not sent to ABMS or to the journals.

VI. Policy Regarding Chemical Use and Dependency (Including Drugs and Alcohol)

An applicant who has a history of chemical dependency as reported to the ABP and who submits documentation acceptable to the ABP that the disease is known to be under control for 2 years, may apply for and take a certifying examination provided he/she meets the admission requirements. This policy also pertains to individuals who wish to participate in the PRCP-S.

An applicant who has a history of chemical dependency, as reported to the ABP and who cannot submit documentation acceptable to the ABP that the disease is under control will not be allowed to take a certifying examination or to participate in PRCP-S.
Eligibility Criteria for Certification in Adolescent Medicine

The ABP has established a procedure for certification in adolescent medicine. In addition to the specific admission requirements listed below, there are general eligibility criteria that must be fulfilled to be eligible for certification. A copy of the general eligibility criteria is available upon request to the ABP.

I. Admission Requirements

For admission to the examination, an applicant must have completed one of the following to qualify:

A. Training

A subspecialty resident (hereafter, resident or trainee) entering adolescent medicine training before January 1, 1995, may apply for admission on the basis of completion of 2 years of subspecialty residency training in adolescent medicine.

Three years of full-time, broad-based subspecialty residency training in adolescent medicine is required of a resident entering training on or after January 1, 1995. The period of training must be at least 33 months for those entering training on or after January 1, 1995. Extended absences, whether for vacation, maternity leave, illness, etc., must be made up. If the program director believes that an extended absence of more than 3 months is justified, a letter of explanation shall be sent by the director for review by the Credentials Committee.

For a resident beginning adolescent medicine training on or after January 1, 1995, the following must be accomplished in order to become certified in the subspecialty: a Verification of Competence Form must be completed by the program director(s) stating satisfactory completion of the required training as well as verification of clinical competence and meaningful accomplishment in research; the resident must meet the criteria as stated in the “Principles Regarding the Assessment of Meaningful Accomplishment in Research”; and he/she must pass the subspecialty certifying examination. Verification of meaningful accomplishment in research will not be required for individuals who began training before January 1, 1995.

A resident beginning part-time training after January 1, 1995, may complete the required training on a part-time basis not to exceed 6 years. No continuous absence of more than 1 year will be permitted.

Only those adolescent medicine training programs that are accredited by the ACGME (hereafter, the RRC) or Internal Medicine or by the RCPSC are acceptable. All subspecialty training must be completed in the United States or Canada unless the Credentials Committee of the Subboard has given approval for foreign subspecialty training to an applicant before he/she enters in such a program. An applicant wishing to obtain such approval should contact the ABP.

No credit will be given for subspecialty training during the core residency.

For an individual using the adolescent medicine residency training route (A), a Verification of Competence Form(s) will be required from the director(s) of the resident’s adolescent medicine training program(s).

B. Practice Experience

Five years of broad-based practice experience in adolescent medicine is required. A minimum of 50% of full-time professional activity (and a minimum of 20 hours a week) must have been spent in the practice of adolescent medicine to receive credit. It is assumed that night and weekend time would be distributed in the same manner as regular time. These 5 years should be of such type and quality that they substitute for the clinical exposure one might have encountered during subspecialty residency training. All adolescent medicine experience must be accrued before December 31, 1998. No foreign adolescent medicine experience will be accepted by the Credentials Committee in fulfillment of the requirements.

For an individual utilizing the adolescent medicine practice experience route (B), an Evaluation Form(s) will be required from the adolescent medicine program director (if there is a subspecialty training program) or the pediatric department chairman or the chief of pediatrics in the hospital(s) where the applicant is now or has been practicing adolescent medicine.

C. Combined Partial Training and Practice

Subspecialty residency training/adolescent medicine practice experience to equal 5 years as outlined in either of the methods below.

1. A resident completing less than 12 months of subspecialty residency training in adolescent medicine may receive practice credit on a month-for-month basis. For example, a 9-month subspecialty residency would be credited for 9 months of experience; this, added to 4 years and 3 months of adolescent medicine experience would total 60 months or 5 years. These 5 years must be accrued before December 31, 1998.

2. A resident completing 12 to 23 months of subspecialty residency training in adolescent medicine may receive credit on a two-for-one basis. For example, an 18-month subspecialty residency would be credited for 36 months of experience; this added to 24 months of adolescent medicine experience would total 60 months or 5 years. These 5 years must be accrued before December 31, 1998. No credit for partial training will be given for a subspecialty resident who begins training on or after January 1, 1995.

For an individual utilizing the combination subspecialty residency training/adolescent medicine practice experience route (C), a Verification Form(s) will be required from the director(s) of the applicant’s adolescent medicine training program(s) and an Evaluation Form(s) will be required from the adolescent medicine program director (if there is a subspecialty training program) or the pediatric department chairman or the chief of pediatrics in the hospital(s) where the applicant is now or has been practicing adolescent medicine.

The completed Verification and Evaluation Forms should be sent directly to the ABP.

II. Dual Subcertification in Adolescent Medicine (Internal Medicine and Pediatrics)

Two years of training in adolescent medicine are required for individuals who have completed joint training in internal medicine/pediatric (med/ped) programs and who are dually certified. Graduates from med/ped programs can choose the training track offered by either Board. Candidates who apply to the ABP must meet the requirements of clinical competence and meaningful accomplishment in research.

III. Accredited Training

At the present time, the RRC has not begun the process of accrediting training programs in adolescent medicine. A resident entering subspecialty training in adolescent medicine before completion of the accreditation process by the RRC is advised to enter those programs in which the director or senior faculty of the program is certified in adolescent medicine or possesses equivalent credentials.

It should be noted that these criteria are subject to change without notice. All applicants are advised to contact the ABP to ascertain whether the information they have is current.
Eligibility Criteria for Certification in Pediatric Cardiology

The ABP has established a procedure for certification in pediatric cardiology. In addition to the specific admission requirements listed below, there are general eligibility criteria that must be fulfilled to be eligible for certification. A copy of the general eligibility criteria is available upon request to the ABP.

I. Admission Requirements

A subspecialty resident (hereafter, resident or trainee) entering pediatric cardiology training before January 1, 1988, may apply for admission on the basis of completion of two years of subspecialty residency training in pediatric cardiology.

Three years of full-time, broad-based subspecialty residency training in pediatric cardiology is required of a resident entering training on or after January 1, 1988, in a program accredited by the ACGME (hereafter, the RRC) or the RCPSC. The period of training must be at least 36 months for those entering training on or after January 1, 1988. Extended absences, whether for vacation, maternity leave, illness, etc. must be made up. If the program director believes that an extended absence of more than 3 months is justified, a letter of explanation should be sent by the director for review by the Credentials Committee.

For a resident who began pediatric cardiology training on or after January 1, 1988, the following must be accomplished in order to become certified in the subspecialty: a Verification of Competence Form must be completed by the program director(s) stating satisfactory completion of the required training, as well as verification of clinical competence and meaningful accomplishment in research; the resident must meet the criteria as stated in the "Principles Regarding the Assessment of Meaningful Accomplishment in Research"; and he/she must pass the subspecialty certifying examination.

A resident beginning part-time training after January 1, 1988, may complete the required training on a part-time basis not to exceed 6 years. No continuous absence of more than 1 year will be permitted.

Only those pediatric cardiology training programs that are operated in association with general comprehensive pediatric residency programs accredited by the RRC or by the RCPSC are acceptable. All subspecialty training must be completed in the United States or Canada, unless the Credentials Committee of the Subboard has given approval for foreign subspecialty training to an applicant before he/she enrolls in such a program. An applicant wishing to obtain such approval should contact the ABP.

No credit will be given for subspecialty training during the core residency.

II. Dual Subcertification in Cardiology (Internal Medicine and Pediatrics)

There is no change in the usual training requirements in pediatric cardiology for graduates of combined Medicine/Pediatrics programs.

It should be noted that these criteria and conditions are subject to change without notice. All applicants are advised to contact the ABP to ascertain whether the information they have is current.

Eligibility Criteria for Certification in Pediatric Critical Care Medicine

The ABP has established a procedure for certification in pediatric critical care medicine. In addition to the specific admission requirements listed below, there are general eligibility criteria that must be fulfilled to be eligible for certification. A copy of the general eligibility criteria is available upon request to the ABP.

I. Admission Requirements

For admission to the examination, an applicant must have completed one of the following to qualify:

A. A subspecialty resident (hereafter, resident or trainee) entering pediatric critical care medicine training before January 1, 1988, may apply for admission on the basis of completion of 2 years of subspecialty residency training in pediatric critical care medicine.

Three years of full-time, broad-based subspecialty residency training in pediatric critical care medicine is required of a resident entering training on or after January 1, 1988, in a program accredited by the ACGME (hereafter, the RRC) or the RCPSC. The period of training must be at least 33 months for those entering training on or after January 1, 1988. Extended absences, whether for vacation, maternity leave, illness, etc. must be made up. If the program director believes that an extended absence of more than 3 months is justified, a letter of explanation should be sent by the director for review by the Credentials Committee.

For a resident who began pediatric critical care medicine training on or after January 1, 1988, the following must be accomplished in order to become certified in the subspecialty: a Verification of Competence Form must be completed by the program director(s) stating satisfactory completion of the required training as well as verification of clinical competence and meaningful accomplishment in research; the resident must meet the criteria as stated in the "Principles Regarding the Assessment of Meaningful Accomplishment in Research"; and he/she must pass the subspecialty certifying examination.

A resident beginning part-time training after January 1, 1988, may complete the required training on a part-time basis not to exceed 6 years. No continuous absence of more than 1 year will be permitted.

Only those pediatric critical care programs that are operated in association with comprehensive pediatric residency programs accredited by the RRC or by the RCPSC are acceptable. All subspecialty training must be completed in the United States or Canada unless the Credentials Committee of the Subboard has given approval for foreign subspecialty training to an applicant before he/she enrolls in such a program. An applicant wishing to obtain such approval should contact the ABP.

No credit will be given for subspecialty training during the core residency.

B. A resident who is certified by the ABP in pediatric cardiology, neonatal-perinatal medicine, pediatric pulmonology, or anesthesiology (by the American Board of Anesthesiology) may be admitted to the examination with 2 years of subspecialty residency training in pediatric critical care medicine in a program under the supervision of a director who is certified in pediatric critical care medicine or, lacking such certification, possesses equivalent credentials. A resident entering a program after January 1, 1992, must have his/her training in a program accredited by the RRC or RCPSC in order to be eligible to take the certifying examination in pediatric critical care medicine. A resident who entered training in pediatric critical care medicine before January 1, 1988, will need only 1 year of training. At least 1 year must be in broad-based clinical training.

II. Dual Subcertification in Critical Care Medicine (Internal Medicine and Pediatrics)

The Subboard of Pediatric Critical Care Medicine has established the following requirements for individuals who are graduates of combined training programs in general internal medicine and general pediatrics.
1. The applicant must have at least 1 year of broad-based clinical pediatric critical care medicine training.

2. The applicant must have a minimum of 1 year of research training related to pediatric critical care medicine. The setting for the research training should be one that is most suitable for the applicant's interest.

3. In order to become certified in the subspecialty, the following must be accomplished by a subspecialty resident: a Verification of Competence Form must be completed by the program director(s) in pediatrics and internal medicine stating satisfactory completion of the required training, as well as verification of clinical competence and meaningful accomplishment in research; the resident must meet the criteria as stated in the "Principles Regarding the Assessment of Meaningful Accomplishment in Research"; and he/she must pass the subspecialty certifying examination. No credit toward subspecialty qualification will be allowed for elective time spent in subspecialty areas during the usual general pediatric residency years (PL 1, 2, 3).

4. An applicant interested in certification in critical care medicine in internal medicine should contact the ABIM.

5. The total length of training leading to dual subspecialization must be at least 4 years in duration.

6. An applicant may not take the subspecialty certifying examination of the ABP until all training has been completed. It should be noted that these criteria and conditions are subject to change without notice. All applicants are advised to contact the ABP to ascertain whether the information they have is current.

Eligibility Criteria for Certification in Pediatric Emergency Medicine

The ABP and the American Board of Emergency Medicine (ABEM) have established, through the Credentials Committee of the joint Subboard of Pediatric Emergency Medicine, a procedure for certification in Pediatric Emergency Medicine. To be eligible for this subspecialty examination, a physician must be certified in either pediatrics by the ABP or in emergency medicine by the ABEM. In addition to the specific admission requirements listed below, there are general eligibility criteria for all ABP subspecialties that must be fulfilled to be eligible for certification. These are available upon request to the ABP. The ABEM also has general requirements that must be fulfilled and are available from the ABEM office.

I. Admission Requirements

For admission to the examination, an applicant must have completed one of the following to qualify:

A. Training

A subspecialty resident (hereafter, resident or trainee) entering pediatric emergency medicine training before January 1, 1995, may apply for admission on the basis of completion of 2 years of subspecialty residency training in pediatric emergency medicine. The program and the training must conform to the Special Requirements for Training Programs of the Subboard of Pediatric Emergency Medicine.

1. Requirements for candidates applying to the ABP for certification

Three years of broad-based residency training in pediatric emergency medicine is required of a resident entering training on or after January 1, 1985. The period of training must be at least 33 months for those entering training on or after January 1, 1995. Extended absences, whether for vacation, maternity leave, illness, etc., must be made up. If the program director believes that an extended absence of more than 3 months is justified, a letter of explanation should be sent by the director for review by the Credentials Committee.

For a resident beginning pediatric emergency medicine training on or after January 1, 1995, the following must be accomplished in order to become certified in the subspecialty: a Verification of Competence Form must be completed by the program director(s) stating satisfactory completion of the required training, as well as verification of clinical competence and meaningful accomplishment in research; the resident must meet the criteria as stated in the "Principles Regarding the Assessment of Meaningful Accomplishment in Research"; and he/she must pass the subspecialty certifying examination. Verification of meaningful accomplishment in research will not be required for individuals who began training before January 1, 1995.

A resident beginning training after January 1, 1995, may complete the required training on a part-time basis not to exceed 6 years. No continuous absence of more than 1 year will be permitted.

2. Requirements for candidates applying to the ABEM for certification

The present requirement of 2 years of full-time, broad-based residency training in pediatric emergency medicine will continue for a resident entering training on or after January 1, 1995. The following must be accomplished to become certified in the subspecialty: a Verification of Competence Form must be completed by the program director(s) stating satisfactory completion of the required training; he/she must pass the subspecialty certifying examination. A resident beginning training after January 1, 1995, may complete the required training on a part-time basis not to exceed 4 years. No continuous absence of more than 1 year will be permitted.

Only those pediatric emergency medicine training programs that are operated in association with general comprehensive pediatric residency programs accredited by the ACGME (hereafter, the RRC) or by the RCPSC are acceptable. All subspecialty training must be completed in the United States or Canada, unless the Credentials Committee of the Subboard has given approval for foreign subspecialty training to an applicant before he/she enrolls in such a program. An applicant wishing to obtain such approval should contact the ABP or the ABEM.

No credit will be given for subspecialty training during the core residency.

An applicant may not apply for the same training period toward fulfillment of requirements of two different certifying sub-boards.

B. Dual Certification

A candidate who is certified by ABP and ABEM may apply via this pathway. A candidate who has completed training to meet the certification requirements of ABP and ABEM before January 1, 1999, may apply via this pathway.

C. Pediatric Emergency Medicine Practice

A candidate who has had broad-based and clearly focused experience in pediatric emergency medicine may apply via the practice pathway. The applicant must fulfill all of the following

1. Professional activities spent in the practice of pediatric emergency medicine for a period of 60 months, and totaling a minimum of 6,000 hours, clearly focused on the care of patients in the pediatric age group (31 years of age) in the emergency department. (ED). A clear professional and clinical commitment to the practice of pediatric emergency medicine must be demonstrated.

2. Of the 6,000 hours, 2,800 hours must have been accrued in a 24-month (maximum) consecutive period of time to demonstrate a clear professional focus and intensity exclusively in the practice of pediatric emergency medicine.

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3. A minimum of 4,000 of the 6,000 hours must have been spent in the clinical practice of pediatric emergency medicine. If the candidate practices in a general ED, only time spent exclusively in pediatric care can be used for credit.

4. The remaining 2,000 hours may be spent in either clinical care or a mixture of related nonclinical activities clearly focused on pediatric emergency medicine including administration, teaching, prehospital care, quality assurance or quality improvement, research, or other academic activities.

5. Practice time shall have occurred in a hospital-based ED, with the following characteristics:
   a. The ED must provide a patient mix of minor-major medical and traumatic conditions.
   b. The ED must be a formal component of the Emergency Medical Services system for pediatric patients.
   c. The ED must provide triage and initial stabilization of all presenting conditions.
   d. The ED must provide 24-hour-a-day full-time physician coverage.
   e. The ED should have a minimum of 15,000 nonscheduled pediatric patient visits per year.

6. The physician must be physically present in the ED, and available and responsible for clinical patient care. Hours spent in an “on call” arrangement are not acceptable.

7. Practice time must have occurred in the United States, or its territories, or in Canada. Military practice time must have occurred in accredited US military hospitals. Practices occurring outside these locations will not be accepted. Specifically, practice time at a freestanding emergency facility will not be accepted for fulfillment of the eligibility requirements.

8. For nonclinical practice pathway credit, the candidate may count nonclinical time devoted to pediatric emergency medicine. Specific documentation of the actual nature of the nonclinical time will be required.

9. Applicants seeking certification in more than one subspecialty, on the basis of practice alone, may not apply the same practice period toward fulfillment of the requirements of two different certifying subboards.

10. Practice time need not be continuous. However, all practice time shall have occurred in the 7-year interval before application for certification and before July 1, 1996.

D. Subspecialty Residency Training Plus Practice

A combination of training and practice experience may be utilized to fulfill eligibility requirements. The combination must equal 60 months and 6,000 hours. Credit for partial training will be given as follows:

1. An applicant who has completed 1 to 11 months of subspecialty residency training in pediatric emergency medicine will receive practice credit on a month-to-month basis. Each month of subspecialty training in pediatric emergency medicine credited toward practice will be counted as 100 hours toward the 6,000 hours minimal requirement.

2. An applicant who has completed 12 to 23 months of subspecialty residency training in pediatric emergency medicine will receive practice credit on a 2-for-1 basis. Each month of subspecialty training in pediatric emergency medicine credited toward practice will be counted as 200 hours toward the 6,000 hours minimal requirement.

3. No credit for partial training will be given for training beginning on or after January 1, 1995.

4. The 60 months of combination training and practice credit must be accrued during a 7-year interval before application for certification and before July 1, 1996.

II. Verification of Training and Practice

1. For a candidate utilizing the subspecialty residency training route, a Verification of Competence Form(s) from the director(s) of the applicant's pediatric emergency medicine training program(s) is required.

2. For a candidate utilizing the dual certification pathway, the certificate number and year of certification for each board must be provided.

3. For a candidate utilizing the practice pathway, an Evaluation Form will be required from either the pediatric emergency medicine program director, the pediatric department chairman or the chief of pediatrics, or the emergency department chairman or chief of emergency medicine in the hospital where the practice experience occurred.

4. For a candidate utilizing the subspecialty training plus practice pathway, both a Verification of Competence Form(s) from the pediatric emergency medicine program and an Evaluation Form(s) will be required.

Certification shall be time-limited for the length of years that the primary board currently grants certification, 7 years for ABP and 10 years for ABEM.

III. Description of the Institution/Emergency Department, and Procedures Experience

1. The individual(s) responsible for completion of the Verification of Competence Form(s) or the Evaluation Form(s) must provide a description of the institution and the ED.

2. The applicant must complete a "Procedures for Pediatric Emergency Medicine" form with the application.

IV. Accredited Training

At the present time, the BRC has not begun the process of accrediting training programs in pediatric emergency medicine. A resident entering subspecialty training in pediatric emergency medicine before completion of the accreditation process by the BRC is advised to enter those programs in which the director or senior faculty of the program is certified in pediatric emergency medicine by the ABP and/or ABEM or possesses equivalent credentials.

Eligibility Criteria for Certification in Pediatric Endocrinology

The ABP has established a procedure for certification in pediatric endocrinology. In addition to the specific admission requirements listed below, there are general eligibility criteria that must be fulfilled to be eligible for certification. A copy of the general eligibility criteria is available upon request to the ABP.

I. Admission Requirements

A subspecialty resident (hereafter, resident or trainee) who entered pediatric endocrinology before January 1, 1987, may apply for admission on the basis of completion of 2 years of subspecialty residency training in pediatric endocrinology.

Three years of full-time, broad-based subspecialty residency training in pediatric endocrinology is required of a resident entering training on or after January 1, 1988, in a program accredited by the ACGME (hereafter, the BRC) or the RCPSC. The period of training must be at least 36 months for those entering training on or after January 1, 1988. Extended absences, whether for vacation, maternity leave, illness, etc., must be made up. If the program director believes that an extended absence of more than 3 months is justified, a letter of explanation should be sent by the director for review by the Credentials Committee.

For a resident who began pediatric endocrinology training on or after January 1, 1988, the following must be accomplished in order to become certified in the subspecialty: a Verification of Competence Form must be completed by the program director(s) stating...
satisfactory completion of the required training as well as verification of clinical competence and meaningful accomplishment in research; the resident must meet the criteria as stated in the “Principles Regarding the Assessment of Meaningful Accomplishment in Research”; and he/she must pass the subspecialty certifying examination.

A resident beginning part-time training after January 1, 1988, may complete the required training on a part-time basis not to exceed 6 years. No continuous absence of more than 1 year will be permitted.

Only those pediatric endocrinology training programs that are operated in association with general comprehensive pediatric residency programs accredited by the RRC or by the RCPS are acceptable. All subspecialty training must be completed in the United States or Canada, unless the Credentials Committee of the Subboard has given approval for foreign subspecialty training to an applicant before he/she enrolls in such a program. An applicant wishing to obtain such approval should contact the ABP.

No credit will be given for subspecialty training during the core residency.

II. Dual Subcertification in Endocrinology (Internal Medicine and Pediatrics)
The Subboard of Pediatric Endocrinology has established the following requirements for individuals who are graduates of combined training programs in general internal medicine and general pediatrics.
1. The applicant must have at least 1 year of broad-based clinical pediatric endocrinology training.
2. The applicant must have a minimum of 1 year of research training related to pediatric endocrinology. The setting for the research training should be one that is most suitable for the applicant's interest.
3. In order to become certified in the subspecialty, the following must be accomplished by a subspecialty resident: a Verification of Competence Form must be completed by the program director(s) in pediatrics and internal medicine stating satisfactory completion of the required training, as well as verification of clinical competence and meaningful accomplishment in research; the resident must meet the criteria as stated in the “Principles Regarding the Assessment of Meaningful Accomplishment in Research”; and he/she must pass the subspecialty certifying examination. No credit toward subspecialty qualification will be allowed for elective time spent in subspecialty areas during the usual general pediatric residency years (PL 1, 2, 3).
4. An applicant interested in certification in endocrinology in internal medicine should contact the ABIM.
5. The total length of training leading to dual subspecialty must be at least 4 years in duration.
6. An applicant may not take the certifying examination of the ABP until all training has been completed.

Eligibility Criteria for Certification in Pediatric Gastroenterology
The ABP has established a procedure for certification in pediatric gastroenterology. In addition to the specific admission requirements listed below, there are general eligibility criteria that must be fulfilled to be eligible for certification. A copy of the general eligibility criteria is available upon request to the ABP.

I. Admission Requirements
For admission to the examination, an applicant must have completed one of the following to qualify:

A. Training
A subspecialty resident (hereafter, resident or trainee) who entered pediatric gastroenterology training before January 1, 1990, may apply for admission on the basis of completion of 2 years of subspecialty residency training in pediatric gastroenterology.

Three years of full-time, broad-based subspecialty residency training in pediatric gastroenterology is required of a resident entering training on or after January 1, 1990. The period of training must be at least 33 months for those entering training on or after January 1, 1990. Extended absences, whether for vacation, maternity leave, illness, etc., must be made up. If the program director believes that an extended absence of more than 3 months is justified, a letter of explanation should be sent by the director for review by the Credentials Committee.

For a resident who began pediatric gastroenterology training on or after January 1, 1990, the following must be accomplished in order to become certified in the subspecialty: a Verification of Competence Form must be completed by the program director(s) stating satisfactory completion of the required training as well as verification of clinical competence and meaningful accomplishment in research; the resident must meet the criteria as stated in the “Principles Regarding the Assessment of Meaningful Accomplishment in Research”; and he/she must pass the subspecialty certifying examination.

A resident beginning part-time training after January 1, 1990, may complete the required training on a part-time basis not to exceed 6 years. No continuous absence of more than 1 year will be permitted.

Only those pediatric gastroenterology training programs that are operated in association with general comprehensive pediatric residency programs accredited by the ACOGME (hereafter, the RRC) or by the RCPS are acceptable. All subspecialty training must be completed in the United States or Canada, unless the Credentials Committee of the Subboard has given approval for foreign subspecialty training to an applicant before he/she enrolls in such a program. An applicant wishing to obtain such approval should contact the ABP.

No credit will be given for subspecialty training during the core residency.

For an individual using the pediatric gastroenterology residency training route (A), Verification of Competence Form(s) will be required from the director(s) of the resident's pediatric gastroenterology training program(s).

B. Practice Experience
Five years of broad-based practice experience in pediatric gastroenterology is required. Broad-based pediatric gastroenterology is defined as encompassing the majority of the clinical components, which are a modification of the guidelines for subspecialty training in gastroenterology published in 1986 by the Committee on Training and Education of the American Gastroenterological Association (Winship DH, Grand RJ, Gray G, et al: Guidelines for subspecialty training in gastroenterology. Gastroenterology 1980; 79:955–967). This modification was published in Gastroenterology 1987;90:492–493 (Mott KJ, et al). A minimum of 50% of full-time professional activity must be spent in the practice of pediatric gastroenterology to receive credit. It is assumed that that and weekend time would be distributed in the same manner as regular time. These 5 years should be of such type and quality that they substitute for the clinical exposure one might have encountered during subspecialty residency training. All pediatric gastroenterology experience must be accrued before December 31, 1994. No foreign pediatric gastroenterology experience will be accepted by the Credentials Committee in fulfillment of the requirements.

For an individual utilizing the pediatric gastroenterology practice experience route (B), Evaluation Form(s) will be required from the
pediatric gastroenterology program director (if there is a subspecialty training program) or the pediatric department chairman or the chief of pediatrics in the hospital(s) where the applicant is now, or has been, practicing pediatric gastroenterology.

C. Combined Partial Training and Practice

Subspecialty residency training/pediatric gastroenterology practice experience equal to 5 years as outlined in either of the methods below

1. A resident completing less than 12 months of subspecialty residency training in pediatric gastroenterology may receive practice credit on a month-for-month basis. For example, a 9-month subspecialty residency would be credited for 9 months of experience; this, added to 4 years and 3 months of pediatric gastroenterology experience would total 60 months or 5 years. These 5 years must be accrued before December 31, 1994.

2. A resident completing 12 to 23 months of subspecialty residency training in pediatric gastroenterology may receive credit on a two-for-one basis. For example, an 18-month subspecialty residency would be credited for 36 months of experience; this, added to 24 months of pediatric gastroenterology experience would total 60 months or 5 years. These 5 years must be accrued before December 31, 1994. No credit for partial training will be given for a subspecialty resident who began training on or after January 1, 1990.

For an individual utilizing the combination subspecialty residency training/pediatric gastroenterology practice experience route (C), a Verification Form(s) will be required from the director(s) of the applicant's pediatric gastroenterology training program(s) and an Evaluation Form(s) will be required from the pediatric gastroenterology program director (if there is a subspecialty training program) or the pediatric department chairman or the chief of pediatrics in the hospital(s) where the applicant is now or has been practicing pediatric gastroenterology.

The completed Verification and Evaluation Forms should be sent directly to the ABP.

II. Dual Subcertification in Gastroenterology

(Internal Medicine and Pediatrics)

The Subboard of Pediatric Gastroenterology has established the following requirements for individuals who are graduates of combined training programs in general internal medicine and general pediatrics.

1. The applicant must have at least 1 year of broad-based clinical pediatric gastroenterology training.

2. The applicant must have a minimum of 1 year of research training related to pediatric gastroenterology. The setting for the research training should be one that is most suitable for the applicant's interest.

3. In order to become certified in the subspecialty, the following must be accomplished by a subspecialty resident: a Verification of Competence Form must be completed by the program director(s) in pediatrics and internal medicine stating satisfactory completion of the required training, as well as verification of clinical competence and meaningful accomplishment in research; the resident must meet the criteria as stated in the "Principles Regarding the Assessment of Meaningful Accomplishment in Research"; and he/she must pass the subspecialty certifying examination. No credit toward subspecialty qualification will be allowed for elective time spent in subspecialty areas during the usual general pediatric residency years (Pl 1, 2, 3).

4. An applicant interested in certification in gastroenterology in internal medicine should contact the ABIM.

5. The total length of training leading to dual subspecialization must be at least 4 years in duration.

6. An applicant may not take the subspecialty certifying examination of the ABP until all training has been completed.

III. Accredited Training

The RRC has begun the process of accrediting training programs in pediatric gastroenterology. A resident entering subspecialty training in pediatric gastroenterology before completion of the accreditation process by the RRC is advised to enter those programs in which the director or senior faculty of the program is certified in pediatric gastroenterology or possesses equivalent credentials.

Eligibility Criteria for Certification in Pediatric Hematology-Oncology

The ABP has established a procedure for certification in pediatric hematology-oncology. In addition to the specific admission requirements listed below, there are general eligibility criteria that must be fulfilled to be eligible for certification. A copy of the general eligibility criteria is available upon request to the ABP.

I. Admission Requirements

A subspecialty resident (hereafter, resident or trainee) who entered pediatric hematology-oncology training before January 1, 1986, may apply for admission on the basis of completion of 2 years of subspecialty residency training in pediatric hematology-oncology.

Three years of full-time, broad-based subspecialty residency training in pediatric hematology-oncology is required of a resident entering training on or after January 1, 1986, in a program accredited by the ACGME (hereafter, the RRC) or the RCPSC. The period of training must be at least 33 months for those entering training on or after January 1, 1986. Extended absences, whether for vacation, maternity leave, illness, etc., must be made up. If the program director believes that an extended absence of more than 3 months is justified, a letter of explanation should be sent by the director for review by the Credentials Committee.

For a resident who began pediatric hematology-oncology training on or after January 1, 1988, the following must be accomplished in order to become certified in the subspecialty: a Verification of Competence Form must be completed by the program director(s) stating satisfactory completion of the required training as well as verification of clinical competence and meaningful accomplishment in research; the resident must meet the criteria as stated in the "Principles Regarding the Assessment of Meaningful Accomplishment in Research"; and he/she must pass the subspecialty certifying examination.

A resident beginning part-time training after January 1, 1988, may complete the required training on a part-time basis not to exceed 6 years. No continuous absence of more than 1 year will be permitted. Only those pediatric hematology-oncology training programs that are operated in association with general comprehensive pediatric residency programs accredited by the RRC or by the RCPSC are acceptable. All subspecialty training must be completed in the United States or Canada, unless the Credentials Committee of the Subboard has given approval for foreign subspecialty training to an applicant before he/she enrolls in such a program. An applicant wishing to obtain such approval should contact the ABP.

No credit will be given for subspecialty training during the core residency.

II. Dual Subcertification in Hematology-Oncology

(Internal Medicine and Pediatrics)

There is no change in the usual training requirements in pediatric hematology-oncology for graduates of combined Medicine/Pediatrics programs.
Eligibility Criteria for Certification in Pediatric Infectious Diseases

The ABP has established a procedure for certification in pediatric infectious diseases. In addition to the specific admission requirements listed below, there are general eligibility criteria that must be fulfilled to be eligible for certification. A copy of the general eligibility criteria is available upon request to the ABP.

I. Admission Requirements

For admission to the examination, an applicant must have completed one of the following to qualify

A. Training

A subspecialty resident (hereafter, resident or trainee) entering pediatric infectious diseases training before January 1, 1986, may apply for admission on the basis of completion of 2 years of subspecialty residency training in pediatric infectious diseases.

Three years of full-time, broad-based subspecialty residency training in pediatric infectious diseases is required of a resident entering training on or after January 1, 1995. Of the period of training must be at least 39 months for those entering training on or after January 1, 1995. Extended absences, whether for vacation, maternity leave, illness, etc., must be made up. If the program director believes that an extended absence of more than 3 months is justified, a letter of explanation should be sent by the director for review by the Credentials Committee.

For a resident beginning pediatric infectious diseases training on or after January 1, 1995, the following must be accomplished in order to become certified in the subspecialty: a Verification of Competence Form must be completed by the program director(s) stating satisfactory completion of the required training as well as verification of clinical competence and meaningful accomplishment in research; the resident must meet the criteria as stated in the "Principles Regarding the Assessment of Meaningful Accomplishment in Research"; and he/she must pass the subspecialty certifying examination. Verification of meaningful accomplishment in research will not be required for individuals who began training before January 1, 1995.

A resident beginning part-time training after January 1, 1996, may complete the required training on a part-time basis not to exceed 6 years. No continuous absence of more than 1 year will be permitted.

Only those pediatric infectious diseases training programs that are operated in association with general comprehensive pediatric residency programs accredited by the ACGME (hereafter, the RRC) or by the RCPSC are acceptable. All subspecialty training must be completed in the United States or Canada, unless the Credentials Committee of the Subboard has given approval for foreign subspecialty training to an applicant before he/she enrolls in such a program. An applicant wishing to obtain such approval should contact the ABP.

No credit will be given for subspecialty training during the core residency.

For an individual using the pediatric infectious diseases residency training route (A), Verification of Competence Form(s) will be required from the director(s) of the resident’s pediatric infectious diseases training program(s).

B. Practice Experience

Five years of broad-based practice experience in pediatric infectious diseases is required. A minimum of 50 percent of full-time professional activity must have been spent in the practice of pediatric infectious diseases to receive credit. It is assumed that night and weekend time would be distributed in the same manner as regular time. These 5 years should be of such type and quality that they substitute for the clinical exposure one might have encountered during subspecialty residency training. All pediatric infectious diseases experience must be accrued by December 31, 1998. No foreign pediatric infectious diseases experience will be accepted by the Credentials Committee in fulfillment of the requirements.

For an individual utilizing the pediatric infectious diseases practice experience route (B), Evaluation Form(s) will be required from the pediatric infectious diseases program director (if there is a subspecialty training program), or the pediatric department chairman, or the chief of pediatrics in the hospital(s) where the applicant is now, or has been, practicing pediatric infectious diseases.

C. Combined Partial Training and Practice

Subspecialty residency training/pediatric infectious diseases practice experience to equal 5 years as outlined in either of the methods below

1. A resident completing less than 12 months of subspecialty residency training in pediatric infectious diseases may receive practice credit on a month-for-month basis. For example, a 9-month subspecialty residency would be credited for 9 months of experience; this, added to 4 years and 3 months of pediatric infectious diseases experience would total 60 months or 5 years. These 5 months must be accrued before December 31, 1998.

2. A resident completing 12 to 23 months of subspecialty residency training in pediatric infectious diseases may receive credit on a two-for-one basis. For example, an 18-month subspecialty residency would be credited for 36 months of experience; this, added to 24 months of pediatric infectious diseases experience would total 60 months or 5 years. These 5 months must be accrued before December 31, 1998. No credit for partial training will be given for a subspecialty resident who begins training on or after January 1, 1995.

For an individual utilizing the combination subspecialty residency training/pediatric infectious diseases practice experience route (C), a Verification Form(s) will be required from the director(s) of the applicant’s pediatric infectious diseases training program(s) and an Evaluation Form(s) will be required from the pediatric infectious diseases program director (if there is a subspecialty training program) or the pediatric department chairman or the chief of pediatrics in the hospital(s) where the applicant is now or has been practicing pediatric infectious diseases.

The completed Verification and Evaluation Forms should be sent directly to the ABP.

II. Dual Subcertification in Infectious Diseases

Internal Medicine and Pediatrics

The Subboard of Pediatric Infectious Diseases has established the following requirements for individuals who are graduates of combined training programs in general internal medicine and general pediatrics.

1. The applicant must have at least 1 year of broad-based clinical pediatric infectious diseases training.

2. The applicant must have a minimum of 1 year of research training related to pediatric infectious diseases. The setting for the research training should be one that is most suitable for the applicant’s interest.

3. In order to become certified in the subspecialty, the following must be accomplished by a subspecialty resident: a Verification of Competence Form must be completed by the program director(s) in pediatrics and internal medicine stating satisfactory completion of the required training as well as verification of clinical competence and meaningful accomplishment in research; the resident must meet the criteria as stated in the "Principles Regarding the Assessment of Meaningful Accomplishment in Research"; and he/she must pass the subspecialty certifying examination. No credit toward subspecialty qualification will be
allowed for elective time spent in subspecialty areas during the usual general pediatric residency years (Pl, 1, 2, 3).

4. An applicant interested in certification in infectious diseases in internal medicine should contact the ABIM.

5. The total length of training leading to dual subspecialty must be at least 4 years in duration.

6. An applicant may not take the subspecialty certifying examination of the ABP until all training has been completed.

The same requirements are necessary for a resident who begins pediatric infectious diseases training before January 1, 1986, except for the following: (a) meaningful accomplishment in research is not required; or (b) the total length of training leading to dual certification must be at least 3 years in duration.

III. Accredited Training

At the present time, the RRC has not begun the process of accrediting training programs in pediatric infectious diseases. A resident entering subspecialty training in pediatric infectious diseases before completion of the accreditation process by the RRC is advised to enter those programs in which the director or senior faculty of the program is certified in pediatric infectious diseases by the ABP or possesses equivalent credentials.

Eligibility Criteria for Certification in Medical Toxicology

The American Board of Pediatrics (ABP) in collaboration with the American Board of Emergency Medicine and Preventive Medicine will offer a certification of added qualification in Medical Toxicology. This document provides the requirements of the ABP.

A. Certification by the American Board of Pediatrics (ABP)

An applicant must take and pass the certifying examination in general pediatrics before being permitted to take a pediatric subspecialty certifying examination. However, the application for the subspecialty certifying examination may be submitted before taking the certifying examination in general pediatrics.

B. Licensure

An applicant must have a valid, unrestricted license to practice medicine in any of the states, districts or territories of the United States or provinces of Canada or have unrestricted privileges to practice medicine in the US Armed Forces. A copy of the unrestricted license must accompany the application material.

C. Pathways

For admission to the certification examination in medical toxicology, the diplomate must have completed one of four eligibility pathways. The pathways are: (A) Medical Toxicology Training; (B) Diplomate of American Board of Medical Toxicology (ABMT); (C) Medical Toxicology Practice; (D) Medical Toxicology Training Plus Practice.

1. Medical Toxicology Subspecialty Training Pathway

A diplomat must complete an acceptable subspecialty residency in medical toxicology of 24 months duration. The training program should be sponsored by and be based within a reasonable geographical proximity of an accredited residency program in emergency medicine, pediatrics, preventive medicine, or any combination of these programs. An institution is discouraged from sponsoring more than one accredited medical toxicology program.

The diplomat must satisfactorily complete the subspecialty training by the date of the examination.

Applicants seeking certification in more than one subspecialty on the basis of training may not apply the same training period toward fulfillment of requirements of more than one subspecialty or subspecialty.

The ABP will request verification of subspecialty training directly from the program director.

2. Diplomate of ABMT Pathway

ABMT diplomates who are also diplomates of an ABMS board may apply.

On June 30, 1999, the ABMT pathway will expire. To apply under the ABMT pathway an applicant must have fulfilled the requirements of this pathway by that date.

3. Medical Toxicology Practice Pathway

The practice pathway is available to physicians who, through study and focused practice experience, have developed qualifications in medical toxicology. The criteria for this category consist of all of the following:

a. During a minimum of 60 months, which must have occurred during the most recent 7 years prior to the date the application is submitted, the applicant must show a demonstrated commitment to teaching, scholarly activities, research, or administration and patient care in the specialty of medical toxicology, and (b) must accumulate a minimum of 2,500 hours of direct patient care activities.

Direct patient care activities include primary or consultative care, exposure evaluation, screening and preventive services, and epidemiologic and health investigations. Telephone consultations are not considered a direct patient care activity.

b. Documented affiliation and activity with a poison center certified by the American Association of Poison Control Centers or the Canadian Association of Poison Control Centers, or its equivalent.

Applicants seeking certification in more than one subspecialty may not apply the same practice hours toward fulfillment of the requirements of more than one certifying specialty or subspecialty.

On June 30, 1999, the practice pathway will expire. To apply under the practice pathway an applicant must have fulfilled the requirements of the practice pathway by that date.

For each medical toxicology activity submitted to fulfill the eligibility criteria, a verification form must be completed. The verification forms are included with the application material, and it is the applicant's responsibility to provide the form to the appropriate individual for completion and return to the ABP office.

4. Medical Toxicology Training Plus Practice Pathway

A combination of training and practice experience may be utilized to fulfill the eligibility requirements of the practice pathway of application. This pathway will be utilized by physicians who have completed less than 2 years in a medical toxicology training program, and/or have preceptorship training in medical toxicology and who have maintained a medical toxicology practice as outlined in Pathway C, above.

Practice credit may be granted for partially completed subspecialty training or preceptorship training. The combination for training credit and medical toxicology practice must equal the requirements of the practice category of application (see Section C, items 1 and 2).

An applicant who has completed 1-11 months of subspecialty training in medical toxicology will receive practice credit toward the 60-month requirement on a month-for-month basis. An applicant who has completed 12-23 months of acceptable subspecialty training...
training in medical toxicology will receive practice credit toward the 60-month requirement on a two-for-one basis for each month of training completed.

Preceptorship training will be reviewed for possible practice credit toward the 60-month requirement on a month-for-month basis, up to a maximum of 24 months’ credit.

Patient care hours accumulated during the subspecialty training and/or preceptorship will be reviewed for credit on an hour-for-hour basis toward fulfilling the minimum 2,500-hour direct patient care requirement.

On June 30, 1998, the medical toxicology training plus practice pathway will expire. To apply under this pathway, an applicant must have fulfilled the requirements of the practice pathway by that date.

Eligibility Criteria for Certification in Neonatal-Perinatal Medicine

The ABP has established a procedure for certification in neonatal-perinatal medicine. In addition to the specific admission requirements listed below, there are general eligibility criteria that must be fulfilled to be eligible for certification. A copy of the general eligibility criteria is available upon request to the ABP.

Admission Requirements

A subspecialty resident (hereafter, resident or trainee) who entered neonatal-perinatal medicine training before January 1, 1989, may apply for admission on the basis of completion of 2 years of subspecialty residency training in neonatal-perinatal medicine. Only those programs that are a part of an institution that offers residency or fellowship training in obstetrics and gynecology, and include experience in fetal-maternal-perinatal medicine will be considered.

Three years of full-time, broad-based subspecialty residency training in neonatal-perinatal medicine is required of a resident entering training on or after January 1, 1989, in a program accredited by the ACGME (hereafter, the RRC) or the RCPSC. The period of training must be at least 33 months for those entering training on or after January 1, 1989. Extended absences, whether for vacation, maternity leave, illness, etc., must be made up. If the program director believes that an extended absence of more than 3 months is justified, a letter of explanation should be sent by the director for review by the Credentials Committee.

For a resident who began neonatal-perinatal medicine training on or after January 1, 1989, the following must be accomplished in order to become certified in the subspecialty: a Verification of Competency Form must be completed by the program director(s) stating satisfactory completion of the required training as well as verification of clinical competence and meaningful accomplishment in research; the resident must meet the criteria as stated in the “Principles Regarding the Assessment of Meaningful Accomplishment in Research”; and he/she must pass the subspecialty certifying examination.

A resident beginning part-time training after January 1, 1989, may complete the required training on a part-time basis not to exceed 5 years. No continuous absence of more than 1 year will be permitted.

Eligibility Criteria for Certification in Pediatric Nephrology

The ABP has established a procedure for certification in pediatric nephrology. In addition to the specific admission requirements listed below, there are general eligibility criteria that must be fulfilled to be eligible for certification. A copy of the general eligibility criteria is available upon request to the ABP.

I. Admission Requirements

A subspecialty resident (hereafter, resident or trainee) who entered pediatric nephrology training before January 1, 1987, may apply for admission on the basis of completion of 2 years of subspecialty residency training in pediatric nephrology.

Three years of full-time, broad-based subspecialty residency training in pediatric nephrology is required of a resident entering training on or after January 1, 1987, in a program accredited by the ACGME (hereafter, the RRC) or the RCPSC. The period of training must be at least 33 months for those entering training on or after January 1, 1987. Extended absences, whether for vacation, maternity leave, illness, etc., must be made up. If the program director believes that an extended absence of more than 3 months is justified, a letter of explanation should be sent by the director for review by the Credentials Committee.

For a resident who began pediatric nephrology training on or after January 1, 1988, the following must be accomplished in order to become certified in the subspecialty: a Verification of Competency Form must be completed by the program director(s) stating satisfactory completion of the required training as well as verification of clinical competence and meaningful accomplishment in research; the resident must meet the criteria as stated in the “Principles Regarding the Assessment of Meaningful Accomplishment in Research”; and he/she must pass the subspecialty certifying examination.

A resident beginning part-time training after January 1, 1988, may complete the required training on a part-time basis not to exceed 5 years. No continuous absence of more than 1 year will be permitted.

Only those pediatric nephrology training programs that are operated in association with general comprehensive pediatric residency programs accredited by the RRC or by the RCPSC are acceptable. All subspecialty training must be completed in the United States or Canada unless the Credentials Committee of the Subboard has given approval for foreign subspecialty training to an applicant before he/she enrolls in such a program. An applicant wishing to obtain such approval should contact the ABP.

No credit will be given for subspecialty training during the core residency.

II. Dual Subcertification in Nephrology (internal Medicine and Pediatrics)

The Subboard of Pediatric Nephrology has established the following requirements for individuals who are graduates of combined training programs in general internal medicine and general pediatrics.

1. The applicant must have at least 1 year of broad-based clinical pediatric nephrology training.
2. The applicant must have a minimum of 1 year of research training related to pediatric nephrology. The setting for the research training should be one that is most suitable for the applicant’s interest.
3. In order to become certified in the subspecialty, the following must be accomplished by a subspecialty resident: a Verification of Competency Form must be completed by the program director(s) in pediatrics and internal medicine stating satisfactory completion of the required training, as well as verification of clinical competence and meaningful accomplishment in re-
search; the resident must meet the criteria as stated in the "Principles Regarding the Assessment of Meaningful Accomplishment in Research"; and he/she must pass the subspecialty certifying examination. No credit toward subspecialty qualification will be allowed for elective time spent in subspecialty areas during the usual general pediatric residency years (PL 1, 2, 3).
4. An applicant interested in certification in nephrology in internal medicine should contact the ABIM.
5. The total length of training leading to dual subspecialization must be at least 4 years in duration.
6. An applicant may not take the certifying examination of the ABP until all training has been completed.

Eligibility Criteria for Certification in Pediatric Pulmonology
The ABP has established a procedure for certification in pediatric pulmonology. In addition to the specific admission requirements listed below, there are general eligibility criteria that must be fulfilled to be eligible for certification. A copy of the general eligibility criteria is available upon request to the ABP.

I. Admission Requirements
For admission to the examination, an applicant must have completed one of the following to qualify:
A. A subspecialty resident (hereafter, resident or trainee) who entered pediatric pulmonology training before January 1, 1986, may apply for admission on the basis of completion of 2 years of subspecialty residency training in pediatric pulmonology.
B. Three years of full-time, broad-based subspecialty residency training in pediatric pulmonology is required of a resident entering on or after January 1, 1986, in a program accredited by the ACGME (hereafter, the RRC) or the RCPSC. The period of training must be at least 33 months for those entering training on or after January 1, 1986. Extended absences, whether for vacation, maternity leave, illness, etc., must be made up. If the program director believes that an extended absence of more than 3 months is justified, a letter of explanation should be sent by the director for review by the Credentials Committee.

For a resident who began pediatric pulmonology training on or after January 1, 1988, the following must be accomplished in order to become certified in the subspecialty: a Verification of Competence Form must be completed by the program director(s) stating satisfactory completion of the required training as well as verification of clinical competence and meaningful accomplishment in research; the resident must meet the criteria as stated in the "Principles Regarding the Assessment of Meaningful Accomplishment in Research"; and he/she must pass the subspecialty certifying examination.
A resident beginning part-time training after January 1, 1988, may complete the required training on a part-time basis not to exceed 6 years. No continuous absence of more than 1 year will be permitted.

Only those pediatric pulmonology training programs that are operated in association with general comprehensive pediatric residency programs accredited by the RRC or by the RCPSC are acceptable. All subspecialty training must be completed in the United States or Canada unless the Credentials Committee of the Subboard has given approval for foreign subspecialty training to an applicant before he/she enrolls in such a program. An applicant wishing to obtain such approval should contact the ABP.

No credit will be given for subspecialty training during the core residency.
B. A resident who is certified by the ABP in pediatric critical care medicine in 1994 or thereafter may be admitted to the examination with 2 years of accredited subspecialty training in pediatric pulmonology. At least 1 year must be in broad-based clinical training.

II. Dual Subcertification in Pulmonology (Internal Medicine and Pediatrics)
The Subboard of Pediatric Pulmonology has established the following requirements for individuals who are graduates of combined training programs in general internal medicine and general pediatrics.
1. The applicant must have at least 1 year of broad-based clinical pediatric pulmonology training.
2. The applicant must have a minimum of 1 year of research training related to pediatric pulmonology. The setting for the research training should be one that is most suitable for the applicant's interest.
3. In order to become certified in the subspecialty, the following must be accomplished by a subspecialty resident: a Verification of Competence Form must be completed by the program director(s) in pediatrics and internal medicine stating satisfactory completion of the required training, as well as verification of clinical competence and meaningful accomplishment in research; the resident must meet the criteria as stated in the "Principles Regarding the Assessment of Meaningful Accomplishment in Research"; and he/she must pass the subspecialty certifying examination. No credit toward subspecialty qualification will be allowed for elective time spent in subspecialty areas during the usual general pediatric residency years (PL 1, 2, 3).
4. An applicant interested in certification in pulmonology in internal medicine should contact the ABIM.
5. The total length of training leading to dual subspecialization must be at least 4 years in duration.
6. An applicant may not take the certifying examination of the ABP until all training has been completed.

III. Subcertification in Pediatric Pulmonology and Allergy/Immunology
The intent of this route is to outline a mechanism whereby residents already certified in pediatrics may qualify for subcertification in both pediatric pulmonology and allergy/immunology in a shorter total period of time than that presently required (3 years' pediatric pulmonology plus 2 years' allergy/immunology). This can be accomplished by successfully completing research training relating to the requirements of both the Subboard of Pediatric Pulmonology and the Conjoint Board of Allergy/Immunology.

The total training program would require no less than 4 years (48 months) with at least 1 year spent in clinical pulmonology training and 1 year in clinical training for allergy/immunology. The minimal research requirement is 12 months in an environment and project relevant to both pulmonology and allergy/immunology. The fourth year would be spent in training acceptable to the Subboard of Pediatric Pulmonology and may be in clinical training or relevant additional research training.
1. Training in pediatric pulmonology may precede or follow training in allergy/immunology.
2. The candidate must train in pediatric pulmonology and allergy/immunology programs accredited by the RRC; the two programs do not necessarily have to be at the same institution. The research project selected by the trainee must be discussed with and approved by both training program directors.
3. The trainee must supply written details of any research project for which he/she plans to seek joint approval of both the Subboard of Pediatric Pulmonology and the Conjoint Board of Allergy/Immunology before or early in the course of his/her first year in a subspecialty program. The Subboard and Conjoint Board, in turn, will provide a preliminary written opinion to the trainee concern-
ing the acceptability of the research project. This early approval
is no guarantee of acceptance of the final research product.
4. The trainee is required to satisfy the General and Special Require-
ments for the Subboard and Joint Board as listed in the
Graduate Medical Education Directory. Final admission to
either certification examination is granted by the Credentials
Committees after completion of training, fulfillment of the re-
search competence requirements, and review of all application
materials submitted by the candidate.

Eligibility Criteria for Certification in
Pediatric Rheumatology

The ABP has established a procedure for certification in pediatric
rheumatology. In addition to the specific admission requirements
listed below, there are general eligibility criteria that must be ful-
filled to be eligible for certification. A copy of the general eligibility
criteria is available upon request to the ABP.

1. Admission Requirements

For admission to the examination, an applicant must have com-
pleted one of the following to qualify

A. Training

A subspecialty resident (hereafter, resident or trainee) who entered
pediatric rheumatology training before January 1, 1992, may apply
for admission on the basis of completion of 2 years of subspecialty
residency training in pediatric rheumatology.

Three years of full-time, broad-based subspecialty residency train-
ing in pediatric rheumatology is required of a resident entering
training on or after January 1, 1992. The period of training must be
at least 36 months for those entering training on or after January 1,
1992. Extended absences, whether for vacation, maternity leave, ill-
ness, etc., must be made up. If the program director believes that an
extended absence of more than 3 months is justified, a letter of ex-
planation should be sent by the director for review by the Creden-
tials Committee.

For a resident who began pediatric rheumatology training on or
after January 1, 1992, the following must be accomplished in order
to become certified in the subspecialty: a Verification of Compete-
tence Form must be completed by the program director(s) stating
satisfactory completion of the required training as well as verifica-
tion of clinical competence and meaningful accomplishment in re-
search; the resident must meet the criteria as stated in the
“Principles Regarding the Assessment of Meaningful Accomplish-
ment in Research”; and he/she must pass the subspecialty certify-
ing examination.

A resident beginning part-time training after January 1, 1992,
may complete the required training on a part-time basis not to ex-
cede 6 years. No continuous absence of more than 1 year will be
permitted.

Only those pediatric rheumatology training programs that are op-
erated in association with general comprehensive pediatric resi-
dency programs accredited by the ACGME (hereafter, the BRC) or
by the RCPSC are acceptable. All subspecialty training must be com-
pleted in the United States or Canada, unless the Credentials Com-
mitee of the Subboard has given approval for foreign subspecialty
training to an applicant before he/she enrolls in such a program. An
applicant wishing to obtain such approval should contact the ABP.

No credit will be given for subspecialty training during the core
residency.

For an individual using the pediatric rheumatology residency
training route (A), Verification of Competence Form(s) will be re-
quired from the director(s) of the resident's pediatric rheumatology
training program(s).

B. Practice Experience

Five years of broad-based practice experience in pediatric rheu-
matology is required. A minimum of 50 percent of full-time pro-
fessional activity must be spent in the practice of pediatric
rheumatology to receive credit. It is assumed that night and week-
end time would be distributed in the same manner as regular time.
These 5 years should be of such type and quality that they substi-
tute for the clinical exposure one might have encountered during
subspecialty residency training. All pediatric rheumatology experi-
ence must be accrued before December 31, 1996. No foreign pedi-
ratic rheumatology experience will be accepted by the Credentials
Committee in fulfillment of the requirements.

For an individual utilizing the pediatric rheumatology practice ex-
perience route (B), an Evaluation Form(s) will be required from
the pediatric rheumatology program director (if there is a subspe-
cialty training program) or the pediatric department chairman or
the chief of pediatrics in the hospital(s) where the applicant is now
or has been practicing pediatric rheumatology.

C. Combined Partial Training and Practice

Subspecialty residency training/pediatric rheumatology practice ex-
perience to equal 5 years as outlined in either of the methods below

1. A resident completing less than 12 months of subspecialty resi-
dency training in pediatric rheumatology may receive practice
credit on a month-for-month basis. For example, a 9-month sub-
specialty residency would be credited for 9 months of experience;
this, added to 4 years and 3 months of pediatric rheumatology ex-
perience would total 60 months or 5 years. These 5 years must be
accrued before December 31, 1996.

2. A resident completing 12 to 23 months of subspecialty residency
training in pediatric rheumatology may receive credit on a two-
for-one basis. For example, an 18-month subspecialty residency
would be credited for 36 months of experience; this, added to 24
months of pediatric rheumatology experience would total 60
months or 5 years. These 5 years must be accrued before December
31, 1996. No credit for partial training will be given for a sub-
specialty resident who began training on or after January 1, 1992.

For an individual utilizing the combination subspecialty resi-
dency training/pediatric rheumatology practice experience route
(C), a Verification Form(s) will be required from the director(s) of
the applicant’s pediatric rheumatology training program(s) and an
Evaluation Form(s) will be required from the pediatric rheumatol-
yogy program director (if there is a subspecialty training program)
or the pediatric department chairman or the chief of pediatrics in
the hospital(s) where the applicant is now or has been practicing pedi-
ratic rheumatology.

The completed Verification and Evaluation Forms should be sent
directly to the ABP.

II. Dual Subcertification in Rheumatology
(Internal Medicine and Pediatrics)

The Subboard of Pediatric Rheumatology has established the fol-
lowing requirements for individuals who are graduates of combined
training programs in general internal medicine and general
pediatrics.

1. The applicant must have at least 1 year of broad-based clinical pe-
diatric rheumatology training.

2. The applicant must have a minimum of 1 year of research training
related to pediatric rheumatology. The setting for the research
training should be one that is most suitable for the applicant's in-
terest.

3. In order to become certified in the subspecialty, the following
must be accomplished by a subspecialty resident: a Verification
of Competence Form must be completed by the program direc-
tor(s) in pediatrics and internal medicine stating satisfactory
completion of the required training, as well as verification of
Clinical competence and meaningful accomplishment in research; the resident must meet the criteria as stated in the “Principles Regarding the Assessment of Meaningful Accomplishment in Research” and he/she must pass the subspecialty certifying examination. No credit toward subspecialty qualification will be allowed for elective time spent in subspecialty areas during the usual general pediatric residency years (PL 1, 2, 3).

4. An applicant interested in certification in rheumatology in internal medicine should contact the ABIM.

5. The total length of training leading to dual subspecialization must be at least 4 years in duration.

6. An applicant may not take the subspecialty certifying examination of the ABP until all training has been completed.

III. Accredited Training

At the present time, the RRC has not begun the process of accrediting training programs in pediatric rheumatology. A resident entering subspecialty training in pediatric rheumatology before completion of the accreditation process by the RRC is advised to enter those programs in which the director or senior faculty of the program is certified in pediatric rheumatology or possesses equivalent credentials.

Eligibility Criteria for Certification in Sports Medicine

The American Board of Pediatrics (ABP) in collaboration with the American Boards of Family Practice, Internal Medicine, and Emergency Medicine will offer a certificate of added qualification in Sports Medicine. This document provides the requirements of the ABP.

Admission Requirements

A. Certification by the American Board of Pediatrics (ABP)

An applicant must take and pass the certifying examination in general pediatrics before being permitted to take a pediatric subspecialty certifying examination. However, the application for the subspecialty certifying examination may be submitted before taking the certifying examination in general pediatrics.

B. Licensure

An applicant must have a valid, unrestricted license to practice medicine in any of the states, districts, or territories of the United States or provinces of Canada or have unrestricted privileges to practice medicine in the US Armed Forces. A copy of the unrestricted license must accompany the application material.

C. Training or Practice Experience

For admission to the examination, an applicant must have completed one of the following to qualify:

1. Training
   An applicant must have completed a minimum of 1 year in a sports medicine training program that is associated with an accredited residency program in Family Practice, Emergency Medicine, Internal Medicine, or Pediatrics.

   A Verification of Competence Form must be completed by the program director stating satisfactory completion of the required training as well as verification of clinical competence. The ABP will send this form to the program director for completion.

2. Practice Experience

   Five years of practice experience in sports medicine is required. This experience must consist of at least 20% of total professional time devoted to sports medicine. The activities that qualify a candidate are one or more of the following:

   a. Field supervision of athletes
   b. Emergency assessment and care of acutely injured athletes
   c. Diagnosis, treatment, management, and disposition of common sports injuries and illnesses
   d. Management of medical problems in the athlete
   e. Rehabilitation of the ill or injured athlete
   f. Exercise as treatment

   Partial training in sports medicine, ie, less than 12 months, will be credited on a month-by-month basis as practice experience.

   An Evaluation Form must be completed by an individual to verify that at least 20% of professional time is devoted to sports medicine in one or more of the six activities cited above. The form must be completed by a physician who is knowledgeable about the candidate’s practice, such as the chief of sports medicine, the chief of pediatric department, or the medical director of a hospital where the applicant has admitting privileges. A partner or practice associate is not acceptable.

   Practice experience accrued before 1987 will not be considered. All sports medicine experience must be accrued by June 30, 1999.

   The deadline for an applicant choosing the practice experience route will be the 1999 examination.

   The RRC currently reviews and accredits pediatric subspecialty programs in all the certified subspecialties except adolescent medicine, pediatric emergency medicine, pediatric infectious diseases, and pediatric rheumatology. When the Special Requirements for Training Programs in these latter subspecialties have been approved, the RRC will accredit training programs in these fields. A list of accredited programs is published in the Graduate Medical Education Directory.

1995 Subspecialty Certifying Examinations

Certifying examinations in the following pediatric subspecialties will be given on the following dates:

April 7
Sports Medicine

August 8
Pediatric Endocrinology
Pediatric Gastroenterology
Pediatric Nephrology

November 14
Neonatal-Perinatal Medicine

Contact the ABP for further information regarding these examinations.

Certification in Allergy and Immunology

Certification in allergy and immunology is offered by the ABAI, a Conjoint Board of the ABP and the ABIM. For details, contact the ABAI, University City Science Center, 3624 Market St, Philadelphia, PA 19104.

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6. A candidate who has a primary certificate from one of the other three Boards should contact that Board office for its eligibility criteria.

7. Further description of these activities will be included in the application material.
American Board of Physical Medicine and Rehabilitation

Joel A DeLisa, MD, Chairman, Newark, New Jersey
Robert P Christopher, MD, Vice Chairman, Memphis, Tennessee
Murray B Brandstater, MD, Loma Linda, California
Gerald Fensenthal, MD, Baltimore, Maryland
Bruce M Gans, MD, Detroit, Michigan
Margaret C Hammond, MD, Seattle, Washington
Phala A Helm, MD, Dallas, Texas
Joseph C Honet, MD, Detroit, Michigan
PA. Patrick Maloney, MD, North Little Rock, Arkansas
Malcolm C McPhee, MD, Scottsdale, Arizona
James R Swenson, MD, Salt Lake City, Utah
Nicolas E Walsh, MD, San Antonio, Texas
Joachim L Opitz, MD, Executive Director/Secretary, Rochester, Minnesota

(These criteria and conditions are subject to change without notice. All applicants are advised to contact the American Board of Physical Medicine and Rehabilitation to ascertain whether the information below is current.)

General Requirements for Certification

A. Graduates of Educational Institutions in the United States or Canada

1. Graduation from a medical school approved by the Liaison Committee on Medical Education, or graduation from a Canadian medical school approved by the Canadian Medical Association, or graduation from an osteopathic medical school approved by the American Osteopathic Association.

2. Possession of a valid and unrestricted license to practice medicine or osteopathy in one or more of the 50 United States or Puerto Rico or licensure in Canada. Evidence of licensure or an acceptable equivalent must be submitted with application for certification examinations.

3. Satisfactory completion of the requirements of the Board for graduate education and experience in physical medicine and rehabilitation as set forth below.

4. Satisfactory compliance with rules and regulations of the Board pertaining to the completion and filing of the application for examination and the payment of required fees.

B. Graduates of Educational Institutions Not in the United States and Canada

1. Possession of a valid certificate from the Educational Commission for Foreign Medical Graduates (ECFMG) and, optionally, a certificate from the Federation Licensing Examination (PLEX) or the Fifth Pathway. International medical graduates (both aliens and US citizens) will be expected to complete the ECFMG examination format; Foreign Medical Graduate Examination in Medical Science (FMGEMS), including basic and clinical examinations; and, when indicated, English proficiency, or National Board of Medical Examiners Parts I, II, or the United States Medical Licensing Exam I, II. This is required by the Accreditation Council on Graduate Medical Education (ACGME) before a resident can enter accredited graduate medical education programs in the United States.

2. Possession of a valid and unrestricted license to practice medicine or osteopathy in one or more of the 50 United States or Puerto Rico or licensure in Canada. Evidence of licensure must be submitted with application for certification examinations.

3. Satisfactory completion of the Board's requirements for graduate education and experience in physical medicine and rehabilitation as set forth below.

4. Satisfactory compliance with rules and regulations of the Board pertaining to the completion and filing of the application for examination and the payment of required fees.

Residency Training Requirements

Applicants for the certifying examinations must have satisfactorily completed 48 months of training in a physical medicine and rehabilitation residency approved by the ACGME on recommendation of the Residency Review Committee for Physical Medicine and Rehabilitation. The program must include 36 months of training in physical medicine and rehabilitation. Twelve of the 48 months of training should consist of a coordinated program of experience in fundamental clinical skills, which includes at least 6 months in family practice, internal medicine, pediatrics, general surgery, or a combination of these. The other 6 months of the year of experience may include no less than 1 month in any of the following specific categories: cardiology, radiology, neurology, urology, rheumatology, nephrology, vascular medicine, pediatrics, pulmonary medicine, neurosurgery, orthopedic surgery, family practice, general surgery, general internal medicine, emergency medicine, psychiatry, oncology, critical care medicine, and anesthesiology. Training in the fundamental skills should be accomplished during the first half of the residency training program.

The program director and the credentials committee of the Board, at the beginning of the residency, will make the decision regarding the acceptability for credit for the 12 months of ACGME, Royal College of Physicians and Surgeons of Canada (RCPSG), or AOA credited training in fundamental clinical skills as described above.

This format is mandatory for all residents who enter training in 1985 or subsequently. In some instances, 36 months of physical medicine and rehabilitation residency may be acceptable on recommendation of the program director, with 1 year of credit being granted on the basis of prior residency training (see below under Credit for Other Specialty Training).

The training programs require that a significant amount of each resident's time be scheduled to provide for progressively increasing responsibilities in the direct clinical care of in- and outpatients. At least one-third, and not more than two-thirds, of a resident's experiences should be devoted to clinical care and management of rehabilitation of hospitalized patients. The resident may spend up to 6 months in pertinent supervised clinical or basic research.

Adequate training to achieve basic qualifications in electromyography and electrodiagnosis is essential. This includes achieving the ability to perform and interpret electromyographic and other electrodiagnostic evaluations such as nerve conduction studies and somatosensory evoked potentials. Experience with inpatient and outpatient pediatric rehabilitation is required.

Opportunities to achieve understanding of special aspects of rehabilitation in patients in pediatric and geriatric age groups should be included. Comprehensive management of spinal cord-injured patients is fundamental. Also, achieving abilities to evaluate, predict outcome in, and manage rehabilitation of patients with brain lesions is part of the basic residency. A wide variety of patients with musculoskeletal and neuromuscular problems, both acute and chronic, should be encountered. Principles involved in cardiac reha-
bilitation and sports medicine should be included. Psychosocial aspects of patients with disabilities require in-depth understanding.

Credit for Other Specialty Training
Physicians who have had 1 year or more of residency training (up to and including certification) in a residency approved by the ACGME, by the RCPSC, or by the AOA in related relevant specialties including internal medicine, neurology, orthopedics, pediatrics, family practice, and surgery may receive up to 12 months of nonphysical medicine and rehabilitation training credit on recommendation of the program director and at the discretion of the Board. However, completion of 36 months of the physical medicine and rehabilitation training requirement in an ACGME-approved residency is mandatory.

No credit will be given toward shortening the basic required 4-year program for non-ACGME-approved residencies, fellowships, internships; for Fifth Pathway in a United States AMA-designated training institution; or for hospital house physician experience. No credit will be allowed for fellowships prior to or during residency training.

A resident entering or beginning the required 4-year program in physical medicine and rehabilitation with previous approved graduate training or educational experience may qualify for an institutional appointment at the second-year level. However, such an appointment may not be interpreted to mean that the resident is in the second year of a physical medicine and rehabilitation residency. All of the required training and experience as stated above must have been taken in the United States or Canada.

Requirements for Admissibility to Part I of the Board Examination
To be admissible to Part I of the Board examination, candidates are required to complete satisfactorily at least 48 months of postgraduate residency training, of which at least 36 months are spent in supervised education and clinical practice in physical medicine and rehabilitation and 12 months in internal medicine or an acceptable alternative in an accredited training program. In line with the guidelines of the Board for clinical investigator training, 60 months of integrated physical medicine and rehabilitation and research training qualifies for admissibility to Part I of the certifying examination.

Satisfactory completion of educational and training requirements in force at the beginning of the resident's training in an accredited program will be considered acceptable for application for admissibility to the certifying examination. Residents in approved physical medicine and rehabilitation training programs in Canada, on satisfactory completion of all the requirements for certification in that country, may apply for admissibility to Part I of the American Board of Physical Medicine and Rehabilitation's (ABPM&R) certifying examination.

Final admissibility is contingent upon receipt of the final-year evaluation by the program director by May 1 in the examination year.

If a resident is placed on probationary status during the final year of his or her residency program, this status must be rescinded by the program director before May 1 for the resident to be admissible.

Requirements for Admissibility to Part II of the Board Examination
At least a full year of clinical practice, fellowship, research, or a combination of these following completion of residency training is required. The clinical practice should provide evidence of professional, ethical, and humanitarian standards attested to by two certi-

fied psychiatrists in the local or regional area. In rare instances in which a psychiatrist is not geographically available, two licensed physicians may support the candidate's application for Part II.

Alternatively, a candidate may take Part I and II together if all residency training and the practice time requirements are completed. However, the candidate fails Part I, Part II will not count or be recognized in any way.

An optional fifth year in a physical medicine and rehabilitation residency, which includes at least 6 months of advanced clinical practice of physical medicine and rehabilitation with essentially full patient responsibility, and also includes teaching experience, plus opportunities for time in research or relevant clinical or basic science electives, may qualify such resident for admissibility to Part II of the certifying examinations upon the recommendation of the training program director. An optional fifth year may be valuable for those anticipating a full- or part-time academic career.

Dual Specialty Certification
For those desiring to pursue integrated training and dual specialty certification, currently the Board will participate with the American Boards of Pediatrics, Internal Medicine, and Psychiatry and Neurology, provided there is completion of 36 months of accredited training in general comprehensive physical medicine and rehabilitation. The proposed program agreed to by the respective training program directors should be submitted by the program directors to both Boards for approval. Admissibility to Part I of the ABPM&R certification examinations may be sought during the last year of training.

A full year of clinical practice, fellowship, research, or a combination of those activities is required for admissibility to the Part II certifying examination in physical medicine and rehabilitation (PM&R). Preferably those activities would relate to the practice of PM&R and the other specialty.

Guidelines for residency training program directors interested in considering developing such a program are available through the ABPM&R office.

A. Special Agreement Between the American Board of Pediatrics and the American Board of Physical Medicine and Rehabilitation
There exists a special agreement between the American Board of Pediatrics (ABP) and the ABPM&R whereby a physician interested in pediatric rehabilitation can qualify for admission to the certifying examinations of both Boards. The individual residency curriculum must be submitted prospectively by the program directors to both Boards, at the latest at the end of the R-3 year, and may be designed to be completed in approximately 60 months. The nonphysical medicine and rehabilitation 12-month segment of the 4-year PM&R residency will be credited on the basis of satisfactory completion of the regular first year of pediatric residency.

The ABP requires a minimum of 36 months of general comprehensive pediatric training, with 6 months' credit for pediatric rehabilitation within the physical medicine and rehabilitation training. The ABPM&R requires a minimum of 36 months' accredited physical medicine and rehabilitation residency, with 6 months' credit for related rotations during the pediatric training. Six months of full-time equivalent (FTE) of pediatric rehabilitation is required. Twenty-four months of the 36 months' PM&R training must be in adult PM&R.

It is recommended that all training be completed at one academic institution, but any deviation will require prospective approval by both Boards. When two separate institutions are involved, there should be evidence of adequate coordination to provide an appropriate educational experience. Vacation is shared pro rata be-
B. Special Agreement Between the American Board of Internal Medicine and the American Board of Physical Medicine and Rehabilitation

There exists a special agreement between the American Board of Internal Medicine (ABIM) and the ABPM&R whereby a prospective resident interested in dual specialty certification in internal medicine and in physical medicine and rehabilitation can qualify to apply for admission to the certifying examinations of each Board by satisfactory completion of a preplanned combined, integrated program, which could be designed to be completed in a minimum of 60 months.

The non-physical medicine and rehabilitation 12-month segment of the 48 months of physical medicine and rehabilitation residency concerned with basic fundamental clinical skills will be credited on the basis of satisfactory completion of the regular first year of internal medicine residency. In addition, the ABPM&R requires a minimum of 36 months of accredited PM&R residency, with 6 months' credit for internal medicine rotations in such areas as rheumatology, endocrinology, cardiovascular, or pulmonary subspecialties of internal medicine.

During the 30 months in physical medicine and rehabilitation, the resident must satisfactorily complete 24 months of hospital and outpatient clinical management of patients receiving physical medicine and rehabilitation services. Physical medicine and rehabilitation training includes basic and advanced knowledge of musculoskeletal and neuromuscular anatomy and physiology as related to kinesiology, exercise, and functional activities as well as to immobilization and inactivity. Applications and prescription of therapeutic exercise, orthotics, prosthetics, and assistive and supportive devices for ambulation and mobility are essential. The following segments of training in physical medicine and rehabilitation are also required: experience with inpatient or outpatient pediatric rehabilitation, adequate training to achieve basic qualifications in electromyography and electrodiagnosis, and opportunities to achieve understanding of special aspects of rehabilitation of patients in geriatric age groups.

The ABPM&R requirement for 12 months of clinical practice, fellowship, research, or a combination of these activities for admissibility to Part II of its Board examination can be met by documented evidence that at least 50% of the time is devoted to physical medicine and rehabilitation.

The 3-year internal medicine residency requirements are in part met by ABIM, recognizing 6 months' credit for physical medicine and rehabilitation residency training involving physical medicine and rehabilitation management of patients with internal medicine-related problems such as occurring in those with various rheumatologic, cardiovascular, pulmonary, stroke, and oncologic conditions. It is recommended that all training be completed at one academic institution; however, any deviation will require prospective approval by both Boards. Before the end of the R-2 level of training in either specialty, each Board would prospectively approve detailed curricular plans for a given trainee submitted by the two program directors. When two separate institutions are involved, there should be evidence of adequate coordination to provide an appropriate educational experience. Vacation is shared pro rata between the training time spent in internal medicine and in physical medicine and rehabilitation.

C. Special Agreement Between the American Board of Psychiatry and Neurology and the American Board of Physical Medicine and Rehabilitation

The American Board of Psychiatry and Neurology (ABPN) and the ABPM&R have approved the proposal that residents interested in dual certification in neurology and in physical medicine and rehabilitation can qualify to apply for admission to the certifying examinations of each Board by satisfactory completion of an integrated program planned and approved by both Boards prior to the end of the R-3 year, designed to be completed in a minimum of 72 months.

For purposes of this double-Boarding, both specialty Boards will require a 12-month basic clinical skills segment in internal medicine.

The ABPM&R requires a minimum of 36 months of accredited PM&R residency, and ABPN requires 36 months of accredited neurology residency. In order to decrease the total training time by 1 year, to a total of 72 months, 12 months of training in areas that satisfy the special requirements in neurology and physical medicine and rehabilitation would include 6 months of training in PM&R acceptable to the program director in neurology and 6 months of training in neurology that would be acceptable to the program director in PM&R.

It is recommended that all training be completed at one academic institution, or if two institutions are involved, adequate coordination should provide an appropriate educational experience that meets the requirements and approval of both Board. Before the end of the R-3 year of training in either specialty, each Board must approve the training plan for a given trainee submitted by the two program directors. Vacation is shared pro rata between the two training programs.

Application

The application form that must be submitted by an applicant for the examination leading to certification can be obtained only by writing to the executive director of the Board. The completed application shall contain a record of the candidate's undergraduate and postgraduate training and a copy of the medical degree diploma or certificate; a copy of the current medical license to practice in the 50 United States, Puerto Rico, or Canada, the program director's statement that the candidate has or is anticipated to have satisfactorily completed an approved graduate program; records of other graduate study, hospital staff appointments or teaching positions, and length of time in a practice limited to physical medicine and rehabilitation, medical papers published, and any other information the applicant deems relevant to the determination of the admissibility for examination.

In addition, the applicant must submit with the application the names of three psychiatrists or other physicians to whom the Board may write for professional and character references. At the option of the applicant, he or she may include the names of any additional physicians. The applicant should submit to the program director a form requesting the rating of the professional ability of the applicant. The program director should promptly return the completed form to the Board Office. No decision regarding admissibility to the examination will be made until the physicians from whom references are requested have replied.

All information submitted to the Board by the physician from whom a reference has been requested shall remain confidential and will not be disclosed to the candidate without the permission of the said physician. Strict confidentiality of references submitted is required to ensure that the Board receives complete and accurate evaluations of all applicants.
An applicant who plans to take Part I only must submit a fee of $700, $200 of which is a processing fee and nonrefundable. The fees must accompany the application.

Applicants applying for Part II must describe in a letter the professional time spent during his or her 1 year of clinical practice, fellowship, research, or a combination of these, and send an examination fee of $600. The applicant should also submit statements from two physicians, preferably Board-certified physiatrists, verifying the applicant's year in clinical practice, fellowship, research, or a combination of these according to acceptable professional, ethical, and humanistic standards. Possession of a valid and unrestricted license to practice medicine or osteopathy in one or more of the 50 United States or Puerto Rico or licensure in Canada, or an acceptable equivalent will be required. Evidence of licensure must be submitted with application for certification examinations.

Applicants who plan to take both Parts I and II, initially the same year, must send with the application the fee of $1,300. Two hundred dollars ($200), as heretofore mentioned, is a processing fee and nonrefundable. Physicians who have failed Part I or Part II (or both) can apply for admisssibility for reexamination during any subsequent examination period. Fees for reexamination are $500 for Part I or $600 for Part II, or, if both Parts I and II are taken the same year, the fee is $1,100.

The completed application form or letter of application, as applicable, and appropriate fee must be submitted by November 15 of the year before the scheduled examination. A penalty fee of $200 will be required before consideration of applications postmarked after November 15 and before December 15. Once a candidate is declared admissible, fees are forfeited if the candidate withdraws for any reason or does not appear for the examination.

The applicant must be scheduled to complete the graduate education or clinical practice requirements on or before August 31 following the scheduled examination date for which he/she has applied in order to have the application considered for the examination of that year. Except as hereafter provided, no fees paid hereunder will be refunded. Only in the event that an applicant withdraws his/her application prior to the meeting of the Board to act thereon, or in the event that an applicant is declared not admissible to the examination, will the Board return to the applicant the refundable portion of the fee. Currently there is no limit to the number of times a physician may apply for repeat examinations.

The Board is a nonprofit organization, and the fees of the candidates are used solely for defraying the actual expenses of the Board. The Directors of the Board serve without remuneration. The Board reserves the right to change the fees when necessary.

**Designation of Admissibility**

"Board admissible" is a term used by the Board to define the status of the candidate who has been accepted by the Board to take the examination for which the candidate has applied; designation of "Board admissible" does not continue beyond the date such examination is given, regardless of results. The Board does not accept any use of the term "Board-eligible" in lieu of documented admissibility.

A. For those applicants who have not previously applied, or who have previously applied and withdrawn their application, or who have previously applied and have been declared not admissible, the procedures required for applicants toward becoming admissible to Board examinations are as follows:
1. Timely filing of the completed application form and educational credentials with the Executive Director of the Board by the applicant.
2. Payment of the fee for the examination by the applicant.
3. Submittal of requested references.
4. Receipt of the program directors' and other requested references.
5. Reception of a letter of confirmation from the executive director of the Board to the candidate verifying that the applicant has fulfilled all requirements, and by Board action, has been declared admissible.

B. For applicants who are reapplying for Part I, having failed Part I, or who are applying for Part II, having successfully completed Part I, or who are reapplying for Part II, having failed Part II, but who have successfully passed Part I, the procedures required for applicants toward being designated admissible are as follows:
1. Submittal of a letter of application for the examination by the applicant to the executive director of the Board or, if required, the resubmittal of an application form. The letter should contain a statement describing the required clinical practice, fellowship, research, or a combination of these.
2. Payment of the examination fee by the applicant.
3. Receipt of two letters of verification of 1 year of clinical practice, fellowship, research, or a combination of these, preferably from Board-certified physiatrists.
4. Reception of a letter of confirmation from the Executive Director of the Board to the candidate verifying that the applicant has fulfilled all requirements, and by Board action, has been declared admissible.

C. Following the establishment of Board admissibility, the candidate will be notified of the time and place for the examination.

A candidate who fails Part I or Part II or both parts of the examination may reapply for admissibility for reexamination. This must be done before November 15 of the year before the scheduled examination. Currently there is no limit to the number of times a physician may apply for repeat examinations.

**Absence From Training**
The Board stipulates that a resident should not be absent from the residency training for more than 6 weeks (30 working days) yearly. Any leave time or absence beyond 6 weeks would need to be made up by arrangement with the program director. "Leave time" includes sick leave, vacation, maternity leave, leave for locum tenens, clinical trips, or work in another institution that is not an ACGME-accredited residency. Leave time or vacation may not be accumulated to reduce the overall duration of training. Institutional policies regarding absences will be respected.

**Forfeiture of Fees**

Once an applicant has been declared admissible and is a candidate, the fees will be forfeited if the candidate withdraws for any reason or does not appear for the examination.

**Examinations**

As part of the requirements for certification by the ABPM&R, candidates must demonstrate satisfactory performance in an examination conducted by the Board covering the field of physical medicine and rehabilitation.

The examination for certification is given in two parts. Part I is written, Part II is oral.

Part I (written) may be taken after the satisfactory completion of the specialized graduate education required by the Board outlined above.

Part II (oral) may be taken only after 1 year of clinical practice, fellowship, research, or a combination of these following residency training.

In the event a candidate taking both Part I and Part II in the same year fails Part I of the examination, results of Part II shall not be considered or disclosed.
Both the written and oral examinations will cover certain aspects of the basic sciences as well as clinical PM&R. Those basic sciences will include:

2. Physics: electricity, mechanics, biophysics of physical agents, and kinetic and functional systems.
3. Physiology: physiology of nerve, muscle, and bone; physiologic effects of the various physical agents used in physical medicine and rehabilitation; cardiopulmonary; cardiovascular; and genitourinary physiology; and physiology of exercise and of inactivity.
4. Pathology: histopathology of muscles, nerves, bones, joints, soft tissues, and central nervous system.
5. Other fundamental sciences: the applicant may be examined concerning his/her knowledge of other subjects related to PM&R, including related pharmacology, as well as methods of assessing psychosocial and vocational needs of patients.

The clinical aspects will include:

1. Diseases and conditions of all ages that come within the field of PM&R. These include various rheumatic diseases; neuromuscular diseases; cerebral and spinal cord injuries and diseases (e.g. cerebrovascular accidents, postoperative conditions of the brain and spinal cord, cerebral palsy, multiple sclerosis, etc.); and musculoskeletal diseases, including the large group of traumatic and orthopedic conditions.
2. The clinical use of such physical agents or methods as heat, water, electricity, ultraviolet radiation, massage, exercise, and rehabilitation techniques.
3. Diagnostic procedures including electromyography and electrodiagnosis.
4. A knowledge of the roles of other health professionals within or associated with the field of PM&R, such as the physical therapist, occupational therapist, recreational therapist, clinical psychologist, speech pathologist, medical social worker, and vocational counselor; and the ability to coordinate the services of such professionals.
5. An understanding of the basic principles of physical medicine and rehabilitation, and the ability to prescribe, manage, and supervise specific treatment to be executed by other health professionals.

Method of Examination

Part I and Part II of the board examination are given once each year, usually in May, at such times and places as the Board designates.

Part I is a written examination. This examination is divided into morning and afternoon periods of approximately 3 hours each. The questions are designed to test the candidate’s knowledge of basic sciences and clinical management as related to PM&R, and will be in the form of objective testing.

Part II is an oral examination. The oral examinations are given by the Directors of the Board with the assistance of selected guest examiners. Each candidate will have three 40-minute oral examinations with three separate examiners.

Candidates will be expected to present in a concise, orderly fashion evidence of their proficiency in the management of various clinical conditions that come within the field of PM&R. During the oral examination, questions will be asked about diagnostic procedures, therapeutic procedures, and patient management. The candidate should demonstrate familiarity with the literature of basic and clinical research, as well as recent significant literature pertinent to PM&R. Conciseness and clarity of statement is expected. Evidence of the professional maturity of the candidate in clinical procedures and of factual knowledge will be sought.

Unethical and Irregular Behavior

Candidates who apply to take the written and oral examinations must certify that the information they provide in their applications is true and accurate. If (1) any misrepresentation is discovered in the candidate’s application, in any other information submitted to the Board, or in the identity of a person applying to take or taking the examination; (2) any financial or other benefit is offered by a candidate to any director, officer, employee, proctor, or other agent or representative of the Board in order to obtain a right, privilege, or benefit not usually granted by the Board to similarly situated candidates; (3) any irregular behavior during the examination such as copying answers, sharing information, using notes, or otherwise giving or receiving aid is discovered by observation, statistical analysis of answer sheets, or otherwise; or (4) any portion of the candidate’s absence from the designated examination room for whatever reason and any duration is excused or is otherwise impermissible, the candidate in question shall be given written notice of the charges and an opportunity to respond in accordance with the appeals procedures set forth in the rules and regulations of the Board. If yes are imposed pursuant to the rules and regulations of the Board, the Board may notify the person(s) directly involved in the irregularity.

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Certification Requirements

The American Board of Physical Medicine and Rehabilitation

granted physicians in the practice of physical medicine and rehabilitation in any hospital or clinic are the prerogatives of that hospital or clinic, not of this Board.

The names of consenting diplomates of the Board appear in the Official American Board of Medical Specialties (ABMS) Directory of Board Certified Medical Specialists published by Marquis Who’s Who.

Recertification

Guiding Principles of Recertification

The achievement of the original certification of physical medicine and rehabilitation demonstrates that the individual has met the requirements of the ABPM&R.

The guiding principle of the recertification program of the ABPM&R is to foster the continuing development of excellence in patient care and all aspects of the practice of physical medicine and rehabilitation by its diplomates.

Goals of Recertification

The ABPM&R through its recertification program seeks to encourage, stimulate and support its diplomates in a program of self-directed, life-long learning through the pursuit of continuing medical education.

The recertification process will permit diplomates to demonstrate that they continue to meet the requirements of the ABPM&R.

Recertification will also provide continuing assurance to patients and families served, funding agencies and the public in general of the continuing up-to-date knowledge of physical medicine and rehabilitation diplomates.

Participants in the Recertification Process

Recertification is therefore offered on a voluntary basis to

1. All diplomates holding time-limited certificates issued by the ABPM&R; and

2. All diplomates holding non-time-limited certificates issued by the ABPM&R.

Diplomates with time-limited certificates may renew every 10 years through the process of recertification. By formal application to the ABPM&R and having satisfied the general requirements listed below, diplomates with time-limited certificates may take the recertification examination beginning 3 years prior to the expiration of their time-limited certification. To complete the recertification process diplomates holding time-limited certificates must then satisfy the special requirements described below and achieve a passing grade in the recertification examination of the ABPM&R.

Four years prior to the expiration of their time-limited certification, diplomates will be reminded by the ABPM&R again of the steps involved in the recertification process.

Diplomates holding non-time-limited certificates may apply for the recertification examination starting in 1999 by formal application to the ABPM&R and by having satisfied the general and special requirements. However, once holding a time-limited certificate in addition to a non-time-limited certificate (which will remain valid indefinitely) diplomates must follow the application process of diplomates holding time-limited certification.

Requirements for Recertification

A. General Requirements for Admissibility to the Recertification Examination

Applicants for recertification must meet the following general requirements:

1. Possession of a valid and unrestricted license to practice medicine in the United States, or territory of the United States or Canada.

2. Possession of a time-limited or a non-time-limited certificate from the ABPM&R.

3. Diplomates with time-limited certificates are automatically registered for the recertification process. The registration will be validated upon receipt of the annual maintenance fee starting with year 2 following the receipt of the time-limited certificate.

4. Diplomates with time-limited certificates will be notified regarding the option to participate in the recertification process. Upon written request the diplomates with non-time-limited certificates will be registered in the recertification process. This registration will be validated upon receipt of the annual maintenance fee 1 year following registration.

5. Completion of the ABPM&R application for recertification.

B. Special Requirements for Admissibility to the Recertification Examination

1. Completion of a total of 500 hours of continuing medical education credits during the 10-year recertification period (50 credits per year) is required. At least 300 hours of credits earned in the 10-year period must be AMA Category 1. The AMA Physicians’ Recognition Award will be accepted toward fulfillment of this requirement.

In order to satisfy the CME requirement, participants will be required to report their progress toward completing recertification CME requirements to the Board annually from the date of issuance of the time-limited certificate on a form to be supplied.

2. All candidates must successfully complete the evaluative component of the recertification program (ie, they must attain a passing grade in a practice-oriented, nonproctored, open-book, take-home examination).

Application

An application form to take the recertification examination may be obtained (as of 1999) by sending a written request to the office of the ABPM&R.

There is no limit on the number of times diplomates may attempt to complete the recertification process.

Examination

The examination will be offered for the first time in the year 2000 and annually thereafter.

The written examination for recertification will be clinically focused and offered in the form of a nonproctored, open-book, take-home examination. The examination will be prepared by the ABPM&R and will represent the broad range of professional activities encompassing the specialty. The profile of the examination will consist of test items relating to general psychiatry and test items relating to special emphasis areas of psychiatric practice from which the diplomate will select emphasis areas that most closely match their practice profiles. Overall, 50% of the examination will relate to general psychiatry and 50% will relate to more specialized areas of psychiatric practice.

Certificates

Diplomates with time-limited certificates successfully completing the recertification process will receive a new 10-year time-limited certificate with a starting date 10 years from the date of initial certification or the most recent recertification.

Diplomates with non-time-limited certificates receive a new additional time-limited certificate and receive a notation about this additional certification in The Official ABMS Directory of Medical Specialists published by the American Board of Medical Specialties (ABMS) in conjunction with Marquis Who's Who. In the case that their time-limited certification lapses their non-time-limited notation will continue to be listed.
American Board of Plastic Surgery

Gilbert P Gradinger, MD, Chairman, Burlingame, California
Stephen Arian, MD, Vice-Chairman, New Haven, Connecticut
William D Morain, MD, Secretary-Treasurer, Lebanon, New Hampshire
Elof Eriksson, MD, Boston, Massachusetts
Kenna S Given, MD, Augusta, Georgia
Frederick R Heckler, MD, Pittsburgh, Pennsylvania
Henry K Kawamoto, Jr, MD, Santa Monica, California
Paul N Manzon, MD, Baltimore, Maryland
Stephen J Mathes, MD, San Francisco, California
Mary H McGrath, MD, Washington, District of Columbia
Timothy A Miller, MD, Los Angeles, California
Henry W Neale, MD, Cincinnati, Ohio
Rayton F Rikkers, MD, Omaha, Nebraska
William B Riley, Jr, MD, Sugar Land, Texas
Martin C Robson, MD, Bay Pines, Florida
Robert L Ruberg, MD, Columbus, Ohio
Robert C Russell, MD, Springfield, Illinois
David J Smith, Jr, MD, Ann Arbor, Michigan
Frank L Thorne, MD, Seattle, Washington

(These criteria and conditions are subject to change without notice. All applicants are advised to contact the American Board of Plastic Surgery, Inc, to ascertain whether the information below is correct.)

Introduction

The American Board of Plastic Surgery, Inc, which was organized in June 1937 by representatives of various groups interested in this type of surgery, received recognition as a subsidiary of the American Board of Surgery in May 1938. The American Board of Plastic Surgery, Inc, was given the status of a major specialty board in May 1941 by action of the Advisory Board for Medical Specialties as approved by the Council on Medical Education of the American Medical Association, which has designated certain specialty fields as being suitable to be represented by specialty boards.

The Board is organized under the laws of the state of Illinois for charitable, scientific, and educational purposes. No part of its net earnings shall inure to the benefit of any private member, director, officer, or other individual, nor shall the board ever declare or make to any such persons any dividend or other distribution. Nothing herein, however, shall prevent the payment of reasonable compensation for services rendered or the reimbursement of reasonable expenses incurred in connection with the Board's affairs.

Plastic surgeons certified by the Board are listed in the Official ABMS Directory of Board Certified Medical Specialists, published by Marquis Who's Who, in cooperation with the American Board of Medical Specialties (ABMS).

Description of Plastic Surgery

Plastic surgery deals with the repair, reconstruction, or replacement of physical defects of form or function involving the skin, musculoskeletal system, cranio-maxillofacial structures, hand, extremities, breast and trunk, and external genitalia. It uses aesthetic surgical principles not only to improve undesirable qualities of normal structures but in all reconstructive procedures as well.

Special knowledge and skill in the design and surgery of grafts, flaps, free tissue transfer, and replantation is necessary. Competence in the management of complex wounds, the use of implantable materials, and in tumor surgery is required. Plastic surgery has been prominent in the development of innovative techniques such as microvascular and cranio-maxillofacial surgery, liposuction, and tissue transfer. The foundation of surgical anatomy, physiology, pathology, and other basic sciences is fundamental to this specialty.

Competency in plastic surgery implies a special combination of basic knowledge, surgical judgment, technical expertise, ethics, and interpersonal skills in order to achieve satisfactory patient relationships and problem resolution.

Sponsoring Organizations

The American Board of Plastic Surgery, Inc, consists of 19 directors who manage the affairs of the organization. Eighteen directors are elected by the Board from names submitted by the following sponsoring organizations:

Association of Academic Chairmen of Plastic Surgery
American Association for Hand Surgery
American Association of Plastic Surgeons
American College of Surgeons
American Society for Aesthetic Plastic Surgery, Inc
American Society for Surgery of the Hand
American Society of Maxillofacial Surgeons
American Society of Plastic and Reconstructive Surgeons, Inc
American Surgical Association
Canadian Society of Plastic Surgeons
Council of Regional Societies of Plastic and Reconstructive Surgery
Plastic Surgery Research Council
Society of Head and Neck Surgeons

Once elected to the Board, that person's obligation will be primarily to the Board and not to the sponsoring organization.

In addition, one director is elected by the Board from names submitted by the American Board of Surgery.

These 19 individuals are the directors of the Board. Surgeons who fulfill the requirements of the Board and who are granted certification by the Board are known as diplomates of the American Board of Plastic Surgery, Inc.

Purpose

The essential purposes of the Board are to:

1. Establish requirements for the qualifications of applicants who request a certificate of their ability in the field of plastic surgery in its broadest sense.
2. Conduct examinations of approved candidates who seek certification by the Board.
3. Issue certificates to those who meet the Board's requirements and pass the respective examinations.
4. Do and engage in any and all lawful activities that may be incidental or reasonably related to any of the foregoing purposes.

The Board is not an educational institution, and certificates issued by the Board are not to be considered degrees. The certificate does not confer on any person legal qualifications, privileges, or license to practice medicine or the specialty of plastic surgery. Standards of certification are clearly distinct from those of licensure; possession of a Board certificate does not indicate total qualification for practice privileges, nor does it imply exclusion of others not so certified. The Board does not purport in any way to interfere with or limit the professional activities of any licensed physician nor does it desire to interfere with practitioners of medicine and any of their regular or legitimate activities.

It is not the intent nor has it been the function of the Board to define requirements for membership on the staff of hospitals, or to define who shall or shall not perform plastic surgical operations. The Board is not a primary source of censure or primary review of ethical problems.
Policies

It is the Board's prerogative to determine the professional, ethical, moral, physical, and mental fitness of any candidate for its certificate.

The Board will consider opinions expressed concerning an individual's credentials only if they are in writing and signed.

It is the policy of the Board to maintain its autonomy and independence from political and economical considerations that might affect plastic surgery.

The Board recognizes the role of legitimate advertising in the changing medical scene, but it does not approve of advertising that arouses unrealistic expectations, that is false or misleading, that minimizes the magnitude and possible risks of surgery, or that solicits patients for operations that they might not otherwise consider. Such advertising is improper and inconsistent with the high standards of professional and ethical behavior implied by certification by the American Board of Plastic Surgery, Inc.

General Requirements

The following requirements for admissibility are in agreement with those promulgated by the ABMS.

1. The Board will accept only those persons whose major professional activity is limited to the field of plastic surgery.

2. Moral and ethical fitness must be satisfactory to the Board and in conformity with the Code of Ethics of the American Society of Plastic and Reconstructive Surgeons, Inc. Practices that do not conform therewith may result in rejection of an application or in deferral of examination until such matters have been resolved satisfactorily.

The Board may deny a candidate the privilege of sitting for an examination, or may refuse issuance of a certificate, if it is found by additional disclosures or a recent change in status that the candidate no longer meets the general or professional requirements.

Professional Requirements

The Board considers the requirements detailed in Prerequisite Training and Requisite Training to be minimal. Candidates are encouraged to take advantage of broadening experiences in other fields.

The Board reserves the right to:

1. Request lists of operations performed solely by the candidate for one or more years.

2. Request special and extra examinations: written, oral, or practical.

3. Request any specific data concerning the candidate that may be deemed necessary before making a final decision for certification.

4. Consider evidence that a candidate's practice after completion of training is not in accord with generally accepted medical or ethical standards, which may result in rejection of the application or deferral of the examination until such time as the matter has been satisfactorily resolved.

Prerequisite Training

A minimum of 5 years of training is required in order to fulfill the prerequisite and requisite requirements.

Undergraduate Medical or Osteopathic Education

Before beginning prerequisite training, candidates must have graduated from an accredited school of medicine in the United States, Puerto Rico, or Canada that grants a Medical Degree, or from an osteopathic school accredited by the American Osteopathic Association. Graduates of medical schools located outside the United States, Puerto Rico, and Canada must pass a medical science examination administered by the Educational Commission for Foreign Medical Graduates (ECFMG) and obtain ECFMG certification for admission to accredited post-graduate training programs in the United States (FMGEMS and the United States Medical Licensing Examination [USMLE]) are currently administered for this purpose. Or 2. Obtain a passing performance on either the 1-day ECFMG medical examination or the 2-day Visa Qualifying Examination (VQE). Or 3. Have completed a Fifth Pathway program in an accredited school of medicine in the United States or Canada.

Official Evaluation of Prerequisite Training

Official evaluation of prerequisite training by the Board is required prior to the initiation of residency training in plastic surgery. This simple preliminary step will prevent later disappointment. It is the responsibility of all prospective trainees in plastic surgery to secure this evaluation. Each prospective trainee must obtain a Request for Evaluation of Training Form from the Board Office prior to completion of his or her prerequisite training. Along with the completed Request for Evaluation of Training Form, prospective candidates are required to submit a copy of their medical school diploma.

Directors of accredited residency training programs in plastic surgery must require all prospective trainees to have an official evaluation and approval of their prerequisite training by the Board before they begin training.

Approval for residency training in plastic surgery will be provided to those individuals who clearly meet the Board's stated requirements. Further information for detailed credential review will be obtained on all other individuals where training was in other than accredited programs. Official evaluations will be made by the Committee on Credentials and Requirements. Individual officers or members of the Board cannot and will not make such estimates or rulings. It should be emphasized that the answers to many questions require a decision by one or more of the members of the Board. This applies particularly to evaluation of training and questions of admissibility. Decisions are referred to the entire Board at the next scheduled Board meeting. The process of reaching a final decision may require several months, since the full Board meets only twice annually. March 1 and September 1 are the last post-marked dates for submission of written special requests and documentation for consideration by the Committee on Credentials and Requirements.

The Board will issue neither a letter verifying prerequisite training nor an Application for Examination and Certification Form until the Request for Evaluation of Training Form has been received and approved.

Graduate Education in Surgery

The current prerequisite graduate education in surgery is summarized below:

For United States or Canadian Doctors of Medicine or Osteopathy

A candidate with a Medical or Osteopathic Degree granted in the United States or Canada must have completed one of the following:

1. A minimum of 3 years of clinical training with progressive responsibility in the same program in general surgery. Rotating internships will not be accepted in lieu of a clinical year in general surgery. This program must be approved by the Residency Review Committee for Surgery and accredited in the United States by the Accreditation Council for Graduate Medical Education (ACGME) or in Canada by the Royal College of Physicians and Surgeons for full training. The minimum of 3 years of clinical training with progressive responsibility in the same program in general surgery must be completed before the candidate enters a plastic surgery residency. The satisfactory completion of a minimum of 3 years of clinical training with progressive responsibility
in the same program must be verified in writing by the general surgery program director; or
2. An accredited residency training program in neurological surgery, orthopaedic surgery, otolaryngology, or urology. Prospective candidates may initiate residency training in plastic surgery following satisfactory completion of the entire course of training in the United States or Canada, as prescribed for certification by the American Board of Neurological Surgery, the American Board of Orthopaedic Surgery, the American Board of Otolaryngology, or the American Board of Urology. They must meet and comply with the most current requirements in these specialties. Satisfactory completion of training must be verified in writing by the training program director and evidence of current admissibility to the respective specialty board's examination process in the United States is required.

For United States Candidates With a Combined DMD or DDS/MD Degree
Satisfactory completion of a residency program in Oral and Maxillofacial Surgery approved by the American Dental Association (ADA) is an alternate pathway for prerequisite training prior to plastic surgery residency. The satisfactory completion of this training must be verified in writing by the oral and maxillofacial surgery program director. This program must include the integration of a medical school component resulting in a Doctor of Medicine (MD) degree. This combined training must also include a minimum of 24 months of progressive responsibility on surgical rotations under the direction of the general surgery program director after receipt of the MD degree. The general surgery program director must verify in writing the completion of 24 months of general surgery training, the level of responsibility held, inclusive dates, and specific content of rotation. Rotations in general surgery during medical school, prior to the MD degree, will not be considered as fulfilling any part of the 24-month minimum requirement. If the general surgery component is completed at an institution other than the sponsoring institution of the oral and maxillofacial surgery residency, then this training must be completed consecutively with all 24 months spent in the same general surgery program.

For Doctors of Medicine With Medical Degrees Granted Outside the United States or Canada
Satisfactory completion of an accredited residency training program in general surgery, neurological surgery, orthopaedic surgery, otolaryngology, or urology is required. Prospective candidates may initiate residency training in plastic surgery following satisfactory completion of the entire course of training in the United States or Canada, as prescribed for certification by the American Board of Neurological Surgery, the American Board of Orthopaedic Surgery, the American Board of Otolaryngology, the American Board of Surgery, or the American Board of Urology. They must meet and comply with the most current requirements in these specialties. Satisfactory completion of training must be verified in writing by the training program director, and evidence of current admissibility to the respective specialty board's examination process in the United States is required.

Verification of Prerequisite Training
To assure written verification from the program director under whom the candidate completed prerequisite training, the Board Office will provide the program director with a Verification Form for completion and return. It is the candidate's responsibility to (1) advise the program director that the Board will be soliciting a Verification Form and (2) determine that it has been completed and returned.

Requisite Training
Graduate Education in Plastic Surgery
Training in plastic surgery for not less than 3 years is required, and the final year must be at the senior level. Prospective candidates entering a plastic surgery residency accredited for 3 years of training must complete the entire 3 years, with 1 year of senior responsibility.

Candidates beginning plastic surgery residency on or after July 1, 1995, will be required to complete both years of a 2-year program in the same institution or the last 2 years of a 3-year program in the same institution. In either instance, the final year must be at the senior level.

Training in plastic surgery must be obtained in either the United States or Canada. The Board recognizes training in those programs in the United States that have been reviewed by the Residency Review Committee for Plastic Surgery and accredited by the Accreditation Council for Graduate Medical Education or those programs in Canada approved by the Royal College of Physicians and Surgeons of Canada.

Content of Training
Candidates must hold positions of increasing responsibility for the care of patients during these years of training. For this reason, major operative experience and senior responsibility are essential to surgical education and training.

An important factor in the development of a surgeon is an opportunity to grow, under guidance and supervision, by progressive and succeeding stages to eventually assume complete responsibility for the surgical care of the patient.

It is imperative that residents hold positions of increasing responsibility when they obtain training in more than one institution, and 1 full year of experience must be at the senior level. The normal training year for the program must be completed. No credit is granted for part of a year of training.

The Board considers a residency in plastic surgery to be a full-time endeavor and looks with disfavor upon any other arrangement. The minimum acceptable training year is 48 weeks. Should absence exceed 4 weeks per annum for any reason, the circumstances and possible make-up time of this irregular training arrangement must be approved by the Residency Review Committee for Plastic Surgery, and documentation of this approval must be provided to the Board by the program director.

Training in plastic surgery must cover the entire spectrum of plastic surgery. It should include experience in both the functional and aesthetic (cosmetic) management of congenital and acquired defects of the head and neck, trunk, and extremities. Sufficient material of a diversified nature should be available to prepare the trainee to pass the examination(s) of the Board after the prescribed period of training. If the available material on a service is inadequate, the program director may correct the deficiency by establishing an affiliation with one or more surgeons on other services within that hospital or by regular rotation of residents on other approved affiliated services in order that a broad experience might be obtained. The trainee should be provided an opportunity to operate independently on suitable cases under more remote supervision.

This period of specialized training should emphasize the relationships of basic science—anatomy, pathology, physiology, biochemistry, and microbiology—to surgical principles fundamental to all branches of surgery and especially to plastic surgery. In addition, the training program must provide in-depth exposure to the following subjects: the care of emergencies, shock, wound healing, blood replacement, fluid and electrolyte balance, pharmacology, anesthesiology, and chemotherapy.
Accredited Residency Programs

Information concerning accredited training programs may be found in the Graduate Medical Education Directory published by the American Medical Association (AMA) under the aegis of the ACGME. Copies of this directory are available at many medical schools and libraries, or candidates may order the directory directly from the AMA by calling toll free 1 800 621-8335, or by writing to: Order Department OP416796, American Medical Association, PO Box 109090, Chicago, IL 60610-9090.

The Board does not inspect or approve residencies. The Residency Review Committee for Plastic Surgery (RRC) Inspects and makes recommendations for or against approval of a residency training program in plastic surgery only after the director of the residency has filed an application for approval with the Secretary of the Residency Review Committee for Plastic Surgery (515 N State St, Chicago, IL 60610; 312 464-5404). The RRC consists of nine members, three representatives from each of the following: The American Board of Plastic Surgery, Inc, the American College of Surgeons, and the American Medical Association.

Neither the Board nor its individual members can be responsible for the placement of applicants for training. The Board does not maintain a list of available openings in programs. Prospective candidates seeking accredited training in plastic surgery should correspond directly with the directors of those training programs in which they are interested.

Most plastic surgery residencies participate in a special Plastic Surgery Matching Program. (For information, contact Plastic Surgery Matching Program, PO Box 7999, San Francisco, CA 94120; 415 923-3977.)

Nonapproved Residencies

No other residencies in either the United States or Canada or other countries are acceptable in lieu of those specified above. This in no way implies that quality training cannot be acquired elsewhere, but the Board has no method of evaluating the quality of such programs and must be consistent in its requirements.

The Board grants no credit for training, residency, and/or experience in disciplines other than those named.

Applying for Examination and Certification

The prime purpose of the Board is to pass judgment on the education, training, and knowledge of broadly competent and responsible plastic surgeons. Certification by the Board indicates qualification of a specialist at a superior level of excellence. The quality of training of surgeons, as shown by their successful completion of the Board examinations, will be reflected in their ability to achieve good results in practice.

The Board will issue no letters attesting to admissibility for its examinations to any person, institution, or organization until this formal application, along with the required supporting documents, has been received and approved.

Application Process

In order to be admitted to the examination process leading to Board certification, prospective candidates should write to the Board Office requesting application materials during the last 2 months of their residency. An Application for Examination and Certification Form will be provided. This should be completed and submitted to the Board Office immediately following the completion of a candidate’s residency training in plastic surgery. Prospective candidates who do not contact the Board Office within 2 years after completion of their residency in plastic surgery will not be considered for admission to the examinations leading to Board certification.

Deadline for Submission of Application Material

Applications for admission to the upcoming Qualifying Examination to be given in the spring of the following year must be postmarked on or before December 15 to avoid a late penalty fee.

Licensure

All candidates must have a currently valid registered full and unrestricted license to practice medicine in a state, territory, or possession of the United States or in a Canadian province, and must continue to be licensed throughout the certification process. A temporary limited license such as an educational, institutional, or house permit is not acceptable. A photocopy of an active registration certificate bearing a date that will be valid at the time of examination(s) must be submitted by the candidate.

Commissioned officers of the medical service of the armed forces of the United States or Canada on active duty need not present evidence of current registration of licensure, but must provide appropriate information regarding their status.

Letters of Recommendation

If a candidate has completed training in more than one program in plastic surgery, the program director of the first year of training must verify to the Board in writing the satisfactory completion of that year of training. Additionally, the Board may require favorable evaluations and verification from other surgeons.

Required Signatures

Plastic surgery residents who completed their training prior to June 30, 1991, will be sent an Application for Examination and Certification Form that must be completed accurately and signed by them. It must also be signed twice by their program director, once acknowledging the completion of their residency in plastic surgery and once recommending them for admission to the examination process.

Residency Graduation Form

For plastic surgery residents completing their residency on June 30, 1991, and thereafter, a Residency Graduation Form will be provided by the Board to the program director for completion at the end of the candidate’s residency training in plastic surgery. A single form will be sent for each candidate and will require signatures in two places. The first signature, by the program director, will attest that the individual has completed a residency training program in plastic surgery accredited by the Residency Review Committee for Plastic Surgery under the program director’s direction and that the accredited number of years included a year of senior responsibility. The second signature will signify that the program director recommends the individual for admission to the examination process of the Board.

If the program director elects not to sign either statement, the director is required to provide a full written explanation of the reason the required signature(s) is not provided. The individual’s application cannot be processed nor will the individual be admitted to the examination process of the Board without both required signatures.

The Board has asked each program director to complete a Residency Graduation Form within 30 days of completion, by the trainee, of the prescribed duration of the program.

The program director must record any deficiencies that were responsible for the lack of signature(s) and discuss these with the individual. This written communication must be given to the individual and a copy must be forwarded to the Board Office. If further educational training or experience is completed, the program director should request, within 30 days, that another Residency Graduation Form be sent for the required signature(s). If the individual is still felt to be deficient and not recommended for admission to the examination process of the Board, the program director
again must communicate the cause for the lack of signature(s) to the Board Office.

Failure on the part of the program director to complete the Residency Graduation Form within the stipulated framework will be considered an abrogation of the responsibility of the program director and the Residency Review Committee for Plastic Surgery shall be so notified.

Notification of Admissibility

A candidate whose Application for Examination and Certification Form is approved will be notified in writing. An Information Form and Identification Form will be sent with this notification. They are to be completed and returned to the Board Office within 30 days of notification. Failure to complete and return these forms will prevent the candidate from receiving further information pertaining to the Qualifying Examination.

If it appears that the stated requirements have not been met, further details may be requested. This information will be reviewed by the Committee on Credentials and Requirements. The Committee meets twice yearly (spring and fall) and decisions are not rendered at any other time.

Until the application has been received and approved, the Board will not inform any person, institution, or organization that a candidate is admissible to the examination process.

Admissibility to the Examination Process

Each qualified candidate shall be entitled to take an examination(s) as required by the Board. All candidates must comply with the current requirements in effect for the year in which the examination is taken regardless of the time the original application was approved. It is the responsibility of candidates to seek information concerning the current requirements for certification by the Board. The Board does not assume responsibility for notifying candidates of changing requirements or the impending loss of admissibility to take an examination. A new Booklet of Information is published yearly in July.

All candidates taking an examination of the American Board of Plastic Surgery, Inc., must complete the entire examination.

Certification by any other specialty Board does not exempt candidates from any part of the examination process.

Admissibility to the Qualifying (Written) Examination

Candidates admissible to the examination process may take the Qualifying Examination in the spring of the year following successful completion of residency in plastic surgery, provided the Application for Examination and Certification Form is approved.

Candidates approved for admission to the Qualifying Examination prior to July 1, 1991, will be offered seven consecutive opportunities to appear for the Qualifying Examination. Candidates may take the Qualifying Examination five times during this 7-year period. Candidates who have not passed the Qualifying Examination during this period will no longer be candidates for examination.

Candidates approved for admission to the Qualifying Examination, July 1, 1991, and thereafter, will be offered five consecutive opportunities to appear for the Qualifying Examination. Candidates may take the Qualifying Examination three times during this 5-year period. Candidates who have not passed the Qualifying Examination during this period will no longer be candidates for examination.

In either situation, the satisfactory completion of an additional year of training is required before a candidate can be considered for readmission to the Qualifying Examination. This additional year of training can be taken in a formal residency or a suitable plastic surgery preceptorship. This additional year of training must be approved in advance by the Committee on Credentials and Requirements of the Board. Evidence of satisfactory completion of this year of training is required before further consideration for examination will be made.

If the Board approves the candidate's request for readmission to the Qualifying Examination, two more consecutive opportunities to appear for the Qualifying Examination will be offered. Once approval is received, the candidate must sit for examination at the first available opportunity. Candidates who do not successfully pass the Qualifying Examination within these two consecutive opportunities will be required to repeat an entire plastic surgery residency to again be admissible to the examination process.

Note: Please see "Practice Requirement," under Admissibility to the Certifying (Oral) Examination for admissibility to that examination.

Admissibility to the Certifying (Oral) Examination

Practice Requirement

1. Candidates approved for admission to the examination process prior to July 1, 1986, do not have a practice requirement.

2. Candidates approved for admission to the examination process between July 1, 1986, and July 1, 1988, must have been in the independent practice of plastic surgery for at least 2 years.

3. Candidates approved for admission to the examination process after July 1, 1988, must have been in the independent practice of plastic surgery in the same locale for at least 2 years. These years need not be consecutive.

4. The 12-month case list must come from cases done in the independent practice of plastic surgery beginning January 1 and ending December 31 of the year preceding the year in which the Certifying Examination is to be taken.

5. A fellowship is not considered independent practice.

For candidates approved for admission to the examination process prior to July 1, 1991, the last admisibility date for the Certifying Examination shall be December 31 of the seventh year after passing the Qualifying Examination and completion of the 2-year independent practice of plastic surgery. For candidates approved for admission to the examination process July 1, 1991, and thereafter, the last admisibility date for the Certifying Examination shall be December 31 of the fifth year after passing the Qualifying Examination and completion of the 2-year independent practice of plastic surgery.

For admission to the Certifying Examination, candidates must be actively engaged primarily in the practice of plastic surgery and hold active operating privileges in a hospital approved by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) or its Canadian equivalent.

Prior to becoming admissible to the Certifying Examination, candidates must have passed the Qualifying Examination and have fulfilled the 2-year independent practice requirement as it applies to them.

Candidates approved for admission to the examination process prior to July 1, 1991, will be offered seven consecutive opportunities to appear for the Certifying Examination. Candidates may take the Certifying Examination five times during this 7-year period. Candidates who have not passed the Certifying Examination during this period will no longer be candidates for examination.

Candidates approved for admission to the examination process, July 1, 1991, and thereafter, will be offered 5 consecutive opportunities to appear for the Certifying Examination. Candidates may take the Certifying Examination three times during this 5-year period. Candidates who have not passed the Certifying Examination during this period will no longer be candidates for examination.

In either situation, the satisfactory completion of an additional year of training is required before candidates can be considered for readmission to the Certifying Examination. This additional year of training can be taken in a formal residency or a suitable plastic sur-
gery preceptorship. This additional year of training must be approved in advance by the Committee on Credentials and Requirements of the Board. Evidence of satisfactory completion of this year of training is required before further consideration for examination will be made.

If the Board approves the candidate's request for readmission to the Certifying Examination, two more consecutive opportunities to appear for the Certifying Examination will be offered. Once approval is received, the candidate must sit for examination at the first available opportunity. Candidates who do not successfully pass the Certifying Examination within these two consecutive opportunities will be required to repeat an entire plastic surgery residency to again be admissible to the examination process.

Fee Schedule

Registration ($400 US Currency)
The registration fee must be submitted with the application and is not refundable.

Qualifying (Written) Examination ($800 US Currency)
The fee for the Qualifying Examination must be submitted when the reply card requesting examination is returned to the Board Office. The fee for the Qualifying Examination must accompany the card only if a candidate wishes to be scheduled for the examination.

Certifying (Oral) Examination ($1,200 US Currency)
Beginning in 1994, a $500 (nonrefundable) fee must be enclosed with the 12-month case list to provide for review of the case list and selection of ten cases for preparation as Case Reports. The balance of the examination fee ($700) must be submitted with the reply card requesting a reserved examination slot.

Fees must be submitted in United States currency only. Foreign currencies, including Canadian, are unacceptable.

A charge of $50 will be made whenever a check in payment of a fee is returned for nonpayment.

Fees are subject to change by the Board. The fee schedule applicable to current examinations will apply regardless of when a candidate is approved for admission to the examination process.

The Board is a nonprofit organization, and the fees of candidates are used solely for defraying the actual expenses of the Board. The directors of the Board serve without remuneration. Because of the limited number of plastic surgeons certified by this Board, it may be necessary for the Board to request a voluntary annual contribution from its diplomats.

Repeat Examination Fee
Fees for repeat examinations are the same as for the current original examinations.

Refunds
For the Qualifying Examination, a refund of the examination fee (less a processing charge of $200) will be granted, provided the candidate submits a written request for withdrawal postmarked at least 30 calendar days prior to the date of the examination. For the Certifying Examination, a refund of the examination fee (less a processing charge of $300) will be granted, provided the candidate submits a written request for withdrawal postmarked at least 30 calendar days prior to the date of the examination.

Candidates who notify the Board Office in writing postmarked less than 30 calendar days prior to the examination date of their intent to withdraw, or who fail to appear for examination, will forfeit the entire fee. The Board may waive this rule if the circumstances warrant.

Qualifying (Written) Examination
The Qualifying Examination will be conducted in the spring each year or at any other time deemed suitable by the Board. The examination will be given on the date specified and at the time specified. No exceptions will be made, and special examinations will be given only under unusual circumstances (see Examination of Candidates with Disabilities under Special Situations).

Announcement Information
Candidates who are admissible to the Qualifying Examination will be sent annually, throughout the period of admissibility, an Announcement Letter, Booklet of Information, reply card, and a hotel reservation card, approximately 3 months before the date of the examination, to be given in the spring of that year. When the reply card is received, candidates must signify their intent to take the examination by completing and returning the reply card and examination fee immediately to the Board Office.

Both sides of the reply card must be completed, otherwise candidates will not be scheduled for examination if their hospital appointments are not recorded.

Candidates are responsible for their own travel, hotel accommodations, and expenses. A hotel reservation card will be included with the reply card. Candidates may use this if they wish to stay in the hotel at which the examination is to be given.

Admission to Examination
If the returned reply card and examination fee for the Qualifying Examination are not postmarked on or before March 1, a late penalty fee of $200 will apply.

Reply cards and examination fees postmarked March 2 up to and including March 15 will be considered only on a space available basis and the late penalty fee of $200 must accompany these items. Reply cards and examination fees postmarked after March 15 will not be accepted for admission to the spring Qualifying Examination.

(The names of candidates who are late returning the reply cards and examination fees will be kept on file. If openings develop by the withdrawal of other candidates, the late candidates may be admitted in the order of the receipt of the reply cards. No candidate will be admitted less than 4 weeks preceding the examination.)

Once candidates have been scheduled for the Qualifying Examination, they will be sent an admission card 5 to 6 weeks before the date of the examination. Candidates must present their admission card when they register for the examination at both the morning and afternoon sessions. On this card will be printed the candidate's name; candidate number; the date, time, and location of the examination; the specific room in which candidates are to take the examination; and the "result mailing date." Candidates must use their candidate number throughout the examination. Late arrival may result in denial of admission to the examination.

Advise the Board Office immediately by telephone (215 587-9822) if the admission card is lost prior to the examination.

Withdrawal From Examination
Candidates wishing to withdraw from the examination must send written notification postmarked at least 30 calendar days before the date of the examination. The examination fee will be refunded less a processing charge of $200. Candidates who withdraw from the examination after this date or who fail to appear for the examination will forfeit the entire fee. The Board may waive this rule if the circumstances warrant.

Registration and Administration of the Examination
All candidates must take the entire examination on the same day and at the same time.

Candidates must register for the morning and afternoon sessions at the date, time, and location specified on their admission card. If
for any reason candidates are delayed or cannot arrive on time, he or she must notify the proctor or the Board Office. If a candidate is unable to attend the examination, he or she must notify the Board Office either by letter or by telephone prior to the time of registration for the morning session. Anyone who is more than 30 minutes late will not be admitted to the examination.

The Board Office will provide each candidate with lead pencils for use during the examination. No other writing implements may be used.

Candidates are not permitted to bring any notes, textbooks, or other reference materials into the examination. Scratch paper is not permitted, but space for notes and calculations is provided in the examination booklet.

Examination booklets are copyrighted and are the sole property of the American Board of Plastic Surgery, Inc. They must not be removed from the test area or reproduced. Reproduction of copyrighted material is a federal offense.

Change of Address

If a candidate's address, as it appears on the admission card, is incorrect or will change before the "Result Mailing Date," please enter the corrected or new address on the back of the admission card in the space provided before turning it in to a proctor at the end of the afternoon session. Admission cards will be collected from all candidates at the conclusion of the examination.

Examination Schedule

The Qualifying Examination will consist of a morning session and an afternoon session. The sessions are not separate examinations, but are graded together as one examination and will not be separately administered.

The morning session is 3 hours and 15 minutes in duration and the afternoon session is 3 hours in duration, and both sessions will consist of multiple choice questions of two types (one best answer or multiple true-false). In general, each test item consists of a question, a case history, or a situation followed by a list of possible answers. Instructions for completion of each type are given in the Examination Booklet that candidates will receive at the examination. Included in each Examination Booklet is an Answer Sheet upon which candidates must record their answers by filling in the appropriate circle (in pencil).

Content of the Examination

The subjects covered in the examination are listed below, and both sessions will cover the entire field of plastic surgery, with no differentiation in content between the morning and afternoon sessions.

1. Basic techniques, wound healing, microsurgery, transplantation.
2. Burns, sepsis, metabolism, trauma, resuscitation, nutrition, endocrinology, shock, hematology.
3. Pre- and postoperative care, anesthesia, cardiorespiratory care, complications, clinical pharmacology.
4. Tumors of the head and neck, skin, and breast; including treatment by radiation therapy, immunotherapy, chemotherapy, and surgery.
5. Trunk, lower extremity, musculoskeletal system, pressure ulcers, rehabilitation.
6. Hand, peripheral nerves, rehabilitation.
7. Maxillofacial and craniofacial surgery and microsurgery.
8. Congenital anomalies, genetics, teratology, facial deformity, speech pathology, gynecology, and genitourinary problems.
9. Aesthetic (cosmetic) surgery, psychiatry, and legal medicine.
10. Basic knowledge of pathology (eg, the biologic behavior of neoplasms, inflammation, and repair).

The questions for the examination cover subjects considered to be of fundamental importance to competent performance in the field of plastic surgery. Every effort is made to avoid "trick" questions, ambiguity, and questions involving irrelevant facts. All questions are analyzed by psychometric techniques to ensure their quality.

Candidates will pass or fail on the strength of their performance on the entire Qualifying Examination.

Results

Letters of notification of the results of the Qualifying Examination will be mailed on the date indicated on the admission card. The time period between administration of the examination and notification is necessary to allow for extensive analysis and to ensure that individual results are reliable and accurate.

Results of the examination will be divulged to no one until after the Board letter has had time to reach candidates. If a week has elapsed after the "Result Mailing Date" and candidates still have not received the letter from the Board, they may then call for information. Information will be given to no one but a candidate personally. The Board staff will verify a candidate's identity prior to releasing results to them.

Pass

If a candidate passes the Qualifying Examination, he or she will be informed of this fact.

Only those candidates who have submitted a 12-month case list completion acceptable to the Board, along with the $500 non-refundable fee, will be sent an Announcement Letter, Booklet of Information, reply card, and a hotel reservation card approximately 3 months in advance of the date and place of the next Certifying Examination. Note, however, that the Board requires that candidates for certification be in the independent practice of plastic surgery for at least 2 years before they may take the Certifying Examination, only if their application was approved after July 1, 1986. Candidates beginning the independent practice of plastic surgery on July 1, 1989, and thereafter, must have completed at least 2 years of practice, in the same locale, before they may take the Certifying Examination.

The 2 years of practice need not be consecutive but the candidate must be in practice during the 12-month period required for compilation of the case list. Currently, that period ends on December 31 of the year preceding the Certifying Examination.

Fail

If a candidate fails the Qualifying Examination, he or she will be informed of this fact.

In case of failure, the candidate must repeat the entire Qualifying Examination.

Each candidate will receive a single final grade for the entire examination. To complete the Qualifying Examination successfully, candidates must achieve a passing grade for the entire examination.

The score on the examination will be determined by the total number of alternatives answered correctly. Therefore, candidates are encouraged to answer all items. Candidates will receive an individual computer-generated letter concerning their performance on the examination.

The Board will obtain from an appropriate contractor a report, which will be sent to candidates' plastic surgery residency training directors and to the Residency Review Committee for Plastic Surgery, concerning the performance of the candidates on the Qualifying and Certifying Examinations.

Hand Scoring

Hand scoring of the Qualifying Examination will be performed upon written request. To request hand scoring, candidates must write to the Board Office within 30 days from notification of the results. Candidates will be responsible for an extra charge for hand scoring of
the examination. This charge will be determined by the Secretary-
Treasurer of the Board.

Certifying (Oral) Examination

The Certifying Examination will be conducted each fall or at such
other time as deemed suitable by the Board. The examination will
be given on the dates and at the times specified. No exceptions will
be made.

Candidates will be deemed admissible to the Certifying Examina-
tion only if they
1. Have passed the Qualifying Examination
2. Have fulfilled the 2-year independent practice of plastic surgery
   as it applies to them
3. Have submitted a 12-month case list compilation acceptable to
   the Board (see Instructions for Data Compilation and Submis-
   sion of Data), and
4. Are actively engaged primarily in the practice of plastic surgery
   and hold active operating privileges in a hospital approved by the
   Joint Commission on Accreditation of Healthcare Organizations
   (JCAHO) or its Canadian equivalent.

Instructions/Information Pertaining to the November
10–12, 1994 Certifying (Oral) Examination

Announcement Information

Candidates who are deemed admissible to the Certifying Examina-
tion will be sent annually, throughout their period of admissibility,
an Announcement Letter, Booklet of Information, reply card, and a
hotel reservation card, approximately 3 months before the date of
the examination to be given in the fall of that year. When the reply
card is received, candidates must signify their intent to take the ex-
amination by completing and returning the reply card and examina-
tion fee immediately to the Board Office.

Both sides of the reply card must be completed, otherwise candi-
dates will not be scheduled for examination if their hospital ap-
pointments are not recorded.

Candidates are responsible for their own travel, hotel accommoda-
tions, and expenses. A hotel reservation card is included with the
reply card. Candidates may use this card if they wish to stay in the
hotel at which the examination is to be given.

Admission to Examination

If the returned reply card and balance of the examination fee
($700) for the Certifying Examination are not postmarked on or be-
fore September 1, a late penalty fee of $300 will apply.

Reply cards and balance of the examination fee ($700) post-
marked September 2 up to and including September 15 will be con-
sidered only on a space available basis and the late penalty fee of
$300 must accompany these items. Reply cards and balance of the
examination fee ($700) postmarked after September 15 will not be
accepted for admission to the fall Certifying Examination.

(The names of candidates who are late returning the reply cards
and balance of the examination fee [$700] will be kept on file. If
openings develop by the withdrawal of other candidates, the late
candidates may be admitted in the order of the receipt of reply
cards. No candidate will be admitted less than 4 weeks preceding
the examination.)

Once candidates have been scheduled for the Certifying Examina-
tion, they will be sent an admission card 5 to 6 weeks before the
date of the examination. On this card will be printed the candida-
tee's name and address, the assigned candidate number, the date
and time to report, the location of the examination, the specific
room in which candidates are to assemble, and the "Result Mailing
Date."

At the same time, the Board Office will also mail candidates ten
folders for the binding of the Board selected case reports and labels
in a separate large envelope. It is imperative that candidates place
the assigned candidate number, which appears on the admission
card, on the label affixed to the cover of each one of the case re-
ports, along with the other required information. See Requirements
for Case Reports.

Advise the Board Office immediately by telephone (215 587-
9322) if the admission card is lost prior to the examination.

Withdrawal From Examination

Candidates wishing to withdraw from the examination must send
written notification postmarked at least 30 calendar days before the
date of the examination. The examination fee will be refunded less
a processing charge of $300. Candidates who withdraw from the ex-
amination after this date or who fail to appear for the examination
will forfeit the entire examination fee. The Board may waive this
rule if the circumstances so warrant.

Requirements for Case Reports

The following materials, collated in this order, must be present in
each of the case reports submitted.

1. A brief narrative summary of the preoperative, operative, and post-
operative course of the patient. Include a final separate para-
graph entitled "outcome" and indicate here the outcome of the
treatment and the final condition of the patient. This paragraph
will appear at the bottom of the same page as the narrative
summary.

2. Pre- and postoperative photographs; approximately 3½x5-inch
black-and-white or color prints glued on 8½x11-inch white bond
paper. Intraoperative photographs are strongly recommended.
Diagrams or simple drawings may be substituted for intraopera-
tive photographs. Descriptive legends and dates of the photos
must be placed adjacent to each photo. Transparencies will not
be accepted.

3. Photocopies of the original operative reports.
4. Photocopies of the original anesthetic records.
5. Photocopies of pertinent laboratory data.
6. Photocopies of the pathologist's report.
7. Photocopies of pertinent x-rays or scans. (Actual x-rays are unac-
ceptable.) Each x-ray or scan should be dated in a manner that is
easily visible.

8. Photocopies of the original progress notes including the patient's
history and physical examination, and all postoperative and post-
discharge progress notes, both in the hospital and from the office
records, including the initial consultation. If legibility is a prob-
lem, include a typewritten copy also.

9. Photocopies of the actual bill(s) submitted to the patient. The ac-
tual dollar amount of the fee should be deleted.

In the event that more than one procedure is performed on
the patient during the 12-month case list period include all pro-
ducts and hospitalization that fall within the 12 months. You are
not required to document procedures that fall prior to or after
the 12-month period. However, if these procedures increase un-
derstanding of the case they may be included at the candidate's
discretion. Documentation for procedures falling outside the 12-
month period does not have to be complete—the candidate may
be selective here.

Note: If the records are not in English, an accurate and complete
English translation must accompany them.

Presentation of Case Reports

Candidates will be asked to assemble 10 Board selected case re-
ports in the folders provided by the Board and to bring these case
reports to the fall Certifying Examination.
During the examination candidates must be prepared to defend the choice of operation and to present alternate treatment plans considered. The Board, at its discretion, may request certification of case reports by the hospital(s) where candidates performed the operation(s).

Hospital and office records must clearly identify the candidate as the attending physician and surgeon. However, the candidate need not necessarily be the admitting physician, so long as he or she is clearly the attending plastic surgeon. Cases done by a resident under the candidate's supervision may be chosen by the Board and will be considered in the same way as cases done personally.

Each report must be typed or reproduced on standard, letter-sized white paper (8½ x 11-inch) with the candidate's full name and assigned candidate number, the number of the case, the hospital (or other identifying) number, the principal diagnosis, and the primary operation listed on the title page. Bind the cases singly in the folders supplied by the Board. Do not place any pages or photographs in acetate (sheet protectors). Photos must be glued to white bond paper.

Group all operative notes, anesthesia records, photographs, etc., together in chronologic order such that all operative notes will appear in one location in the book, all photographs in one location, etc.

In the circumstances of excessively long hospitalizations resulting in progress note sections of such thickness that they cannot be bound in one case folder, this section may be debrided of nonpertinent notes and then bound separately, brought to the examination, but retained by the candidate and not turned in with the Case Reports. A notation of this necessity should appear at the beginning of the progress note section. Thus the candidate will produce this extra material only upon request of their examiners.

Candidates must provide a list of all 10 cases. The list must be typed on a single sheet of white bond paper and bound at the beginning of the first case in its folder. Identify the list, with your full name and assigned candidate number. For each case, include the following information:

1. Category
   a. Congenital
   b. Hand
   c. Maxillofacial trauma
   d. Breast
   e. Aesthetic
   f. Burns
   g. Lower extremity, perineum, trunk
   h. Head and neck
   i. Microsurgery
   j. Skin
   k. Other
2. Patient's hospital (or other) identifying number
3. Primary diagnosis
4. Procedure(s) done by the candidate

The Board regards the Case Reports submitted as important evidence of the candidate's basic ability to carry out plastic surgical procedures and to organize and present information in a succinct and complete fashion.

Improper or disorganized preparation of this material will be sufficient cause to disqualify a candidate for continued examination.

Disqualification on Case Reports

If a candidate is disqualified for continuation in the examination process because the case reports are judged unacceptable (for whatever reason) it will not be recorded as a failure, but is counted as one of the opportunities to appear. However, because the Board has incurred expenses to provide a candidate with an examination, the examination fee less the processing charge of $300 will be refunded.

Examination Schedule

The oral examination for candidates will occupy 1 full day. Late arrival may result in denial of admission to the examination. The Board Office will assign the day (second or third day) on which candidates will be examined. This assignment is by random computer selection. The Board regrets that half of the candidates (those selected for examination on the third day) will have an empty day (the second day). However, it is still necessary that all candidates turn in cases on the first day in order for examiners to have a full day for review of the cases.

First Day

8:00 am–9:00 am
All candidates register and hand deliver case reports to the room designated on the admission card.

11:30 am–12:30 pm
Orientation Conference for candidates for discussion of Oral Examination format. Attendance is mandatory.

1:00 pm–7:00 pm
Candidates should be available in their hotel rooms (or reachable by telephone) during this time frame in case the Board wishes to contact them regarding the examination on their cases.

Second Day

7:00 am
Candidates assemble for instructions

7:45 am–12:30 pm
Oral Examinations—Case Reports

1:45 pm–6:30 pm
Oral Examinations—Theory and Practice

6:15 pm–7:15 pm
Voluntary debriefing session

Third Day

7:00 am
Candidates assemble for instructions

7:45 am–12:30 pm
Oral Examinations—Case Reports

1:45 pm–5:30 pm
Oral Examinations—Theory and Practice

6:15 pm–7:15 pm
Voluntary debriefing session

Note: The times of the above Examination Schedule are subject to change and will be finally announced on the morning of the examination.

Instructions and Procedures

Candidates will receive specific instructions concerning the examination at the assembly on the morning of the day of examination. Candidates will also be given a schedule showing the time and the location of each examination session. Failure to appear on time for any session of examination will lead to a grade of fail on that section. Candidates should be outside the examination room 5 minutes before the assigned time. It is not necessary for candidates to announce their presence. If, however, a candidate has not been invited into the examination room by the examiners by 10 minutes after the scheduled time, the candidate should notify the temporary Board Office immediately.

The Board has made every effort to assign candidates to examiners whose knowledge of the candidate's background would not bias their evaluation of performance. If candidates find that an exam-
iner to whom they have been assigned played a role in their training, is a close friend or relative, is a close professional associate, or has examined them previously, they must inform the Board Staff immediately. However, unless conflicts are identified in advance of the actual examination, the conduct and grades of that session cannot be contested on the basis of prior contact or knowledge.

**Description of the Examination**

Each examination session is designed to evaluate the candidates' breadth and depth of knowledge, their ability to apply it in the solution of a wide range of clinical problems, and matters related to ethics. Each session is structured so that the examiners are given a schema to be followed. This approach assures uniformity and prevents duplication. Each of the examiners on each team is expected to pose problems and questions to candidates.

All examiners are members of the American Board of Plastic Surgery, Inc., are actively in the practice and/or teaching of plastic surgery, and have been certified by the Board for more than 5 years. They are respected members of the profession and known for their surgical knowledge, expertise, and scientific contributions. They have been instructed in the technique and purposes of the examination process. Each team includes a senior examiner and a guest examiner.

The Certifying Examination is given on one day and consists of two parts.

1. A 1-hour oral examination on 10 major cases (see Case Reports) selected by the Board and indicative of the candidate's work in the field of plastic surgery.
2. A 45-minute oral examination on the theory and practice of plastic surgery on material prepared by the Board.

Each candidate will be examined by two teams of examiners. Grades will be given by all four examiners and all four grades combined will determine the passing or failing status of each candidate.

The Board is determined that the examination shall be as comprehensive and objective as practical. Its intention is that every candidate be provided an equal opportunity to become Board certified. The same standard is applied to each candidate insofar as is possible.

**Change of Address**

If a candidate's address, as it appears on the admission card, is incorrect or will change before the "Result Mailing Date," please enter the corrected or new address on the back of the admission card in the space provided. Candidates should deliver the admission card to the temporary Board Office at the examination center before 11:00 am on the day scheduled to appear for the Certifying Examination indicating the corrected or new address.

**Debriefing Session**

On the evenings of the second and third days, there will be voluntary debriefing sessions for candidates taking the examination that day. The Board encourages candidates to attend for the purpose of evaluating the examination just completed.

**Results**

Every candidate will be evaluated by each member of his or her examining teams, and performance may be discussed in detail by the entire Board. The final decision regarding certification will be rendered by the entire Board at its meeting following the completion of the fall Certifying Examination. Do not call the Board Office for information. Do not call your Examiners.

Letters of notification of the results of the Certifying Examination will be mailed on the date indicated on the admission card. Regardless of the reason, results of the examination will be divulged to no one until the Board has had time to reach candidates. If a week has elapsed after the "Result Mailing Date" and candidates have not received the letter from the Board, they may then call for information. Information will be given to no one but a candidate personally. The Board Staff will verify a candidate's identity prior to releasing results to him or her.

**Examination Performance**

Candidates desiring information concerning performance after they have received the letter of notification may correspond, within 30 days of notification, by writing to the Chairman of the Certifying Examination Committee at the Board Office. Candidates will be responsible for an extra charge for information concerning their performance. This charge will be determined by the Secretary-Treasurer of the Board.

**Future Case List Compilation**

Candidates for the 1995 Certifying Examination will be required to provide the Board with a compilation of operative cases and hospitalized patients for a 12-month period beginning January 1, 1994, and ending December 31, 1994. The method of compilation of the case list will use a computerized program available on an IBM compatible floppy disk (3½ or 5¼-inch). The computerized mechanism provides a standardized list that will facilitate review. Candidates with IBM compatible office equipment or those desiring to rent such services will find the menu driven program easy to complete. The printed list will be in chronological order for each institution (hospital, office-based surgery, etc) and include: patient's name, hospital (or other) identifying number, age, sex, date of operation, diagnosis, procedure performed (if any), CPT codes plus modifiers (identical to those used for billing on that case), and outcome including complications. The floppy disk for compiling this list will be provided upon written request to the Board Office. Disk requests for the 1995 Certifying Examination will be honored up to and including December 31, 1994. Absolutely no disk requests will be honored after this date.

Preparation of the case list using the IBM program can be selected from menu options and will follow simple instructions sent with each disk by the Board Office upon written request. To print in the desired format requires a "laser capable" printer or a vertically oriented printout for review purposes can be obtained from a simple dot-matrix printer. Because this system is menu driven, it should prove simple to use by offices with IBM compatible equipment. Offices not having IBM compatible equipment may choose to have their raw list transferred to this form by renting stenographic service. After generation of the case lists and preparation of the additional material the disk will be returned to the Board Office with an original and a copy of the Candidate Case Summary Sheet (obtainable via computer disk) and completed case lists (affidavits for each institution are automatically printed out on the last page of each institution's case list).

**Instructions for Data Compilation**

A helpful suggestion is to begin compiling your list on a weekly or monthly basis, and to not wait until January to start compilation on the IBM compatible disk.

1. It is essential that complete information be provided under diagnosis and procedure. Provide an accurate description of the diagnosis and the operative procedure as taken from the operative note. Do not use ICD-9 and CPT codes in place of the description of the diagnosis and procedure. If the case was nonoperative, include a diagnosis taken from the discharge summary. Include ALL CPT codes plus modifiers (identical to those used for billing on that case) applicable for each case in the section for CPT
codes. (Military, Kaiser Permanente, Shriners Burns Hospitals and candidates practicing in Canada are exempt from using CPT codes.) Everyone else must record the CPT codes used for insurance billing purposes as well as all cases that were not billed to insurance (eg, aesthetic/cosmetic).

2. Do not list assistant cases, namely cases billed by the candidate as an assistant surgeon. This exclusion does not cover cases performed by a resident and attended by the candidate, or cases billed as co-surgeon; such cases should be included on the case list.

3. It is essential that information be provided under "outcome." A short statement with respect to the outcome of each case will help guide the Board. Not all cases "heal without problems." Examples would include "necrosis of tip of flap" or "normal sensation returned, but index finger stiff after tendon repair." Outcome recording using the computer program will be provided by Number Selection—only numbers 3, 4, and 5 require written explanation.

4. The list must be keyed for multiple operative procedures on the same patient. This keying is automatic for the computer program, but be certain that hospital (or other) identifying numbers and names are consistent for a patient with multiple procedures.

5. All operative procedures must be included whether inpatient, ambulatory outpatient, or office-based surgery. All patients hospitalized by the candidate as the admitting physician must also be included, even if the patient was managed nonoperatively. Operative surgery performed in the office (notes) that does not require a dictated note does not need to be included, but the Board would suggest that the candidate err in the direction of inclusion rather than exclusion of cases from the list. Inpatient consultations on other services that did not culminate in an operation, performed by the candidate, need not be included.

6. All admitted emergency room patients and all outpatient emergency room cases that required an operative note must be included.

7. The completed list(s) must be signed by the medical record librarian of each institution (hospital, ambulatory surgery center, etc) and be properly notarized as a complete list of the respective candidate's operative experience. Operations performed by the candidate in the office must also be listed and signed by the appropriate office personnel who can attest to completeness.

8. Two Candidate Case Summary Sheets (an original and a copy) must be submitted. This form will facilitate the review process of the Board. This form and this will be directly generated from the IBM program by menu selection.

9. Two copies (the original and a copy) of the complete compiled list of cases of the 12-month experience of January 1, 1994, to December 12, 1994, including the signed and notarized affidavits, two Candidate Summary Sheets, and a check for $500 (nonrefundable) made payable to the American Board of Plastic Surgery, Inc (in United States funds), must be postmarked on or before February 1, 1995, in order for a candidate to be considered for admission to the fall 1995 Certifying Examination.

Submission of Data

1. Print your 12-month case list.

2. The affidavits must be signed by the medical record librarian of each institution and notarized (see 7 under Instructions for Data Compilation).

3. Make a copy of the entire case list including the signed and notarized affidavits.

4. Place the original 12-month case list, including the signed and notarized affidavits for each institution, in a separate compilation: also make a separate compilation for each of the copies. Staple each institution's case list together.

5. Hold aside original and copy of the printed sheet that includes the six-digit candidate number, name, address, telephone number, and candidate affidavit.

6. Take the stapled case list including the signed and notarized affidavits for the first institution (case list starts with page 1) and staple the "Candidate Affidavit" to the top of this section only. Follow the same process for the copy of the first institution.

7. Place all of your stapled original 12-month case lists including the signed and notarized affidavits together; place the computer generated Candidate Case Summary Sheet on top; attach all of this together using a binder clip or rubber band. Follow the same process for your stapled copies of the 12-month case lists including the signed and notarized affidavits using a copy of the computer generated Candidate Case Summary Sheet. Do not place this material in binders or notebooks.

8. You are now ready to mail your completed case list information, the completed IBM disk, and $500 (nonrefundable) fee to the Board Office. Make check payable to the American Board of Plastic Surgery, Inc (must be in United States funds).

In order to ensure delivery of your materials, we suggest that you send your materials by a carrier providing assurance of delivery and receipt. Most overnight carriers can furnish this information within 30 minutes of delivery. We strongly discourage you from leaving the Board Office to check on receipt of materials since inquiry calls of this nature greatly hamper the Board Staff in processing the enormous volume of materials received at this time.

Reminder

Candidates who do not provide the required items in the manner outlined will not be considered for admission to the fall 1995 Certifying Examination. The items submitted will be returned to the candidate. Unequivocally no exceptions can be made regarding incomplete lists.

The absolute postmarked deadline for two sets of the computer generated 12-month case list including the signed and notarized affidavits, and Candidate Case Summary Sheets is February 1, 1995. A $500 (nonrefundable) fee must be enclosed to provide for review of the case list and selection of ten cases for preparation as Case Reports. The IBM compatible floppy disk must be included with the printed materials. No lists or other material will be accepted after this postmarked date.

It is the responsibility of each candidate to keep copies of all materials submitted to the Board. The Board will not make copies of missing information for candidates. Make sure that all materials have been proofread and properly collated. Check to be certain that all pages have been numbered in sequence, this will appear in the upper right hand corner of each page.

Photographic Documentation

Particular emphasis should be placed on the necessity of photographic documentation. Preoperative and postoperative photographs are mandatory on all cases and intraoperative photographs may aid in further illustration of the clinical problem.

The Board advises candidates who have not acquired the habit of routine photographic documentation of all patients to do so at their earliest convenience. Any cases from this 1-year period may be selected. Therefore all cases during this year must have photo documentation, including all hand cases (ie, carpal tunnel cases, etc).

Board Review/Selection Process

The Board will review the Candidate Case Summary Sheet and Candidate's Case List to determine if the candidate's operative list reflects a mature enough experience in the representative areas of the field of plastic surgery to permit examination of the candidate.
for certification as an expert in the specialty. In the event that the case list offered is not adequate to allow selection of cases, the candidate will be deemed ineligible for the fall Certifying Examination. The candidate will be allowed to submit another list of cases for the following year. The presentation of a list by a candidate for case list selection that is found inadequate will constitute one of the opportunities to appear for the Certifying Examination. It will not, however, count as an unsatisfactory performance. Written notification regarding case lists inadequate to allow for Board selection of Case Reports will be sent by July 15, 1995, or sooner, if possible. In the meantime, do not contact the Board Office prior to that date with respect to the list.

The Board will select ten cases from the candidate compiled 12-month case list and request each candidate to prepare Case Reports. The Board-selected Case Reports will be prepared in the same format and with similar requirements as in past years: pre-and postoperative photographs, operative reports, pathology reports, X-rays where pertinent, and postoperative office progress notes, a copy of the actual bill submitted for services to the patient. The actual dollar amount of the fee should be deleted.

The list of Board-selected cases for preparation as Case Reports will be sent to candidates by July 15, 1995, along with an Announcement Letter, Booklet of Information, reply card and a hotel reservation card for the November 9-11 (Thursday - Saturday), 1995, Certifying Examination. Do not contact the Board Office prior to that date with respect to the list.

Please be advised that the format for the fall 1996 Certifying Examination will be similar in nature and will require a 12-month case list (January 1, 1995, to December 31, 1995).

Special Situations

Appeals Policy
The Board has established a policy relative to resolution of questions or disagreements regarding its decisions on admissibility to examination, the form, contents, administration or results of the Qualifying Examination, the administration of the Certifying Examination, and the revocation of certificates. If an individual has a concern in any of these areas, it should be expressed in writing to the Board Office, and a copy of the Appeals Policy will be sent to that individual.

Examination of Candidates with Disabilities
The American Board of Plastic Surgery, Inc, complies with the Americans with Disabilities Act by making a reasonable effort to provide candidates who have proven disabilities with modifications of its examination process that are appropriate for such disabilities. No modification will be made that alters the measurement of the skills or knowledge that the examination process is intended to test. Any disability that a candidate believes requires such a modification in the Board's examination process must be identified and documented by the candidate within 60 days after the candidate is notified of admissibility to the examination process or within 60 days after the candidate learns of such disability, whichever is later.

Examination Irregularities
The validity of scores on the Board's examinations is protected by every means available. The Board will not report a score that it has determined to be invalid (i.e., that does not represent a reasonable assessment of the candidate's knowledge or competence sampled by the examination). The performance of all candidates is monitored and may be analyzed for the purposes of detecting invalid scores.

The Qualifying Examination will be supervised by proctors to ensure that the examination is properly conducted. If evidence by observation or analysis suggests that a candidate's scores may be invalid because of irregular behavior, the Board will withhold those scores pending further investigation and the affected candidate will be notified.

Examples of irregularities affecting the validity of scores would include, but not be limited to, the following: (1) using notes; (2) sharing information or discussing the examination in progress; (3) copying answers from another candidate; (4) permitting one's answers to be copied; (5) or unauthorized possession, reproduction, or disclosure of examination questions or other specific information regarding the content of the examination, before, during, or after the examination.

In such circumstances, upon analysis of all available information, the Board will make a determination as to the validity of the scores in question. If the Board determines that the scores are invalid, it will not release them, and notification of that determination may be made to legitimately interested third parties.

Candidates or other persons who are directly implicated in an irregularity are subject to additional sanctions. For example, the Board may bar the persons permanently from all future examinations, terminate a candidate's participation in an ongoing examination, invalidate the results of the candidate's examination, and withhold or revoke a certificate or take other appropriate action. Candidates or other persons subject to additional sanctions will be provided with a written notice of the charges and an opportunity to respond to such charges in accordance with the reconsideration and appeal procedure established by the Board.

Substance Abuse or Chemical Dependency
Applicants with a history of abuse of a controlled substance or chemical dependency will not be admitted to any examination unless they present evidence satisfactory to the Board that they have successfully completed the program of treatment prescribed for their condition, and the Board is satisfied that they are currently free of such substance abuse or chemical dependency.

Certification
After candidates have met the requirements for admissibility and passed the examinations of the Board, certificates attesting to their qualifications in plastic surgery will be issued by the Board. A surgeon who is granted certification by the Board is known as a diplomate of the Board.

It shall be the prerogative of the Board to determine the fitness, professionally and ethically, of any candidate for a certificate; and the Board, for cause, may defer or deny certification to any candidate.

Certificates
Certificates issued by the Board shall be in such form as the directors may from time to time determine. They shall be signed by the Chairman, the Vice-Chairman, and the Secretary-Treasurer of the Board and shall have placed upon them the official seal of the Board.

Beginning in 1995, certificates issued by the Board will be dated and will be valid for 10 years. Revalidation will be accomplished by the Board's recertification process.

Certificates of the Board shall state that the holder has met the requirements of the Board and is certified by the Board as a medical specialist in plastic surgery and is entitled to be known as a "diplomate of the American Board of Plastic Surgery, Inc." The names of all diplomates will be submitted to the American Board of Medical Specialties for publication in its directory unless they notify the Board in advance that they do not wish to be listed.
Revocation

Any certificate issued by the Board shall be subject to revocation at any time that the Board determines that an individual was not properly qualified to receive it.

Each certificate issued by the Board shall be subject to revocation if the physician so certified has made any misstatement of material fact, or has failed to make any statement of material fact, in his or her application for such certificate or in any other statement or representation to the Board or its representatives, or has otherwise acquired the certificate by deception. Upon revocation the certificate shall be returned to the Board.

The Board shall have the jurisdiction and right to determine whether or not the information placed before it is sufficient to constitute grounds for the revocation of any certificate. The individual will be provided with a copy of the appeals policy of the Board, and this policy will be observed in pursuing resolution of the problem.

Foreign Certificates

Persons holding the foreign certificate issued prior to June 30, 1973, by the Board must relinquish their certificates to the Board in the event that they return to the United States for the purpose of practicing plastic surgery. Such individuals may apply for examination and certification in the manner described herein.

Inquiries as to Status

The Board considers a candidate’s record not to be in the public domain. When an inquiry is received by the Board regarding an individual’s status with the Board, a general, but factual, statement is provided that indicates that person’s location within the process of certification. The Board provides this information only to individuals, organizations, and institutions with a reasonably valid “need to know” for professional reasons.

The Board does not use or recognize the terms “Board-eligible” or “Board-qualified” and does not condone the use of those terms by candidates or any other persons or organizations.

The directors may adopt such further rules and regulations governing requirements, examinations, and issuance and revocation of certification as they may from time to time determine.

Examination Dates

Certifying Examination

November 10–11–12, 1994 (Thursday–Saturday)
Chicago, Illinois

Qualifying Examination

April 7, 1995 (Friday)
Philadelphia, Pennsylvania, and San Francisco, California

Important Dates

Application Process

January 15
Absolute cutoff for receipt of all application material for admission to the spring Qualifying Examination. A late penalty fee of $200 must accompany these postmarked December 16 up to and including January 15.

Any application material postmarked after January 15 will not be accepted for admission to the spring Qualifying Examination.

April 30
Potential candidates for examination and certification (senior/chief residents) are advised to write to the Board Office requesting an Application for Examination and Certification form during the last 2 months of their residency, but no later than June 30. Application material will not be sent to prospective candidates after December 15.

December 15
Last date Board Office will send out application material for admission to the spring Qualifying Examination.

Last postmarked date for application material for admission to the spring Qualifying Examination before a late penalty fee of $200 will apply.

Qualifying (Written) Examination

March 1
Last postmarked date for reply cards and examination fees for the spring Qualifying Examination, before a late penalty fee of $200 will apply. Reply cards and examination fees postmarked after this date (March 1) will be considered only on a space available basis and the late penalty fee will apply.

March 2–15
Reply cards and examination fees postmarked March 2 up to and including March 15 will be considered only on a space available basis and the late penalty fee of $200 must accompany these items.

Any reply cards and examination fees postmarked after March 15 will not be accepted for admission to the spring Qualifying Examination.

Certifying (Oral) Examination

February 1
The 12-month case list for prospective candidates for the upcoming Certifying Examination must be postmarked on or before this date to be considered for admission to the fall Certifying Examination. A nonrefundable fee of $500 must be enclosed to provide for review of the case list and selection of 10 cases for preparation as Case Reports.

July 15
The list of Board-selected cases for preparation as case reports will be mailed to candidates for the fall Certifying Examination.

September 1
Last postmarked date for reply cards and balance of examination fee ($700) for the Certifying Examination, before a late penalty fee of $300 will apply. Reply cards and examination fee balance ($700) postmarked after this date (September 1) will be considered only on a space available basis and the late penalty fee will apply.

September 2–15
Reply cards and examination fee balance ($700) postmarked September 2 up to and including September 15 will be considered only on a space available basis and the late penalty fee of $300 must accompany these items.

Any reply cards and examination fee balance ($700) postmarked after September 15 will not be accepted for admission to the fall Certifying Examination.

December 31
Last date disk requests will be honored for compilation of the 12-month case list (January 1–December 31).

Special Consideration

March 1
Last postmarked date for submission of written special requests and documentation for consideration by the Committee on Credentials and Requirements at the spring meeting.

September 1
Last postmarked date for submission of written special requests and documentation for consideration by the Committee on Credentials and Requirements at the fall meeting.

Note: Fees must be submitted in United States currency only. Foreign currencies, including Canadian, are unacceptable.
If there is a discrepancy between a metered postmark and an official United States postal service postmark, the latter will be considered official.

American Board of Preventive Medicine

George K Anderson, MD, MPH, Chair, San Antonio, Texas
Michael A Berry, MD, MS, Vice Chair for Aerospace Medicine, Houston, Texas
David C Deubner, MD, MPH, Vice Chair for Occupational Medicine, Toledo, Ohio
Hugh H Tilson, MD, DrPH, Vice Chair for Public Health and General Preventive Medicine, Research Triangle Park, North Carolina
Joseph M Cannella, MD, MS, Secretary Treasurer, Princeton, New Jersey
Anita S Curran, MD, MPH, New Brunswick, New Jersey
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Alfred K Neumann, MD, MPH, Los Angeles, California
Judith Rubin, MD, MPH, Baltimore, Maryland
James M Vanderploeg, MD, MPH, Houston, Texas
Alice R Ring, MD, MPH, Executive Director, Schiller Park, Illinois
Constance R Hyland, Administrator, Schiller Park, Illinois

These criteria and conditions are subject to change without notice. All applicants are advised to contact the American Board of Preventive Medicine to ascertain whether the information below is current.

Requirements for Admission to Examinations

Each applicant for a certificate in aerospace medicine, occupational medicine, or public health and general preventive medicine is required to meet certain requirements to be admitted to the certifying examination. Such requirements are determined by the Board.

Approval for admission to the examination can only be established after the review of a complete application by the full Board at one of its semiannual meetings. No individual member of the Board is authorized to give an opinion on the admissibility of candidates.

For the information of applicants, such requirements are summarized below.

General Requirements

1. Graduation from a medical school in the United States or Canada that at the time of the applicant's graduation was accredited by the Liaison Committee on Medical Education, a school of osteopathic medicine approved by the American Osteopathic Association, or from a medical school located outside the United States and Canada that is deemed satisfactory to the Board.

2. An unrestricted and currently valid license to practice medicine in a state, territory, commonwealth, or possession of the United States or in a province of Canada.

3. A year of supervised postgraduate clinical training provided as part of an accredited residency or internship program and comprising experience involving direct patient care.

4. Successful completion of a course of graduate academic study and award of a Master of Public Health or equivalent degree, the course content of which shall include biostatistics, epidemiology, health services management and administration, and environmental health. If the institution itself does not have or award the Master of Public Health degree or equivalent, the Board will consider individual exceptions.

5. Residency of not less than 1 year that shall have provided supervised experience in the practice of the field of preventive medicine in which certification is sought. The year shall include planned instruction, observation, and active participation in a comprehensive organized program accredited by the Accreditation Council for Graduate Medical Education (ACGME) (practicum year).

6. A period of not less than 1 year of full-time special training or research in, or teaching or practice of, the field of preventive medicine in which certification is being sought (practice year).

7. The applicant must have been engaged in essentially full-time training for, or practice of, aerospace medicine, occupational medicine, or public health and general preventive medicine for at least 2 of the 5 years preceding application for certification.

Special Requirements in Aerospace Medicine

1. A period of not less than 1 year of supervised training and instruction in the field of aerospace medicine is required. (See No. 5 under General Requirements above.)

2. A period of not less than 1 year of full-time special training or research in, or teaching or practice of, aerospace medicine. (See No. 6 under General Requirements above.)

3. The applicant must have been engaged in training for, or the practice of, aerospace medicine for at least 2 of the 5 years preceding application for certification. (See No. 7 under General Requirements above.)

Special Requirements in Occupational Medicine

1. A period of not less than 1 year of supervised training and instruction in the field of occupational medicine is required. (See No. 5 under General Requirements above.)

2. A period of not less than 1 year of full-time special training or research in, or teaching or practice of, occupational medicine. (See No. 6 under General Requirements above.)

3. The applicant must have been engaged in training for, or the practice of, occupational medicine for at least 2 of the 5 years preceding application for certification. (See No. 7 under General Requirements above.)

Special Requirements in Public Health and General Preventive Medicine

1. A period of not less than 1 year of supervised training and instruction in the field of public health and general preventive medicine is required. (See No. 5 under General Requirements above.)

2. A period of not less than 1 year of full-time special training or research in, or teaching or practice of, public health and general preventive medicine. (See No. 6 under General Requirements above.)

3. The applicant must have been engaged in training for, or the practice of, public health and general preventive medicine for at least 2 of the 5 years preceding application for certification. (See No. 7 under General Requirements above.)

Equivalencies for Accredited Training

Persons graduating from a school of medicine or school of osteopathic medicine prior to January 1, 1984, who have not formally completed all of the components previously described may be considered for admission to the examination if their training and experience are judged by the Board to provide suitable equivalency for that formal training.

Persons graduating after January 1, 1984, will be admissible to the examination only after completing accredited training in pre-
ventive medicine. No equivalency pathways will be considered for such graduates.

The Board will consider granting equivalency credit toward satisfying training requirements for such factors as
1. Teaching or completion of graduate course work in the four core areas of epidemiology, biostatistics, health services management, and administration, and environmental health; and
2. Periods of full-time practice, research, or teaching in the field of preventive medicine in which certification is sought. A total of 8 years of full-time practice is required if no other specialty certification is held, but may be reduced to 6 years if certification is held in another specialty recognized by the American Board of Medical Specialties (ABMS). For those with an MPH or equivalent degree but no practicum year, a period of 4 years of full-time practice is required in the field of preventive medicine for which certification is being sought, a period that can be reduced to 3 years if other ABMS specialty certification is held.

Each applicant is considered individually by the Board in accordance with the existing guidelines. Applications must be received by June 1 of each year. Requirements must be completed by August 1 of the year in which the applicant wishes to sit for the examination.

The Board will accept enrollment in one of the short courses or “mini-residencies” as evidence of training in the four core areas of biostatistics, epidemiology, health services management and administration, and environmental health only if it was successfully completed before January 1, 1982. Such training, however, is not residency training and is applicable only in equivalency pathways.

Application
Individuals seeking to apply for admission to the examination should write to the executive director of the Board for application forms.

Examination
The examination is a 1-day written examination given in the late fall of each year. It is a multiple-choice examination, with the morning portion covering the core knowledge of preventive medicine and the afternoon portion covering aerospace medicine, occupational medicine, or public health and general preventive medicine.

Applicants requiring special examination accommodations due to a disability should contact the Board Office for assistance at least 1 month prior to the examination.

The examination results, which do not include individual identifiers, are reviewed by the full Board during its January meeting. Final determination of candidates' certification status is made at that time.

Reapplication and Reexamination
An applicant approved for admission to the examination who fails to take the examination within 3 years of the date he or she is notified of approval to sit for the examination is required to file a new application and pay a new application fee.

Applicants not approved for admission to the examination may request reconsideration of their applications on the basis of new or additional information within 2 years of the filing date of the original application, without payment of an additional application fee.

Candidates not passing the examination may, upon timely application and payment of appropriate fee, be admitted to reexamination within 3 years of the initial approval.

A candidate who has failed to pass the examination on two occasions may be required to have additional training, in accordance with recommendations from the full Board, before being admitted to further examination.

Candidates not passing the examination three times must submit a new application and fee to reestablish admissibility.

Certification
Upon satisfactory completion of the examination, a certificate will be issued stating that the applicant has been found to possess special knowledge in the specified field of preventive medicine. The certificate will be signed by officers of the Board and will have the Board's seal affixed. Each certificate remains the property of the Board, but the person to whom it is issued is entitled to its possession unless it is revoked.

Any certificate issued by the Board may be revoked if evidence, satisfactory to the Board, is presented that the applicant was not eligible to receive it at the time of issuance; or that any pertinent fact had been misstated, misrepresented, or concealed; or that license to practice medicine has been suspended or revoked. Note: The issuance of a certificate to a person does not constitute membership on the Board.

Multiple Certification
An individual may apply sequentially for admission to examination in more than one field of preventive medicine. The applicant must fulfill the individual requirements of each field in which application is made, cannot “double count” the same year for practicum or practice periods, and may not apply in more than one area in a given year.

Notice of Certification
Certification decisions are made only by action of the full Board, in one of its semiannual meetings, held in August and January.

Candidates who have taken the examination may expect to be notified of results within 3 months after taking the examination.

Fees
The members of the Board serve without compensation. Fees are based on the actual expenses incurred in review of applications; examination development, administration, and scoring; and office administration.

A $200 application fee is required if the applicant holds an MPH or equivalent degree and has completed an ACGME-accredited residency in the field of preventive medicine in which certification is sought.

A $350 application fee is required if the applicant is applying through the equivalency pathway.

Application fees are nonrefundable.

The examination fee of $1,000 is due 45 days prior to the examination.

Listing of Individuals Certified
A list, current to the date of publication, of persons to whom certificates have been issued by the Board may be found in The Official ABMS Directory of Board Certified Medical Specialists.

Reporting of Changes of Address
Once certified, physicians should notify the following offices of any changes of address
1. The American Board of Preventive Medicine, Inc.
2. The Records and Circulation Department, American Medical Association, 515 N State St, Chicago, IL 60610, the office that maintains a master file of all physicians in the United States.
Important Dates

June 1: Deadline for completed application forms, application fees, and reapplication requests to be received in the Board Office for the November examination.

August 1: Deadline for completion of requirements to sit for the November examination.

August: Meeting of the Board to determine admissibility of applicants to November examination. Letters of notification of admissibility for November examination are mailed to candidates after the August Board meeting. Notification cannot be given by telephone.

October: Deadline for examination fee to be received in the Board Office for approved candidates who wish to sit for the November examination. Date varies from year to year, and is stated in letter of admissibility.

November: Annual 1-day written examination in Chicago, Illinois. Date will vary from year to year and is stated in letter of admissibility.

January: Meeting of the Board to determine the pass/nonpass score for the previous November examination.

February: Results of November certifying examination sent by letter to candidates after the Board meeting. Notification cannot be given by telephone.

American Board of Psychiatry and Neurology

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(Please note that this is not an official document of the American Board of Psychiatry and Neurology, Inc. The Board cannot accept responsibility for errors made in the printing of this material. Please contact the Board's Executive Office for official policies and procedures of the Board.)

Throughout this section, the American Board of Psychiatry and Neurology may be referred to as the “Board” or the “ABPN.” References to “residency” refer to entry at the PGY-2 level unless stated otherwise. “Accredited or approved programs” refers to programs accredited by the Accreditation Council for Graduate Medical Education (ACGME) or the Royal College of Physicians and Surgeons of Canada.

General Information Pertaining to All Candidates

History

The American Board of Psychiatry and Neurology, Inc (ABPN), is a nonprofit corporation that was founded in 1934 following conferences of committees appointed by the American Psychiatric Association, the American Neurological Association, and the then Section on Nervous and Mental Diseases of the American Medical Association. This action was taken as a method of identifying the qualified specialists in psychiatry and neurology.

Composition of the Board

The Board consists of 16 members. Membership on the Board is distributed among the Board's nominating organizations as follows: five psychiatrists from the American Psychiatric Association, three neurologists from the American Medical Association, four neurologists from the American Neurological Association, and four neurologists from the American Academy of Neurology. Each of these organizations proposes nominees to represent it on the Board, but the Board itself selects its members. The Board is independently incorporated.

Elections to fill the places of members whose terms have expired take place annually. Neurology and psychiatry are always equally represented on the Board. The Board holds meetings several times each year for the purpose of examining candidates and transacting business.

Mission Statement

The goal of the ABPN is to enhance the quality of psychiatric and neurologic care through the voluntary certification process and thereby serve the public interest.

Methods for achieving that goal include, but are not limited to, efforts to:
1. Describe, in terms of knowledge and skills, a physician with special expertise in evaluation, diagnosis, and treatment of patients with psychiatric or neurologic disorders, or who require psychiatric or neurologic assessment.
2. Set the standards for knowledge and skills required for certification.
3. Construct and administer examinations designed to evaluate those skills and knowledge.
4. Monitor, evaluate, and improve the standards and procedures of the certification process.
5. Participate in the appropriate Residency Review Committees of the ACGME to set standards for the quality and scope of residency training programs to ensure that their graduates will obtain necessary training credit toward certification.
6. Issue certificates and other forms of recognition to successful candidates.
7. Make available lists of diplomates who have fulfilled the requirements for certification.
8. Inform the public, other professions, and other medical organizations of the purposes, activities and responsibilities of the corporation, and
9. Participate in the activities of the American Board of Medical Specialties (ABMS) and its member boards.

Rules and Regulations

In carrying out its specified functions, the Board has formulated rules and regulations to guide its activities and to indicate to applicants and other interested persons its policies regarding training requirements, examinations, fees, etc. These rules and regulations are amended from time to time. The statements contained in this brochure are the most recent amendments and represent the current policy of the Board.

The Board shall have authority to issue from time to time, and thereafter to amend, rules and regulations relating to the issuance and revocation of certificates as to qualification in the practice of psychiatry or neurology, or both, or their recognized subspecialties.
Certificates

The Board currently issues eight types of certificates: (1) psychiatry, (2) neurology, (3) neurology with special qualification in child neurology, (4) child and adolescent psychiatry, (5) added qualifications in geriatric psychiatry, (6) added qualifications in clinical neuropsychology, (7) added qualifications in addiction psychiatry, and (8) added qualifications in forensic psychiatry. An applicant may be certified in more than one area. The applicant shall receive a separate certificate for each area in which he or she qualifies.

Each certificate shall be in such form and for such period of time as may be specified by the Board.

Recertification

Effective October 1, 1994, all individuals achieving Board certification by the ABPN in psychiatry, neurology, neurology with special qualification in child neurology, and child and adolescent psychiatry will be issued 10-year, time-limited certificates. All certificates for Added Qualifications are valid for 10 years from the date issued.

Revocation of Certificates

The Board shall have authority to revoke any certificate issued by it or to place a certificate holder on probation for a fixed or indefinite time if

1. The certificate was issued contrary to or in violation of the Bylaws or any rule or regulation of the Board.
2. The person to whom the certificate was issued made any material misstatement or omission of fact to the Board in his/her application or otherwise.

Certification shall continue in force only so long as the holder has an unlimited license to practice medicine.

Unethical Behavior of Candidates

Since the Board believes that the ethics of candidates for certification are of concern, it has adopted the following rules:

1. The falsification of credentials will be cause for the Board’s refusal to admit a candidate to examination for at least 4 years.
2. The Board will consider legal action against anyone who forges an ABPN certificate, copies ABPN examinations or otherwise uses them in conflict with copyright laws, or in any other way violates the legal prerogatives of the Board. Such activities will also be cause for the Board’s refusal to admit a candidate to examination for at least 4 years.
3. Scores on the Part I examination may be invalidated for reasons of irregular behavior that indicates cheating. Statistical analyses may be used to confirm such behavior. If the examination score is invalidated, the candidate may submit a written appeal within 30 days of notice on invalidation. An appeal fee of $25 must accompany the written appeal. The Committee to Review Appeals will review the materials and recommend action to the Board. The Board will review the materials and make a decision that, in all cases, will be final and binding on the Board and on the candidate. All correspondence or other materials should be sent to the Board office. If the examination score is invalidated because of irregular behavior, the Board will not consider the candidate for examination for a period of at least 4 years. A repeat application and Part I examination fee will be required.
4. Irregular behavior that indicates cheating on the Part II examination may be considered sufficient reason to invalidate the candidate’s score. In that event, the Board will not consider the candidate’s repeat application for Part II for a period of at least 4 years. Another Part II examination fee will be required.
5. “Irregular behavior that indicates cheating” shall include, but not be limited to, the following conduct: (a) copying of answers from another candidate’s examination; (b) knowingly permitting another candidate to copy one’s answers on an examination; (c) unauthorized possession, reproduction, or disclosure of materials, including examination questions or answers, before, during, or after the examination; (d) use of audio equipment to record any part of the Part II examination; (e) offering any financial or other benefit to any director, officer, employee, proctor, diplomate, or other agent or representative of the Board in return for any right, privilege, or benefit that is not granted by the Board to other similarly situated candidates or persons.

The Board’s action may be sent to legitimately interested third parties, including the American Medical Association, state medical societies, and appropriate specialty societies.

A proposal to impose upon a candidate one of the penalties identified in paragraphs 1, 2, 4, and 6 hereof shall constitute a “negative determination” subject to the “Appeal Procedure for Negative Determinations Regarding Applications” or the “Appeal Procedure for Negative Determinations Regarding Part II Examinations.”

Upon the expiration of the 4-year period cited in paragraphs 1, 2, 3, and 4 hereof, the candidate may send to the Board a written request for lifting of the ban, together with a written explanation of the reasons for lifting of the ban that will then be reviewed by the Board for a final decision. The decision will be final and binding on the Board and on the candidate. All correspondence or other materials should be sent to the Board office.

Board Eligibility

The ABPN, in accordance with the policy of the ABMS, does not recognize or use the term “board-eligible,” and does not issue statements concerning “board eligibility.” The Board informs an applicant of admittance to examination only when the applicant has an active, approved application on file in the Board office.

Examiners and Committee Members

Any individual who participates in any review course that is publicized as being a Board review course, or in any course that could be construed as a Board review course, or who has edited or provided written or audiovisual materials for publications identified as preparation for Board examinations, should not participate as an examiner in any Part II examinations, child and adolescent psychiatry examinations, or as a member of a Board Committee for at least 12 months subsequent to the course of publication of any written or audiovisual materials.

Application/Training Requirements

Application

Deadline for receipt of completed applications in the Board office for the October 17, 1995, Part I examination is February 1, 1995. All licensing and training requirements must be met by June 30, 1995.

A physician who wishes to be examined by the Board shall complete, sign, and file with the executive vice president an application on the current official application form. The application must include the required application and Part I examination fees and supporting data. Supporting data consist of:

1. Documentation of all residency training by a copy of certificates of training including exact dates, or a letter of verification of training from the training director(s) including exact dates of training. If the resident is still in training, a letter from the training director documenting that the resident is in the final year of training and that training will be completed by June 30, 1995, must be submitted. Immediately after the resident has completed training, a letter verifying successful completion of training must be submitted by the training director. Documentation of successful completion of training completed by June 30, 1995, must be in the Board office no later than July 15, 1995.
2. Documentation of PGY-1 by a letter of verification from the training director describing the exact length and content of rotations completed during PGY-1. If the PGY-1 was a full year of internal medicine, pediatrics, or family practice, a photocopy of the certificate of completion including the exact dates may be submitted in lieu of the letter from the training director.

3. A photocopy of current unlimited license renewal registration showing the expiration date. If the resident has a temporary license at the time the application is submitted, a photocopy of the current unlimited license must be submitted no later than July 15, 1995.

4. Four autographed photographs. Heavy cardboard-backed photos or peel-apart photos will not be accepted. Photos should be passport-size and may be either black-and-white or color photos.

The "Information for Applicants" booklet and the application are reviewed each year and may be obtained from the Board office. Only current applications will be accepted. Photocopies of applications will not be accepted.

Applications submitted without fees will not be accepted. Fees received without applications will be returned.

Part I application and examination fees are neither refundable nor transferable.

Part I sites are assigned based on the order in which applications are received and approved in the Board office. If a site is filled to capacity, the second choice will be assigned. If the second choice site is filled to capacity, the third choice will be assigned, etc.

An acknowledgment postcard accompanies each application. That card, when stamped, self-addressed, and enclosed with the application, will be returned to the candidate as acknowledgment that the application has been received by the Board office.

Once the card is returned to the candidate, it may take up to 16 weeks for the candidate to receive information regarding the status of the application. Applications are reviewed in order of receipt.

An applicant who does not receive notification from the Board office by August 1, 1995, of the acceptance or rejection of his/her application should contact the Board office.

Applicants With Disabilities

The Board recognizes that physicians with disabilities may wish to take the Board's examinations and will attempt to make accommodations for applicants with verified disabilities. The Board supports the intent of the "Americans with Disabilities Act (ADA)."

You are reminded, however, that "auxiliary aids and services" can only be offered if the examined does not fundamentally alter the measurement of skills or knowledge the examination is intended to test (Americans with Disabilities Act, Public Law 101-334 §309 (b)(3)). Applicants must advise the Board in writing if they are requesting any accommodations from the Board due to a disability no later than the deadline for submitting their application for the Part I examination. The applicant may be asked to submit appropriate documentation of the disability and a description of previous accommodations provided during other examinations. If the Board deems it necessary, an independent medical assessment may be requested at the expense of the applicant.

The Board office has TDD (Telecommunications Device for the Deaf) capability. Using it, hearing impaired persons can communicate with the Board as easily as dialing 708 374-4223 and typing in a message.

General Requirements

The applicant must establish that:

1. He/she has an unlimited license to practice medicine in a state, commonwealth, territory, or possession of the United States, or a province of Canada. All applicants are required to submit copies of licenses with current registrations and expiration date with their Part I applications.

2. He/she has satisfactorily completed the Board's specialized training requirements in psychiatry, neurology, neurology with special qualification in child neurology, or any of its subspecialties.

References to "residency" refer to entry at the PGY-2 level unless stated otherwise. Residency training must be in the specialty in which the applicant seeks certification. No residency training credit can be given for time spent in a residency program in another specialty. Training programs approved by the Residency Review Committees and accredited by the ACGME can be found in the current issue of the Graduate Medical Education Directory published by the American Medical Association. This directory includes the Essentials of Accredited Residencies in Graduate Medical Education.

Training may be completed on a part-time basis, provided that it is no less than half-time, and credit will not be given for less than one-year blocks of training except under special circumstances, which must be approved by the ABPN Credentials Committee.

Training programs may develop individual leave or vacation time for residents in accordance with the overall institutional policy. Leave or vacation time may not be utilized to reduce the total amount of required residency training or to make up deficiencies in training.

To ensure continuity of training, the Board requires that 2 of the 3 years of residency training be spent in a single program. On occasion, the Board will consider alternate patterns of training that have not included the required 2 years spent in a single program, provided that the total residency permitted the applicant to assume progressive levels of responsibility and that a comprehensive curriculum was covered. In such cases, it is the responsibility of the applicant to provide detailed documentation from the respective training directors outlining training content, duties, and responsibilities. Each case will be considered on an individual basis.

Appeal Procedure for Negative Determinations Regarding Applications

The rejection of credentials for admission to an examination is considered a "negative determination." An applicant who has submitted a formal application and receives a negative determination regarding his/her application, may appeal by complying with the following procedures:

Within 30 days after date of notice of a negative determination, the applicant may, by writing, indicate his/her request for a formal appeal of his/her application rejection. The following materials must accompany this request: appeal fee of $350 and any additional written information tending to rebut the negative determination. All correspondence and other materials should be sent to the Board office.

For psychiatry applicants, the Committee on Credentials for Psychiatry will review the materials and recommend action to the Psychiatry Council consisting of all current psychiatry directors. The Psychiatry Council will review the materials and make a decision that, in all events, will be final and binding on the Council, on the Board, and on the applicant.

For neurology and neurology with special qualification in child neurology applicants, the Committee on Credentials for Neurology will review the materials and recommend action to the Neurology Council consisting of all current neurology directors. The Neurology Council will review the materials and make a decision that, in all events, will be final and binding on the Council, on the Board, and on the applicant.
Certification in Psychiatry

An applicant who seeks admission to examination for certification in psychiatry must have satisfactorily completed an approved PGY-1 and 3 full years of postgraduate, specialized residency training in a psychiatry program accredited by the ACGME or the Royal College of Physicians and Surgeons of Canada.

1. Training Requirements for Physicians who entered Residency Training Programs on or after July 1, 1977, and before July 1, 1986.

   Two patterns of training are acceptable:
   A. Three Years Training Following a First Postgraduate Year:
      Prior to entering an approved 3-year training program in psychiatry, a physician must have completed 1 year of approved training after receiving the degree of Doctor of Medicine or Doctor of Osteopathy that included a minimum of 4 months of internal medicine, pediatrics, or family practice. Or
   B. Four-Year Training Programs:
      A 4-year program in psychiatry would be acceptable with the provision that no less than 4 months during one of the years (preferably the first year) be spent in an approved program providing supervised, direct responsibility for the general medical care of children and/or adults.

2. Training Requirements for Physicians who entered Residency Training Programs on or after July 1, 1986, and before July 1, 1997.

   Two patterns of training are acceptable:
   A. A broad-based clinical year of accredited training in the United States or Canada in internal medicine, family practice, or pediatrics; or an ACGME-approved Transitional Year Program that included a minimum of 4 months of primary care; or an ACGME-approved residency in a clinical specialty requiring comprehensive and continuous patient care plus 3 full years of postgraduate, specialized residency training in a psychiatry program accredited by the ACGME or the Royal College of Physicians and Surgeons of Canada (RCPSC). Or
   B. Four-Year Training Program:
      Four years of training in an ACGME-approved program in psychiatry would be acceptable with the provision that no less than 4 months during one of the years of training be spent in an approved program providing supervised, direct responsibility for the general medical care of children and/or adults.

   Effective July 1, 1988, all osteopathic physicians entering a PGY-2 in psychiatry must have successfully completed an approved PGY-1 as described above.

   Effective January 1, 1994, all physicians who trained in Canada must have completed an approved PGY-1 as described above plus 4 years of postgraduate, specialized residency training in a psychiatry program accredited by the RCPSC.

   Training requirements for physicians entering residency training in psychiatry on or after July 1, 1997:

   As an applicant seeking admission to the examination for certification in psychiatry and entering residency training on or after July 1, 1997, must complete the following training in ACGME-approved programs. Two patterns of training are acceptable
   1. A broad-based clinical year of ACGME-approved training in the United States in internal, family practice, or pediatrics; or an ACGME-approved transitional year program including a minimum of 4 months of primary care; or an ACGME-approved residency in a clinical specialty requiring comprehensive and continuous patient care plus 3 full years of postgraduate, specialized residency training in a psychiatry program accredited by the ACGME. Or
   2. Four years of training in an ACGME-approved program in psychiatry would be acceptable with the provision that no less than 4 months during one of the years of training was spent in an approved program providing supervised, direct responsibility for the general medical care of children and/or adults.

Training Credit From the United Kingdom

The following criteria apply to all applicants for psychiatry who began their psychiatric residency training on or after July 1, 1976. Applicants who have completed residency training in the United Kingdom prior to July 1, 1976, must meet the criteria outlined in the section "Applicants with Non-US, Non-Canadian, or Non-UK Training."

For each year of psychiatric residency training completed in an approved hospital program in the United Kingdom, 1 year of training credit will be given toward eligibility for examination by the Board in psychiatry.

The hospital program must be among those approved by the Visiting Inspecting Specialty Committee in Psychiatry of the Royal College of Psychiatrists.

In order to obtain credit for 2 or 3 years of approved training in the United Kingdom, at least 2 years of the training must be spent at the same training center in psychiatry.

The applicant will be responsible for sending the details of his/her training to the Board office, along with verification of this training from the approved hospital or hospitals in the United Kingdom.

The applicant's program director must certify that the applicant was engaged in full-time residency training.

As of July 1, 1985, all applicants for admission to examination who are requesting credit for training done in the United Kingdom must have an approved year of primary care training in the United States or Canada. The exception is restricted to those applicants who hold the Member of the Royal College of Psychiatrists (MRCPsych) certificate and completed training in its entirety in the United Kingdom. If training in its entirety (intensive residency training) was not completed in the United Kingdom, the applicant must complete an additional year of approved primary care training in the United States or Canada.

All physicians entering residency training in psychiatry on or after July 1, 1997, must complete the training as described above. (Training requirements for physicians entering residency training in psychiatry on or after July 1, 1997). No credit will be granted for training completed in programs that are not accredited by the Accreditation Council for Graduate Medical Education.

Applicants With Non-US, Non-Canadian, or Non-UK Training

The following criteria pertain to all applicants whose residency training was undertaken at a center located outside the United States, Canada, or the United Kingdom (with the exception of applicants who completed residency training in the United Kingdom prior to July 1, 1976).

The candidate must possess an unlimited license to practice medicine in a state, commonwealth, territory, or possession of the United States or a province of Canada.

The candidate must successfully complete a comparable national certification examination in the country in which the physician is seeking admission to examination. The candidate must have achieved such certification within the past 7 years. If certification was achieved earlier, then the candidate must have had 1 year of clinical practice in a setting in which his/her professional work has been observed by at least two ABPN diplomates in that specialty and documented by two letters of sponsorship from such diplomates.

The only certifications recognized by the Board for psychiatry are:

1. MRCPsych (Member of the Royal College of Psychiatrists)
2. FRANZCP (Fellow of the Royal Australian and New Zealand College of Psychiatrists)
3. FF Psych (SA) of the South African Medical and Dental Council (Fellowship of the Faculty of Psychiatry of the College of Medicine of South Africa)
4. Israel's Specialty Certification of the Scientific Council of the Israel Medical Association

All applicants with Non-US, Non-Canadian, or Non-UK training who do not meet the above criteria must complete training as listed under "Certification in Psychiatry."

As of July 1, 1985, all applicants for admission to examination must have an approved year of primary care training in the United States or Canada. The exception is restricted to those applicants who hold a certificate and training in its entirety (internship and residency training) in one of the above-mentioned countries. If training in its entirety was not completed in the country issuing the certificate, the applicant must complete an additional year of approved primary care training in the United States or Canada.

All physicians entering residency training in psychiatry on or after July 1, 1997, must complete the training as described above. (Training requirements for physicians entering residency training in psychiatry on or after July 1, 1997.) No credit will be granted for training completed in programs that are not accredited by the Accreditation Council for Graduate Medical Education.

**Certification in Neurology**

An applicant who seeks admission to examination for certification in neurology must have satisfactorily completed an approved PGY-1 (see below for specifications) and 3 full years of postgraduate, specialized residency training in a neurology program accredited by the ACGME or the RCPSC.

**1. Training Requirements for Physicians who entered Residency Training on or after July 1, 1987, and before July 1, 1991.**

(For neurology training requirements pertinent to physicians who entered residency training prior to July 1, 1987, see Appendix A.)

Two patterns of training are acceptable:

A. Three years of training following a first postgraduate year:

Prior to entering an approved 3-year residency training program in neurology a physician must have completed 1 year of approved graduate training after receiving the degree of Doctor of Medicine or Doctor of Osteopathy as follows:

Physicians entering neurology residency training as of July 1, 1987, and before July 1, 1981, may enter neurology residency training programs only after an initial first year of graduate training in accredited programs in the United States or Canada in internal medicine or an ACGME-approved Transitional Program that includes at least 6-month experience in internal medicine.

B. Four-Year Training Program:

Four years of training in a neurology program approved by the ACGME for 4 years of training is acceptable.

Two patterns of training are acceptable:

A. A full year of training in internal medicine, or as an acceptable alternative, a full year in which a minimum of 8 months of training must be in internal medicine, the details of which must be documented by the internal medicine training director. The composition of these 8 months cannot include rotations in neurology or emergency medicine. To ensure that these 8 months constitute a high-quality experience, they should be obtained with an emphasis on progressive responsibility for the resident.

In addition, all physicians will be required to complete three full years of postgraduate, specialized residency training in a neurology program accredited by the ACGME or the RCPSC. Or

B. Four-Year Training Program:

Four years of training in a neurology residency program approved by the ACGME for 4 years of training is acceptable.

3. Training Requirements for Physicians Entering Residency Training as of July 1, 1994, and before July 1, 1997.

Two patterns of training are acceptable:

A. A full year of training in Internal Medicine, or as an acceptable alternative, a full year in which a minimum of 6 months of training must be in internal medicine, the details of which must be documented by the internal medicine training director. The composition of these 6 months cannot include rotations in neurology or emergency medicine. To ensure that these 6 months constitute a high-quality experience, they should be obtained with an emphasis on progressive responsibility for the resident.

At least 2 months of the additional 6 months must be spent in pediatrics and/or emergency medicine. No more than 2 months of the remaining 4 months may be spent in neurology.

In addition, all physicians will be required to complete three full years of postgraduate, specialized residency training in a neurology program accredited by the ACGME or the RCPSC. Or

B. Four-Year Training Program:

Four years of training in a neurology program approved by the ACGME for 4 years of training is acceptable.

Effective July 1, 1988, all osteopathic physicians entering a PGY-3 in neurology must have successfully completed an approved PGY-1 as described above.

Physicians who trained in accredited programs in Canada must have successfully completed an approved PGY-1 as described above plus 4 years of postgraduate, specialized residency training in a neurology program accredited by the Royal College of Physicians and surgeons of Canada. (These requirements apply to those who began training in neurology in Canada on or after July 1, 1994.)

4. Training Requirements for Physicians Entering Residency Training in Neurology on or after July 1, 1997.

Two patterns of training are acceptable:

A. A full year of training in internal medicine in an ACGME-approved program, or as an acceptable alternative, a full year in which a minimum of 6 months of training must be in internal medicine, the details of which must be documented by the internal medicine training director. The composition of these 6 months cannot include rotations in neurology, pediatrics, or emergency medicine. To ensure that these 6 months constitute a high-quality experience, they should emphasize progressive responsibility for the resident. At least 2 of the additional 6 months must be spent in internal medicine, pediatrics, or emergency medicine. No more than 2 of the remaining 4 months may be spent in neurology. In addition, all physicians will be required to complete 3 full years of postgraduate, specialized residency training in a neurology program accredited by the ACGME. Or

B. Four years of training in a neurology program approved by the ACGME for 4 years of training is acceptable.

5. Applicants with Non-US or Non-Canadian Training

The following criteria pertain to all applicants whose residency training was undertaken at a center located outside the United States or Canada. The candidate must possess an unlimited li-
cense to practice medicine in a state, commonwealth, or terri-
tory of the United States or province of Canada.

As of July 1, 1985, the only residency training that will be con-
sidered is training completed in programs approved by the
ACGME in the United States or by the RCPSC.

In lieu of a PGY-1 in an accredited program in the United
States or Canada, the following certificates in internal medicine
will be accepted:
A. MRCP(UK)—United Kingdom's Member of the Royal College
   of Physicians
B. MRACP—Australia and New Zealand's Member of the Royal
   Australasian College of Physicians
C. FCP(SA)—South Africa's Fellow of the College of Physicians
D. MRCP(I)—Ireland's Member of the Royal College of Physicians

The candidate must have achieved certification within the
past 7 years. If certification was achieved earlier, then the can-
didate must have had 1 year of clinical practice in a setting in
which his/her professional work has been observed by at least
two ABPN diplomates in that specialty and documented by two
letters of sponsorship from such diplomates.

For neurology training requirements pertinent to non-US or
non-Canadian trained physicians who entered residency training
prior to July 1, 1985, see Appendix A.

All physicians entering residency training in neurology on or
after July 1, 1997, must complete the training as described above.
(Training requirements for physicians entering residency train-
ing in neurology on or after July 1, 1997.) No credit will be
granted for training completed in programs that are not accred-
ted by the ACGME.

Certification in Neurology With Special
Qualifications in Child Neurology

Proper preparation for the practice of child neurology requires that
the practitioner be a qualified neurologist who has had additional
training in pediatrics and child neurology. To qualify for this cer-
cificate, a different type of preparation and certifying examination
are required. The same diploma will be used, the only difference being
that instead of certifying qualification in "neurology," it certifies
qualification in "neurology with special qualification in child
neurology."

An applicant seeking admission to examination for certification
in neurology with special qualification in child neurology must have
completed the following training in ACGME-approved programs or
programs approved by the RCPSC. All training must be completed
after receiving the degree of Doctor of Medicine or Doctor of
Osteopathy.

1. Three patterns of training are acceptable for 2 of the 5 years of
   training:
   A. The usual pathway is 2 years of training in general pediatrics.
   This is the only pathway that allows the applicant admission
   for examination by both the American Board of Pediatrics
   and the ABPN. Or
   B. Effective for individuals entering training as of July 1, 1992, 1
      year of training in general pediatrics and 1 year of research in
      the basic neurosciences. The basic neurosciences pathway was
      created as an alternative track for residents who are planning
      a research career in academic child neurology. The year of ba-
sic neurosciences would provide training in a research disci-
pline related to child neurology and is intended to increase
the trainee's knowledge base and competitiveness for federal
and non-federal grant support. The trainee must make at least
an 80% time commitment to basic neurosciences during this
year of training. For the purpose of this training track, basic
neurosciences is defined as laboratory research related to the

   cellular or molecular basis of neurologic diseases. Examples of
   relevant basic disciplines include molecular neurogenetics,
   neurochemistry, neuropathology, neurophysiology,
   neuroanatomy, neuroimmunology, developmental neurobi-
   ology, biophysics, and cell biology. This track of training must be
   approved by the Board prior to completion of the 5 years of
   training. Or

2. Effective for individuals entering residency training as of July 1, 1991, 1
   year of training in general pediatrics and 1 year of training in internal
   medicine. An acceptable alternative to the 1 year of internal
   medicine is a full year in which a minimum of 8
   months of training must be in internal medicine, the details of
   which must be documented by the internal medicine training director. The composition of these 8 months cannot include rota-
tions in neurology or emergency medicine.

   Effective for individuals entering training as of July 1, 1994, an
   acceptable alternative to the 1 year of internal medicine is a
   full year in which a minimum of 8 months of training must
   be in internal medicine, the details of which must be docu-
   mented by the internal medicine training director. The compo-
sition of these 6 months cannot include rotations in neurology
   or emergency medicine. To ensure that these 6 months consti-
tute a high-quality experience, they should be obtained with
an emphasis on progressive responsibility for the resident.

   At least 2 months of the additional 6 months must be spent
in internal medicine, pediatrics and/or emergency medicine.
No more than 2 months of the remaining 4 months may be
spent in neurology.

   In lieu of this year of internal medicine the following certifi-
cates will be accepted:
   1. MRCP(UK)—United Kingdom's Member of the Royal College
      of Physicians
   2. MRACP—Australia and New Zealand's Member of the Royal
      Australasian College of Physicians
   3. FCP(SA)—South Africa's Fellow of the Royal College of
      Physicians
   4. MRCP(I)—Ireland's Member of the Royal College of
      Physicians

3. Training Requirements for Physicians Entering Residency Train-
ing in Child Neurology on or after July 1, 1998.

   An applicant seeking admission to examination for certifica-
tion in neurology with special qualifications in child neurology
must complete the following training in ACGME-approved pro-
grams. All training must be completed after receiving the degree
of Doctor of Medicine or Doctor of Osteopathy.

   Three patterns of training are acceptable for 2 of the 5 years of
training:
   A. The usual pathway is 2 years of training in general pediatrics in
an ACGME-approved program. This is the only pathway that al-
lows the applicant admission for examination by both the
American Board of Pediatrics and the ABPN. Or
B. One year of training in general pediatrics in an ACGME-approved program and 1 year of research in the basic neurosciences. The basic neurosciences pathway was created as an alternative track for residents who are planning a research career in academic child neurology. The year of basic neurosciences would provide training in a research discipline related to child neurology and is intended to increase the trainee's knowledge base and competitiveness for federal and non-federal grant support. The trainee must make at least an 80% time commitment to basic neurosciences during this year of training. For the purpose of this training track, basic neurosciences is defined as laboratory research related to the cellular or molecular basis of neurologic diseases. Examples of relevant basic disciplines include molecular neurogenetics, neurochemistry, neuropharmacology, neurophysiology, neuroanatomy, neuroimmunology, developmental neurobiology, biophysics, and cell biology. This track of training must be approved by the Board prior to completion of the 5 years of training. Or

C. One year of training in general pediatrics in an ACGME-approved program and 1 year of training in internal medicine in an ACGME-approved program. An acceptable alternative to the 1 year of internal medicine is a full year of ACGME-approved training which includes a minimum of 6 months of internal medicine, the details of which must be documented by the internal medicine training director. The composition of these 6 months cannot include rotations in neurology, pediatrics, or emergency medicine. To ensure that these 6 months constitute a high-quality experience, they should be obtained with an emphasis on progressive responsibility for the resident.

At least 2 of the additional 8 months must be spent in internal medicine, pediatrics, or emergency medicine. No more than 2 months of the remaining 4 months may be spent in neurology.

In addition, all physicians will be required to complete 3 full years of postgraduate, specialized residency training in a child neurology program accredited by the ACGME.

All physicians entering residency training in neurology with special qualifications in child neurology on or after July 1, 1988, must complete the training as described above (Training requirements for physicians entering residency training in child neurology on or after July 1, 1988). No credit will be granted for training completed in programs that are not accredited by the ACGME.

**Examinations**

The Board does not endorse or recommend any texts or other teaching aids identified as “Board preparation” material. Furthermore, the Board does not have any affiliation with or responsibility for programs identifying themselves as “Board Review Courses.”

Though the purpose of the examination is to test the qualifications of the candidate in psychiatry or neurology, or both, it must not be forgotten that both these medical disciplines constitute part of the broad field of general medicine. The Board requires proficiency in neurology or the part of those it certifies in psychiatry and vice versa, but examines the candidate in accordance with the certificate he/she seeks.

The Board uses DSM-III-R as its primary authority in psychiatric diagnostic nomenclature. In 1985 both DSM-III-R and DSM-IV nomenclature will be acceptable.

Each candidate must pass both Part I and Part II of the examination given by the Board. Each examination shall cover such subjects as the Board may determine.

The Board may conduct examinations at such times and places as it deems appropriate. The Board reserves the right to limit the number of candidates admitted to any scheduled examination. The administration and grading of all examinations shall be the sole discretion of the Board. After completion of such examinations, the candidate will be notified in writing by the executive vice president as to the results.

The Board is not liable for candidate travel and/or other related expenses incurred as a result of an examination cancellation.

**Part I Examination**

**A. Part I Examination Procedures**

The Part I examination is given once a year, on a regional basis throughout the United States and Canada, as well as in selected sites outside the continental limits of the United States. Applicants will be expected to indicate, in order of preference, their choice of four examination sites. Every effort is made to accommodate candidates in the locale of their choice.

Request for transfer to another site must be made in writing at least 90 days prior to the Part I examination. Changes will be made subject to space availability.

An applicant will be advised in writing by the Board of acceptance for examination.

One month prior to the examination candidates will receive an admission notice specifying their examination site and time to report for examination.

All applicants are required to sit for the Part I examination for which they have applied. Applicants who fail to do so will be required to request and submit a new application, supporting documentation, and the application and Part I examination fees.

A candidate who passes Part I shall, upon request, submit to the Executive Vice President a check payable to the Board to cover the fee for Part II. The Part II examination is given three to four times a year at selected locations in the United States. Candidates who pass Part I will automatically be assigned to a Part II examination with a specific date and location. The limited space available and the complicated logistics involved in administering the Part II examination make it extremely difficult for the Board to allow candidates to select either the site or the date for the Part II examination. Candidates assigned to the Part II examination are expected to be present as scheduled. All candidates will be scheduled for Part II within 1 year following notification of successful completion of Part I.

A candidate who fails the initial Part I examination may, upon payment of the Part I reexamination fee, repeat the examination the following year. Reexaminees who do not sit for reexamination as scheduled will be required to request and submit a new application, all supporting documentation, and the application and Part I examination fees. Two failures necessitate reapplication (request for a new application, all supporting documentation, and the application and Part I examination fees).

Effective March 1987, a passing grade on the Part I examination dated March 1987, or thereafter, will be valid for a period of 5 years, or three attempts to complete the Part II examination successfully, whichever comes first.

**B. Part I Examination Content—Psychiatry**

Successful completion of the Part I written examination in psychiatry and neurology is required of candidates seeking certification in psychiatry.

The psychiatric portion of the examination will include questions on the following areas in psychiatry: normal and abnormal growth and development through the life cycle, biological and psychosocial dimensions of psychiatry, and clinical psychiatry (phenomenology, diagnosis, and treatment).
The neurologic portion of the examination will include questions on the following areas in neurology: neuroanatomy, neuropathology, neuropharmacology and clinical diagnostic procedures (including questions on cerebrospinal fluid, neuro-ophthalmology, electroencephalography, and neuroimaging), and therapy and clinical neurology (management of patients with neurologic disorders).

C. Part I Examination Content—Neurology
Successful completion of the Part I written examination in psychiatry and neurology is required of candidates seeking certification in neurology or neurology with special qualification in child neurology.

The neurologic portion of the examination will include questions on the following areas in adult and child neurology: neuroanatomy, neuropathology, neurochemistry, neurophysiology, basic and clinical neuropharmacology, neuroimmunology/neurovirology, genetics, neuroendocrinology, neuroimaging, neuro-ophthalmology, neurootology, and cerebrospinal fluid.

The psychiatric portion of the examination will include questions on the following areas in psychiatry: developmental and other disorders of childhood, psychopathology and diagnostic criteria, the doctor-patient relationship, behavioral and personality changes associated with structural alterations, alcoholism and substance abuse, altered states of consciousness, memory disorders and cortical dysfunction, psychiatric problems associated with medical disease, diagnostic procedures, psychopharmacology, and nonpharmacologic therapeutic modalities.

D. Appeal Procedure for Negative Determinations Regarding Part I Examinations
A failing grade on the Part I examination is considered a "negative determination." A candidate who receives a negative determination may appeal by complying with the following procedures:

Within 30 days after date of notice of a negative determination, the unsuccessful candidate may, by writing, indicate his/her request to have his/her examination hand scored. The appeal fee of $225 must accompany the request. The candidate will be informed of the results of the hand scoring in writing, which, in all events, will be final and binding on the Board and on the candidate. All correspondence and other materials should be sent to the Board office.

Part II
A. Part II Examination Procedures
All successful Part I candidates will receive a notice of assignment to a Part II examination, together with a request to submit the required examination fee. Scheduling for the Part II examination will be made on a regional basis as much as possible. Candidates who fail to take Part II as scheduled by the Board will be required to reapply for the Part II examination.

The limited space available and the complicated logistics involved in administering the Part II examination make it extremely difficult for the Board to allow candidates to select either the site or the date for examination. It is the candidate's privilege to decline the assigned examination, but there is no guarantee that another date or location will be available within the year's examination cycle.

Candidates who do not pay the Part II examination fee for their scheduled examination by the deadline specified will be removed from the roster of candidates for that examination. Such candidates will be required to request and submit a Part II application in order to be scheduled for a future Part II examination. Examination fees will be requested at the appropriate time.

Candidates who pay their Part II examination fee but fail to appear at their scheduled Part II examination will forfeit the fee. Such candidates will be required to request and submit a Part II application in order to be scheduled for a future Part II examination. Examination fees will be requested at the appropriate time.

One month prior to the date of the assigned Part II examination, a candidate will receive informational materials and an admission notice specifying the date, time, and place to report for registration. Candidates are requested to report for registration only at the date and time indicated on the admission notice. Registration schedules are arranged to accommodate candidates in accordance with their examination schedules.

1. Policy for Retaking the Part II Examination
A passing grade on the Part II examination dated March 1987, or thereafter, will be valid for a period of 6 years or three attempts to complete the Part II examination successfully, whichever comes first.

Psychiatric candidates must pass both sections of the Part II examination. A candidate who fails one or both sections of the examination must repeat both sections at each subsequently scheduled examination until he/she passes both sections at the same examination.

Neurology candidates must pass all three (two adult and one child) sections of the Part II examination. A candidate must repeat the section or sections he/she failed at each subsequently scheduled examination until he/she passes all the sections.

Child neurology candidates must pass all three (two child and one adult) sections of the Part II examination. A candidate must repeat the section or sections he/she failed at each subsequently scheduled examination until he/she passes all the sections.

Candidates who are unsuccessful in the Part II examination during the allotted time period will be required to request and submit a new Part I application, documentation, and the application and Part I examination fees.

2. Procedures for Retaking the Part II Examination
Candidates who have failed the Part II examination are automatically assigned to another Part II examination and are required to be present as scheduled. Candidates who fail to take the reexamination at the time specified are required to request and submit a Part II application. When possible, candidates submitting the Part II application will be scheduled for examination within 1 year from the date the Part II application is received in the Board office. Due to space limitations in the Part II examinations a wait longer than 1 year may become necessary. Candidates will be scheduled for examination based on space availability and order of receipt of application. A request for the examination fee will be made at that time. The examination fee should not be sent with the application.

Candidates who have submitted a Part II application may choose to decline two invitations to Part II examinations. If the third invitation is declined, the candidate will be required to request and submit a new Part II application and will be placed at the end of the waiting list once the application is received in the Board office.

Candidates should be aware of the expiration date of their passing the Part I examination and the number of times they have taken the Part II examination.

3. Rules of Forfeiture of Part II Examination Fee
A candidate who is unable to attend the Part II examination to which he or she has been admitted and who fails to notify the Executive Vice President in writing at least 90 days before the date of such examination shall forfeit the examination fee.

B. Part II Examination Content
Part II, an oral examination, will include the examination of patients under the supervision of one or more examiners. The manner of examining patients, and the reasoning and deductions therefrom, will constitute an important part of the examination. Knowledge of basic science principles, special diagnostic procedures, and manage-
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ment recommendations and risks are also essential parts of the examination, which is focused upon evaluation of clinical skills.

Candidates are expected to discuss their findings with their examiners. Questions frequently cover such areas as diagnosis, differential diagnosis, treatment, prognosis, and management. Reference to the basic sciences of psychiatry and neurology may be made.

Psychiatry candidates will take two examinations:

One 1-hour examination in clinical psychiatry (patient)

One 1-hour examination in clinical psychiatry (audiovisual)

In the patient section, the psychiatry candidate will be given approximately 30 minutes to examine a patient under the supervision of one or more examiners. Following the examination of the patient, the candidate will be examined by one or more examiners. This section will stress physician-patient interaction, conduct of the clinical examination, capacity to elicit clinical data, formulation, differential diagnosis and prognosis, therapeutic management, and knowledge of therapies. Additional questions may be addressed to the basic science of psychiatry.

The audiovisual section will consist of a videotaped psychiatric examination approximately 20 minutes in length, which the candidate will observe. Candidates will then be individually examined by one or more examiners with particular reference to the content of the tape. This discussion may also include other clinical topics.

Neurology candidates will take three examinations:

One 1-hour examination in clinical neurology (patient)

One 1-hour examination in clinical neurology (without patient)

One 1-hour examination in clinical child neurology (without patient)

Child neurology candidates will take three examinations:

One 1-hour examination in clinical child neurology (patient)

One 1-hour examination in clinical child neurology (without patient)

One 1-hour examination in clinical neurology (without patient)

In the neurology and child neurology patient sections, the candidate will be given approximately 30 minutes to examine the patient under the supervision of one or more examiners. During the conduct of the examination, the candidate’s ability to obtain an adequate history and perform a neurologic examination will be observed. Following the examination of the patient, the discussion with the examiner, which will be approximately 30 minutes in length, will focus on the evaluation of the findings and discussion of the diagnosis, treatment, and management. This discussion may not be limited to the patient examined and may also include other clinical topics. The examiners may also ask additional questions concerning the basic science of neurology.

Multiple written vignettes of patient encounters will be utilized as a basis for discussion of diagnosis and treatment in those sections in which there is no patient present.

Since candidates in child neurology are to be certified in "Neurology with Special Qualification in Child Neurology," it is agreed that those candidates will be expected to pass a 1-hour oral examination in clinical neurology (without patient), which is set at the same level of difficulty established for neurology candidates. The pass/fail standards for that hour in clinical neurology (without patient) will be the same whether the candidate is seeking certification in neurology or in neurology with special qualification in child neurology.

C. Feedback to Unsuccessful Candidates on the Part II Examination

A failing grade on a Part II examination is considered a "negative determination." Within 30 days after date of notice of a negative determination, the unsuccessful candidate may, by writing, indicate his/her request for feedback. The fee for providing feedback is $100 and must accompany the written request. After such request, the candidate will be provided information concerning his/her performance in the form of a checklist of categories passed and not passed. All correspondence or other materials should be sent to the Board office.

D. Appeal Procedure for Negative Determinations Regarding Part II Examinations

A failing grade on a Part II examination is considered a "negative determination." A candidate who receives a negative determination may appeal by complying with the following procedures.

Within 55 days after date of notice of a negative determination, the unsuccessful candidate may, by writing, indicate his/her request for a formal appeal of the examination results. The following materials must accompany this request: appeal fee, which is equal to the candidate’s reexamination fee, and written information tending to rebut the negative determination. All correspondence and other materials should be sent to the Board office.

For psychiatry candidates the Committee to Review Appeals for Psychiatry will review the materials and recommend action to the Psychiatry Council consisting of all current psychiatry directors. The Psychiatry Council will review the material and make a decision that, in all events, will be final and binding on the Council, on the Board, and on the candidate.

For neurology or neurology with special qualification in child neurology candidates, the Committee to Review Appeals for Neurology will review the materials and recommend action to the Neurology Council consisting of all current neurology directors. The Neurology Council will review the materials and make a decision that, in all events, will be final and binding on the Council, on the Board, and on the candidate.

Subspecialization

A. Committee on Certification in Child and Adolescent Psychiatry

In February 1959, the ABPN, in concurrence with the ABMS, established a Committee on Certification in Child Psychiatry. This was done to establish officially the field of child psychiatry as a definite area of subspecialization in psychiatry and to provide a means of identifying the properly trained and experienced child psychiatrist as distinguished from those who claim proficiency in this field without adequate background and qualifications. In November 1987, the name of the Committee was changed to the Committee on Certification in Child and Adolescent Psychiatry.

The actual mechanics of certification of qualified candidates and the establishment of basic policies have been delegated by the Board to the Committee, which operates under the supervision of and in accordance with the policies of the Board. The Committee presently consists of six members certified in child and adolescent psychiatry by the ABPN and one member certified by the American Board of Pediatrics.

The Committee holds meetings each year for the purpose of examining candidates and transacting business.

Each applicant for certification in child and adolescent psychiatry must be certified by the Board in the specialty of psychiatry prior to applying for examination in child and adolescent psychiatry. Training must be completed by the application deadline. The general policies regarding training, application, and examination in child and adolescent psychiatry are contained in the pamphlet "Information for Applicants for Certification in Child and Adolescent Psychiatry," which is available from the Board office.

Please note that applicants may submit application for examination in psychiatry after successful completion of the PGT-1, 2 years of residency training in psychiatry, and 1 year of residency training in child and adolescent psychiatry.
B. Committee on Certification for Added Qualifications in Geriatric Psychiatry

In November 1989, the ABPN, in concurrence with the ABMS, established a Committee on Certification for Added Qualifications in Geriatric Psychiatry. This was done to establish officially the field of geriatric psychiatry as a definite area of subspecialization in psychiatry and to provide a means of identifying the properly trained and experienced geriatric psychiatrist.

The actual mechanics of certification of qualified candidates have been delegated by the Board to the Committee, which operates under the supervision of and in accordance with the policies of the Board.

Each applicant for certification in geriatric psychiatry must be certified by the Board in the specialty of psychiatry prior to applying for examination for added qualifications in geriatric psychiatry. The general policies regarding training, application, and examination in geriatric psychiatry are contained in the pamphlet "Information for Applicants for Certification of Added Qualifications," which is available from the Board office.

C. Committee on Certification for Added Qualifications in Clinical Neurophysiology

In October 1990, the ABPN, in concurrence with the ABMS, established a Committee on Certification for Added Qualifications in Clinical Neurophysiology. This was done to establish officially the field of clinical neurophysiology as a definite area of subspecialization in neurology and psychiatry and to provide a means of identifying the properly trained and experienced clinical neurophysiologist.

The actual mechanics of certification of qualified candidates have been delegated by the Board to the Committee, which operates under the supervision of and in accordance with the policies of the Board.

Each applicant for certification in clinical neurophysiology must be certified by the Board in the specialty of neurology, neurology with special qualification in child neurology, or psychiatry prior to applying for examination for added qualifications in clinical neurophysiology. The general policies regarding training, application, and examination in clinical neurophysiology are contained in the pamphlet "Information for Applicants for Certification of Added Qualifications," which is available from the Board office.

D. Committee on Certification for Added Qualifications in Addiction Psychiatry

In October 1981, the ABPN, in concurrence with the ABMS, established a Committee on Certification for Added Qualifications in Addiction Psychiatry. This was done to establish officially the field of addiction psychiatry as a definite area of subspecialization in psychiatry and to provide a means of identifying the properly trained and experienced addiction psychiatrist.

The actual mechanics of certification of qualified candidates have been delegated by the Board to the Committee, which operates under the supervision of and in accordance with the policies of the Board.

Each applicant for certification in addiction psychiatry must be certified by the Board in the specialty of psychiatry prior to applying for examination for Added Qualifications in Addiction Psychiatry. The general policies regarding training, application, and examination in addiction psychiatry are contained in the pamphlet "Information for Applicants for Certification of Added Qualifications," which is available from the Board office.

E. Committee on Certification for Added Qualifications in Forensic Psychiatry

In November 1992, the ABPN, in concurrence with the ABMS, established a Committee on Certification for Added Qualifications in Forensic Psychiatry. This was done to establish officially the field of forensic psychiatry as a definite area of subspecialization in psychiatry and to provide a means of identifying the properly trained and experienced forensic psychiatrist.

The actual mechanics of certification of qualified candidates have been delegated by the Board to the Committee, which operates under the supervision of and in accordance with the policies of the Board.

Each applicant for certification in forensic psychiatry must be certified by the Board in the specialty of psychiatry prior to applying for examination for added qualifications in forensic psychiatry. The general policies regarding training, application, and examination in forensic psychiatry are contained in the pamphlet "Information for Applicants for Certification of Added Qualifications," which is available from the Board office.

Special Programs

A. Supplementary Certification

A candidate who has been certified in psychiatry, neurology, or neurology with special qualification in child neurology may apply for supplementary certification in another primary specialty upon submission of a new Part I application and Part I examination fee. The candidate will be scheduled for the next available Part I examination in the supplementary subject. The credentials for such other certificate must be acceptable to the Board.

More than one application may be on file simultaneously. It is the responsibility of the applicant to contact the Board office to avoid possible conflicts in examination scheduling.

1. Dual Certification in Psychiatry and Neurology

Applicants seeking certification both in psychiatry and neurology who began residency training prior to January 1, 1988, must have completed the following 5 years of ACGME-approved postgraduate training

a. A PGY-1 that meets requirements for either psychiatry or neurology;

b. Two years of approved residency in psychiatry in a single training program; and

c. Two years of approved residency in neurology in a single training program.

Applicants seeking certification both in psychiatry and neurology who began residency training as of January 1, 1988, must have completed the following ACGME-approved postgraduate training

a. A PGY-1 that meets the requirements for entry into a neurology program;

b. Either (1) 6 full years of postgraduate residency training in approved programs in the United States or Canada, including 3 full years in psychiatry and 3 full years in neurology; or (2) at the discretion and approval of both training directors and in accordance with Residency Review Committee requirements, the candidates may complete 5 full years of postgraduate training in approved programs in the United States or Canada, including 2 full years of residency training in psychiatry in a single program, 2 full years of residency training in neurology in a single program, and a full year that is jointly sponsored and coordinated by the psychiatry and neurology training directors to allow the resident to successfully complete all of the essentials for an approved residency program in psychiatry and an approved residency program in neurology.

The 5 years of residency training are usually taken at one approved institution but may be taken at no more than two approved institutions. An application for examination may be submitted after completion of an approved PGY-1, 2 full years of approved residency training in one specialty, and the full year of approved, jointly sponsored residency training.
2. Dual Certification in Neurology and Neurology with Special Qualification in Child Neurology
Applicants who have achieved certification in neurology and who wish to be certified in neurology with special qualification in child neurology will need to obtain the following additional training:
(a) A minimum of 12 months of general pediatric training completed in a program accredited by the ACGME or by the RCPSC; and
(b) Twelve months of training in clinical child neurology completed in a program accredited by the ACGME or by the RCPSC.
A maximum of 3 months of child neurology training obtained during a neurology residency may be applied toward the required 12 months of child neurology training only if the 3 months was accomplished in an ACGME-approved child neurology program or a child neurology program accredited by the RCPSC. The Neurology program director must document that this training was accomplished in an ACGME-approved child neurology program or a child neurology program accredited by the RCPSC.
Candidates will be required to request and submit a new completed Part 7 application and a $595 processing fee. Such candidates will not be required to retake the Part 1 examination in neurology. The Part II examination fee will be requested after the application has been approved. Two 1-hour examinations in child neurology will be taken during the Part II examination.

3. Dual Certification in Child and Adolescent Psychiatry and in Neurology with Special Qualification in Child Neurology
An applicant who wishes to obtain certificates both in child and adolescent psychiatry and in neurology with special qualification in child neurology must meet the following requirements:
(a) Certification by the Board in the specialty of general psychiatry prior to applying for examination in child and adolescent psychiatry (a minimum of 2 years of approved residency training in general psychiatry is required), and
(b) Completion of the requirements for certification in neurology with special qualification in child neurology.

B. Triple-Board Requirements
The ABP, the ABPN, and the Committee on Certification in Child and Adolescent Psychiatry of the ABPN have developed a committee that is overseeing training via a different format in six programs. This is a 5-year curriculum with 24 months of pediatrics, 18 months of adult psychiatry, and 6 months of child and adolescent psychiatry. Completion of the program will satisfy the training requirements for certification in all three areas. Physicians pursuing training in one of these six programs may not apply for examination until all training has been completed. The six approved programs are: Albert Einstein College of Medicine, Brown University, Mount Sinai School of Medicine, Tufts University School of Medicine, the University of Kentucky, and the University of Utah. For further information please contact the ABPN.

C. Combined Training Leading to Certification by Two Boards
The approved combined training programs are listed in the Graduate Medical Education Directory or a listing may be obtained by writing the ABPN. The Board currently has the following programs:

1. Dual Certification in Psychiatry/Internal Medicine
The ABPN and the ABIM have approved programs for combined psychiatry/internal medicine residency training.

2. Dual Certification in Neurology/Internal Medicine
The ABPN and the ABIM have approved programs for combined neurology/internal medicine residency training.

3. Dual Certification in Neurology/Physical Medicine and Rehabilitation
The ABPN and the American Board of Physical Medicine and Rehabilitation have approved programs for combined neurology/physical medicine and rehabilitation residency training.

Appendix A
Satisfaction of the following training requirements for residency is mandatory for physicians entering training programs on or after July 1, 1977, and before July 1, 1987, for neurology.
Two patterns of training are acceptable
A. Three-Year Training Following a First Postgraduate Year. Prior to entering an approved 3-year training program in Neurology a physician must have completed 1 year of approved training after receiving the degree of Doctor of Medicine or Doctor of Osteopathy. This year of clinical experience should emphasize internal medicine, pediatrics, or family practice. The following programs would be acceptable
The Categorical First Year, Categorical First Year, and the Flexible First Year are in accord with those defined by the Department of Graduate Medical Education. American Medical Association. These were in effect from 1977 through 1981. Effective July 1982, ACGME-approved first postgraduate year training programs include only Categorical First Year, Categorical First Year, and Transitional Programs.
1. Categorical First Year: These are first-year programs planned, sponsored, and conducted by a single, approved residency program as part of that residency. The context of such a first year will be limited to the specialty field of the sponsoring residency program.
   The Categorical First Year (beginning after 1977 and before 1986 for neurology candidates) must be completed in internal medicine, family practice, pediatrics, surgery, or obstetrics and gynecology.
2. Categorical First Year: The asterisk designates a first-year program that was planned, sponsored, and supervised by a single, approved residency program as part of that residency's program of graduate medical education, the content of which was not limited to the single specialty of the sponsoring residency program but may have included experience in two or more specialty fields.
   The Categorical First Year in neurology must have included at least 4 months with direct patient care responsibility in internal medicine, family practice, pediatrics, or psychiatry.
3. Flexible First Year: The first year will be sponsored by two or more approved residencies and will be jointly planned and supervised by the residencies that sponsor it. The content of a flexible first year must include 4 months of internal medicine, but the remainder of the year may be designed in accordance with the purposes of the two or more sponsoring residency programs, and the interests and needs of the students.
4. Transitional Programs: Transitional programs are provided for physicians who desire in their first or later graduate year an experience in several specialties prior to embarking on further training in a single specialty. The criteria for a Transitional Year are outlined in the Graduate Medical Education Directory, published by the American Medical Association.

B. Four-Year Training Programs:
A neurology residency program approved by the ACGME for 4 years of training would be acceptable.
2. Applicants with Non-US, Non-Canadian Training.

The following criteria pertain to all applicants whose residency training was undertaken at a center located outside the United States or Canada prior to July 1, 1985. The applicant must possess an unlimited license to practice medicine in a state, commonwealth, or territory of the United States, or province of Canada.

A. Applicants from the United Kingdom

For each year of residency training completed in an approved hospital program in neurology in the United Kingdom, 1 year of training credit will be given toward eligibility for examination by the Board in neurology. The hospital program must be among those approved by the Visiting Inspection Specialty Committee in Neurology of the Royal College of Physicians.

In order to obtain credit for 2 or 3 years of approved training in the United Kingdom, at least 2 years of the training must be spent at the same training center in neurology.

The applicant will be responsible for sending the details of his or her training to the Board office, along with verification of this training from the approved hospital or hospitals in the United Kingdom. The applicant's program director must certify that the applicant was engaged in full-time residency training. Credit for approved residency training in the United Kingdom will be given only for training begun on or after July 1, 1976. Applicants who have completed residency training in the United Kingdom prior to July 1, 1976, must meet the criteria outlined in the section Applicants with Non-US, Non-Canadian, or Non-UK Training, listed below.

B. Applicants with Non-US, Non-Canadian, or Non-UK Training

The following criteria pertain to all applicants whose residency training was undertaken at a center located outside the United States, Canada, or the United Kingdom (with the exception of applicants who completed residency training in the United Kingdom prior to July 1, 1976).

1. The candidate must have had full-time specialty training in a manner equivalent in length of time and content to that required for US training.

2. The candidate must successfully complete a comparable national certification examination in the country of training in the specialty in which the physician is seeking admission to examination, and

3. The candidate must have achieved certification within the past 7 years. If certification was achieved earlier, then the candidate must have had 1 year of clinical practice in a setting in which his or her professional work has been observed by at least two ABPN diplomates in that specialty and documented by two letters of sponsorship from such diplomates.

The only certifications recognized by the Board as clearly equivalent are

1. MRCP (Member of the Royal College of Physicians)
2. MRACP (Member of the Royal Australian College of Physicians)
3. Certification by the RCPSC

American Board of Radiology

M Paul Capp, MD, Executive Director, Tucson, Arizona
Kenneth L Krabbenhoft, MD, Associate Executive Director, Pleasant Ridge, Michigan
Robert E Campbell, MD, Assistant Executive Director for Diagnostic Radiology, Philadelphia, Pennsylvania

Lawrence W Davis, MD, Assistant Executive Director for Radiation Oncology, Atlanta, Georgia
C Douglas Maynard, MD, President, Winston-Salem, North Carolina
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Lee F Rogers, MD, Chicago, Illinois
Joseph F Sackett, MD, Madison, Wisconsin
Isaac Sanders, MD, Los Angeles, California
Melwyn H Schreiber, MD, Galveston, Texas
James E Youker, MD, Milwaukee, Wisconsin

(These criteria and conditions are subject to change without notice. All applicants are advised to contact the American Board of Radiology to ascertain whether the information below is current.)

Certificates

A certificate will be issued to each candidate who has finished a prescribed and approved period of training and study and has passed a written and oral examination demonstrating an adequate level of knowledge and ability in diagnostic radiology and/or diagnostic radiology with special competence in nuclear radiology, or radiation oncology in accordance with the definitions as stated in the Bylaws and Rules and Regulations of the American Board of Radiology (ABBR).

A certificate granted by the Board does not of itself confer, nor purport to confer, any degree or legal qualifications, privileges, or license to practice radiology.

Definitions

1. Diagnostic radiology is that branch of radiology that deals with the utilization of all modalities of radiant energy in medical diagnosis and therapeutic procedures utilizing radiologic guidance. This includes, but is not restricted to, imaging techniques and methodologies utilizing radiations emitted by x-ray tubes, radionuclides, ultrasonographic devices, and radio-frequency electromagnetic radiation emitted by atoms.

2. Nuclear radiology is that branch of radiology that involves the analysis and imaging of radionuclides and radionuclide substances for diagnostic imaging and related in vivo techniques.

3. Radiation oncology is that branch of radiology that deals with the therapeutic applications of radiant energy and its modifiers, and the study and management of cancer and other diseases.

Certificates of Added Qualifications

A certificate will be issued to each diplomate certified in either radiology or diagnostic radiology who has finished a prescribed and approved period of training and study, and has passed an oral examination demonstrating an adequate level of knowledge and ability in the area of expertise for which he or she has applied in accordance with the definitions stated in the Bylaws and Rules and Regulations of the American Board of Radiology.
Certification Requirements

Definitions
1. Pediatric radiology is the branch of radiology dealing with children.
2. Vascular and interventional radiology is the branch of radiology involved with the diagnosis and treatment of diseases using percutaneous methods guided by various radiologic imaging modalities.

Qualifications of Applicants for Certification by the American Board of Radiology
Each applicant for admission to an examination for a certificate to be issued by the ABR in diagnostic radiology, diagnostic radiology with special competence in nuclear radiology, and/or radiation oncology shall be required to present evidence satisfactory to the Board that the applicant has met the following standards
1. General Qualifications: That the applicant is a specialist in diagnostic radiology, diagnostic radiology with special competence in nuclear radiology, and/or radiation oncology as outlined in Article II, Section 2, of the Rules and Regulations, and is recognized by his/her peers to have high moral and ethical standards in his/her profession.
2. General Professional Education: Graduation from a medical school accredited at the date of graduation by the Liaison Committee on Medical Education of the American Medical Association, or the Royal College of Physicians and Surgeons of Canada, or from a College of Osteopathic Medicine approved by the American Osteopathic Association. If the applicant is a graduate of a medical school outside the United States or Canada, the applicant must be screened with approval by an agency approved by the Board of Trustees.
3. Special Training: This period of special training shall be as the Board of Trustees, by resolution or motion, shall determine from time to time. Effective for candidates beginning their training July 1, 1981, and thereafter, the Board of Trustees shall require a written statement from the program director, attesting that the applicant will have satisfactorily completed the prescribed special training at the time of the written examination and is prepared to take that examination.
4. In special instances these requirements may be modified by majority vote of the entire Board of Trustees, or by the executive committee acting in its stead.
5. If the program director fails to indicate in writing that the applicant is adequately trained and prepared for the examination, documentation of the reason(s) must be submitted along with evidence that the candidate has been appropriately apprised of his/her deficiencies. The executive committee of the Board will notify the applicant in writing that an appeals mechanism exists, as outlined in paragraphs 6 and 7 below.
6. In utilizing the appeals mechanism, the applicant must provide the executive committee of the Board with the written statement describing the reasons that he/she believes will support his/her appeal. The executive committee may ask the program director to submit a written response to the applicant’s appeal.
7. The executive committee must reach a final decision with the least possible delay in order that the applicant who wins his/her appeal does not lose the opportunity to be accepted for the examination for which he/she has applied.

Diagnostic Radiology
Candidates beginning their training in diagnostic radiology after June 30, 1984, will be required to have 4 years of approved postgraduate training in a department approved to train in diagnostic radiology by the Residency Review Committee for Radiology representing the ABR, the American College of Radiology, and the Council on Medical Education of the American Medical Association and accredited by the Accreditation Council for Graduate Medical Education (ACGME), exclusive of an internship or clinical year (if the latter is required by the program director). A minimum of 6 months, but not more than 12 months, must be spent in nuclear radiology in the 4-year program. Candidates may spend no more than 8 months in rotations outside the parent institutions.

Residents must have basic cardiac life support certification; advanced cardiac life support certification is encouraged. It is not the intent of the ABR for programs to use any of the 4 years for traditional fellowship training.

Effective for residents beginning their training July 1, 1991:
In a 4-year approved residency program, not more than 12 months shall be spent in a single discipline (research is considered a discipline).

The designation of “fellowship” is reserved for training beyond the 4-year residency.

In a 4-year program, the resident is expected to remain in that program for all 4 years. If a transfer to another program is necessary or desired, that transfer must have the agreement of both program directors and the prospective notification to, and approval of, the ABR.
Candidates will be considered for the written examination when they have completed 36 of the required 48 months of approved training, or if they will complete this amount by September 30 of the year in which the examination is given.
A maximum of 3 months may be spent in radiation oncology (therapeutic radiology).

Candidates beginning their graduate medical education after January 1, 1997, will be required to have 5 years of approved training with a minimum of 4 years in diagnostic radiology. The other year must be accredited clinical training in internal medicine, pediatrics, surgery or surgical specialties, obstetrics and gynecology, neurology, family practice, emergency medicine, or any combination of these. This clinical year will usually be the first postgraduate year. No more than a total of 3 months may be spent in radiology and/or pathology. All clinical training must be in an ACGME, American Osteopathic Association, or equivalent approved program.

Diagnostic Radiology With Special Competence in Nuclear Radiology
The ABR will give a special examination leading to a certificate in diagnostic radiology with special competence in nuclear radiology to those diplomates in radiology, roentgenology, diagnostic radiology, or diagnostic radiology who have fulfilled the requirement of 1 full year of formal training in nuclear radiology in an approved department of diagnostic radiology, nuclear medicine, or diagnostic radiology with special competence in nuclear radiology. This examination will consist of three examiners. The categories to be covered are: (1) bone, bone marrow, genitourinary tract, tumor, and absence localization; (2) central nervous system, endocrinology, gastrointestinal tract, hepatobiliary tract, and spleen; and (3) cardiovascular systems.
Candidates applying for certification in diagnostic radiology with special competence in nuclear radiology in 1991 must first be certified in diagnostic radiology. They must have a minimum of 12 months of approved training in nuclear radiology. No credit will be given for any training obtained during the 4 years of diagnostic radiology residency after July 1, 1994.

Radiation Oncology
Candidates beginning their training in radiation oncology after June 30, 1976, and who have not had an approved internship, will be required to have 4 years of approved postgraduate training.
Three of these years must be spent in a department approved to train in radiation oncology by the Residency Review Committee for Radiology representing the ABR, the American College of Radiology, and the American Medical Association Council on Medical Education and accredited by the ACGME. The other (PG-1) year may be spent in one of the following programs: internal medicine, surgery, pediatrics, family practice, obstetrics and gynecology, flexible, transitional, or categorical radiation oncology. No credit will be allowed for a foreign internship.

The 3-year residency training period must include training in pathology and training in the therapeutic aspects of nuclear medicine. Credit may not exceed 3 months for time spent in either subject. A maximum of 3 months' training in diagnostic radiology will be allowed.

Candidates in this category will be eligible for the written examination when they have completed the required 48 months of approved training, or if they will complete this amount by September 30 of the year in which the examination is given.

Effective in 1995, successful candidates will be issued a 10-year time-limited certificate in radiation oncology.

**Application and Fee**

Application for examination must be made in exact duplicate (two original copies on prescribed forms that may be obtained from the secretary). No photocopy or any other kind of copy will be accepted. The data summary form enclosed with the application is an integral part that must be completed. These forms shall be forwarded with the required data, three unmounted photographs autographed on the front, and the current application fee (US currency) by the deadline established for filing. A certified check or money order is required to be made payable to the American Board of Radiology, Inc. Applications for the written examination to be given in any year will not be accepted prior to July 1 of the preceding year and must be filed no later than the deadline of September 30 of the preceding year. The application fee will cover both the written and the oral examinations, provided the candidate is successful on his/her first attempt in both the written and oral examinations.

Incomplete applications will not be accepted. The postmark affixed to the last item received to complete the application must be on or before the deadline date.

All applications must be typed or neatly printed (in ink).

In the event of withdrawal of an application, only a portion of the fee can be refunded.

Beginning July 1, 1981:

A candidate will have three consecutive opportunities to pass the written examination, beginning with the written examination for which he/she is first declared admissible. If a candidate fails to accomplish this, he/she must submit a new application and the fee in effect at that time. Failure to accept an appointment, cancellation of an appointment, or failure to appear for a scheduled written examination will be regarded as one of the three opportunities.

A candidate who fails the written examination after three attempts must submit a new application together with the fee in effect at that time.

A candidate who has passed the written examination will have three consecutive opportunities to appear for and pass the oral examination, beginning with the oral examination for which he/she is first declared admissible. If a candidate fails to accomplish this, he/she must submit a new application and the fee in effect at that time and reinitiate the examination process, including the written examination. Failure to accept an appointment, cancellation of an appointment, or failure to appear for a scheduled oral examination will be regarded as one of the three opportunities.

A candidate who finds it necessary for any reason to cancel after acceptance of an appointment for either the written or oral examination shall be required to submit an additional fee. This amount represents administrative costs to the Board. A candidate who fails to appear for an examination without notifying the office of the ABR at least 20 days prior to the first date of the examination will be charged the full application fee in existence at the time of payment. (Under certain circumstances, the ABR, entirely at its discretion, may excuse such a candidate from this penalty; provided the reason for such absence is substantiated in writing.)

**Objectives of the Written Examination**

In 1965 it became apparent to the Board of Trustees of the ABR that the then-current oral examination could not cover the entire burgeoning field of radiology without the addition of more segments and, in turn, more examiners. This would not only impose a further burden on candidates but also on the Board itself. It was decided, therefore, to search for other methods of examination. At that time, it was agreed to adopt a written examination to be given annually as a prerequisite for the oral examination. The content of the examination will include the basic sciences of anatomy, pathology, physiology, and pharmacology as these subjects relate to clinical practice. Also to be included are radiological techniques, radiological physics, and radiation biology.

The content of the examination in radiation oncology will include the basic sciences of physics, radiation biology, and clinical oncology as well as anatomy, pathology, physiology, and chemotherapy as these subjects relate to the clinical practice of radiation oncology.

A pool of multiple-choice questions was developed, and the first examination was given in 1969 to all candidates seeking certification in diagnostic radiology and in radiation oncology.

**Content of Written Examination in Each Field**

Each examination consists of between 320 and 375 multiple-choice questions, to be administered over a period of approximately 8 hours. About one half of the questions are distributed on the afternoon of one day, and the other half distributed on the morning of the following day.

New written examinations are formulated each year in all categories of radiology, and the content of the examinations is carefully evaluated in order to keep pace with new information and developments. Even the number of questions in each category may be changed as necessity dictates from year to year.

Beginning in 1987, a candidate who passes the diagnostic portion but fails physics must repeat the physics portion and pass before admission to the oral examination.

Beginning in 1989, a candidate who takes the written examination in diagnostic radiology and fails the diagnostic portion but passes physics must repeat the diagnostic portion but will not be required to repeat physics.

Beginning in 1986, a candidate who takes the written examination in radiation oncology and passes the clinical portion but fails either physics or radiation biology must repeat only the portion which he/she failed. Those candidates who fail the physics and the radiation biology portions of the examination or the clinical oncology portion of the examination must repeat the entire examination.

Candidates in diagnostic radiology may expect to be asked questions on magnetic resonance imaging in the written and oral examinations.

**Oral Examination**

Oral examinations are given at a time designated by the Board of Trustees. At the present time, the oral examinations are conducted yearly in May and/or June.
Admissibility to the oral examination is determined by the executive committee. Experience has shown that to delay taking the oral examination does not benefit the candidate. No recording device of any kind may be brought to the examination.

**Content of Oral Examination for Diagnostic Radiology**

The categories to be covered are: bones and joints, chest, gastrointestinal tract, genitourinary tract, neuroradiology, cardiovascular radiology, nuclear radiology, ultrasonography, pediatric radiology, and breast radiology. Questions may be asked on interventional techniques and magnetic resonance imaging.

**Content of Oral Examination for Radiation Oncology**

Effective in 1993, candidates applying for examination in radiation oncology will be examined for a period of 30 minutes each by eight examiners. The subject matter of this examination concerns the clinical management of malignant disease and is usually presented according to the anatomical site of the primary tumor. The anatomical sites are divided into the following eight categories: gastrointestinal malignancies, gynecologic malignancies, genitourinary malignancies, diseases of the reticuloendothelial system, head, neck, and skin; breast; central nervous system and pediatric malignancies; and lung and mediastinum, soft tissue, and bone.

Brachytherapy techniques and the effect of radiation on normal tissue may be included in all categories.

**Reexaminations**

**Failures**

A candidate who fails or conditions the oral examination in diagnostic radiology or in radiation oncology may be scheduled for reexamination. The reexamination fee in effect at that time must be submitted by certified check or money order.

Candidates in diagnostic radiology who have conditioned one, two, or three categories in the oral examination will be reexamined by two examiners in each conditioned category. Candidates in radiation oncology who have conditioned one or two categories in the oral examination will be reexamined by two examiners in each conditioned category. Candidates must pass the reexamination by both examiners in each category to remove the condition.

Effective July 1, 1981, a candidate who has failed the oral examination three times must start the examination procedure from the beginning with the submission of a new application, pay the fee in effect at that time and retake the entire written examination.

**Status of a Physician**

The Board will reply to an inquiry concerning the status of a physician with one of the following statements:

1. The physician is Board certified.
2. The physician is in the examination process.
3. The physician is neither certified nor in the examination process.

Note: No official status of "Board qualified" or "Board eligible" is recognized by the Board.

**Final Action of the Board**

The final action of the Board is based on the applicant's professional record, training, and attainment in the field of diagnostic radiology, diagnostic radiology with special competence in nuclear radiology, or in radiation oncology, as well as on the results of his examination. This Board has been organized to assist qualified radiologists to become recognized in their communities as men and women competent to practice diagnostic radiology, diagnostic radiology with special competence in nuclear radiology, or radiation oncology.

**Revocation of Certificates**

Certificates issued by this Board are subject to the provisions of Articles of Incorporation and the Bylaws. According to Article IX, Section 4, of the Bylaws, any certificate issued by the Board of Trustees shall be subject to revocation in the event that:

1. The issuance of such certificate, or its receipt by the individual so certified, shall have been contrary to, or in violation of, any provision of the Certificate of Incorporation of this, the American Board of Radiology, or of these Bylaws or rules and regulations adopted by the Board of Trustees; or
2. The individual so certified shall not have been eligible in fact to receive such certificate; or
3. The individual so certified shall have made any misstatement of fact in the application, or in any other communication, to the corporation or its representatives; or
4. The individual so certified shall have been convicted by a court of competent jurisdiction of a felony or of any misdemeanor involving, in the opinion of the Board of Trustees, moral turpitude; or
5. The license to practice medicine of the individual so certified shall be revoked.

Before any such certificate shall be revoked, a notice shall be sent by registered or certified mail to the last known address of the holder of such certificate, as it appears on the records of this corporation, setting forth the act, omission, or conduct alleged or complained of, and giving the holder of such certificate a reasonable opportunity to answer in writing thereto. Such certificate holder shall have not less than 30 days in which to reply thereto. The Board of Trustees may, at its discretion, make such further investigation as it deems necessary and proper.

The Board of Trustees of this corporation shall have the sole power, jurisdiction, and right to determine and decide whether the evidence or information before it is sufficient to constitute one of the grounds for revocation of any certificate issued by this corporation, and the decision of such Board of Trustees in the premise shall be final.

All correspondence should be addressed to the Executive Director:

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American Board of Radiology, Inc
5255 E Williams Circle/Site 6800
Tucson, AZ 85711
602 790-2960
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(The material which follows is revised annually. All applicants are advised to consult the American Board of Surgery to obtain current information.)

Specialty of Surgery (General Surgery) Defined
The Board interprets the term "general surgery" in a comprehensive but specific manner, as a discipline having a central core of knowledge embracing anatomy, physiology, chemistry, immunology, nutrition, pathology, wound healing, shock and resuscitation, intensive care, and neoplasia, which are common to all surgical specialties.

The general surgeon is one who has specialized knowledge and skill relating to the diagnosis and the preoperative, operative, and postoperative management in the following areas of primary responsibility:
1. Alimentary tract
2. Abdomen and its contents
3. Breast, skin and soft tissue
4. Head and neck, including trauma; vascular, endocrine, congenital and oncologic disorders, particularly tumors of the skin, salivary glands, thyroid, parathyroid, and the oral cavity
5. Vascular system, excluding the intracranial vessels, the heart, and those vessels intrinsic and immediately adjacent thereto
6. Endocrine system
7. Surgical oncology, including coordinated multimodality management of the cancer patient by screening, surveillance, surgical adjuvant therapy, rehabilitation, and follow-up
8. Comprehensive management of trauma, including musculoskeletal, hand, and head injuries; the responsibility for all phases of care of the injured patient is an essential component of general surgery
9. Complete care of critically ill patients with underlying surgical conditions, in the emergency room, intensive care unit, and trauma/burn units

Additionally, the general surgeon is expected to have significant preoperative, operative, and postoperative experience in pediatric, plastic, general thoracic, and transplant surgery. Also, the surgeon must have understanding of the management of the more common problems in cardiac, genitourinary, neurologic, orthopedic, and urologic surgery, and of the administration of anesthetists.

The general surgeon must be capable of employing endoscopic techniques, particularly proctosigmoidoscoppy and operative cholecystectomy, and must have experience with a variety of other endoscopic techniques such as laryngoscopy, bronchoscopy, esophagogastroduodenoscopy, colonoscopy, and laparoscopy. The general surgeon should have opportunity to gain knowledge and experience of evolving technological methods, eg, laser applications and endoscopic operations.

Meaning of Certification
The Board considers certification to be based upon a process that includes the educational and evaluation phases and an examination phase. It holds that undergraduate and graduate education are of the utmost importance and requires the program director's endorsement, testifying that the applicant has had an appropriate educational experience and has attained a sufficiently high level of knowledge, judgment, and skills to be prepared for designation by the Board's certificate as a specialist in surgery, upon successful completion of the examinations, and to enter into independent practice of the specialty.

Graduate Education in Surgery
I. General Information
The purpose of graduate education in surgery is to provide the opportunity to acquire a broad understanding of human biology as it relates to disorders of a surgical nature and the technical knowledge and skills appropriate to be applied by a specialist in surgery. This goal can best be attained by means of a progressively graded curriculum of study and clinical experience under guidance and supervision of senior surgeons, which provides progression through succeeding stages of responsibility for patient care up to the final one of complete management. Major operative experience and senior/chief responsibility at the final stage of the program are essential components of surgical education. The Board will not accept into the process of certification anyone who has not had such an experience in the specialty of surgery, as previously defined, regardless of the number of years spent in educational programs.

The graduate educational requirements set forth on these pages are considered to be the minimal requirements of the Board and should not be interpreted to be restrictive in nature. The Board recognizes that the time required for the total educational process should be sufficient to provide adequate clinical experience for the development of sound surgical judgment and adequate technical skill. These requirements do not preclude additional desirable educational experience, and program directors are encouraged to retain residents in a program as long as is required to achieve the necessary level of qualifications.

The integration of basic sciences with clinical experience is considered to be superior to formal courses in such subjects. Accordingly, while recognizing the value of formal courses in the study of surgery and the basic sciences at approved graduate schools of medicine, the Board will not accept such courses in lieu of any part of the required clinical years of surgical education.

The Board may at its discretion require that a member of the Board or a designated diplomate observe and report upon the clinical performance of an applicant before establishing admittance to examination or awarding certification.

While a program may develop its own vacation, illness, and other leave policies for the resident, 1 year of approved residency toward the Board's requirements must be 52 weeks in duration and must include at least 48 weeks of full-time surgical experience. Furthermore, unused vacation and other leave time may not be accumulated to reduce the overall duration of residency expected by the Board.

All phases of the graduate educational process must be completed in a manner satisfactory to the Board.
II. Acceptable Programs

The residency programs in surgery in the United States that are reviewed and approved by the Residency Review Committee for surgery and the Accreditation Council for Graduate Medical Education (ACGME) are acceptable to the Board as an adequate educational experience.

In Canada, those university residency programs in surgery that are accredited by the Royal College of Physicians and Surgeons offer acceptable educational experience. Applicants from such programs must meet the Board’s specific requirements and cannot receive credit for postgraduate surgical education in countries other than the United States or Canada.

Except as mentioned above, participation in postgraduate surgical education programs in countries other than the United States is not creditable toward the Board’s educational requirements unless under the specific conditions set forth in the section Credit for Foreign Graduate Education.

Listings of accredited programs in the United States may be found in the Graduate Medical Education Directory, published annually by the American Medical Association under the aegis of the ACGME.

Requirements for Certification in Surgery

I. General

A. Must have demonstrated to the satisfaction of the authorities of one’s graduate educational program in surgery, to one’s peers, and to the Board, that one has attained the level of qualifications in surgery required by the Board.

B. Must have a moral and ethical standing satisfactory to the Board and in conformity with the Standards on Principles of the American College of Surgeons and its interpretations.

C. Must be actively engaged in the practice of surgery as indicated by holding admitting privileges to a surgical service in an accredited hospital, or be currently engaged in pursuing additional graduate education in a component of surgery or one of the other recognized surgical specialties.

D. Must have a currently registered and unrestricted license to practice medicine granted by a state, or other United States jurisdiction, or by a Canadian province. The license must be valid no later than 6 months following completion of the residency in surgery. A temporary limited license, such as an educational, institutional, or house staff permit, is not acceptable to the Board.

II. Educational

A. Undergraduate Medical Education

1. Must have graduated from an accredited school of allopathic or osteopathic medicine in the United States or Canada.

2. Graduates of schools of medicine from countries other than the United States and Canada must present evidence of final certification by the Educational Commission for Foreign Medical Graduates (ECFMG).

B. Graduate Education in Surgery

1. Must have satisfactorily completed a minimum of 5 years of progressive education, following graduation from medical school, in a program in surgery accredited by the ACGME or the Royal College of Physicians and Surgeons of Canada.

2. Must have completed all phases of graduate education in surgery in a program in surgery accredited by the ACGME. Experience obtained in accredited programs in other recognized specialties, although containing some exposure to surgery, is not acceptable. A flexible or transitional first year is not creditable toward the Board’s requirements as a PGY-1 unless it is accomplished in an institution having an accredited program in surgery and at least 6 months of the year is spent in surgical disciplines.

3. Must have, in a program accredited for a minimum of 5 years, at least 4 years of clinical surgical experience with progressively increasing levels of responsibility. There must be no less than 36 months devoted to the primary components of surgery (general surgery) as previously defined. The entire chief resident experience must be devoted to the primary components of the specialty of surgery. No more than 4 months of the chief residency may be devoted to any one of the primary components of surgery. During junior years, a total of 6 months may be assigned to nonsurgical disciplines such as medicine, gastroenterology, or pediatrics. Training in surgical pathology and endoscopy is considered to be surgical, but obstetrics and ophthalmology are not. No more than a total of 12 months during junior years may be allocated in any one surgical specialty other than general surgery. One year of the minimal five may be spent in laboratory research.

4. Must have 12 months in the capacity of chief resident in general surgery. The Board considers the terms chief resident and senior resident to be synonymous and to mean the 12 months in the program in which the resident assumes the ultimate clinical responsibilities for patient care under the supervision of the teaching staff. The majority of the 12 months of chief residency must be served in the final year. However, to take advantage of a unique educational opportunity in a program during a resident’s final year, a portion of the chief residency may be served in the next to the last year, provided it is no earlier than the fourth clinical year and has been approved by the Residency Review Committee for Surgery followed by notification to the Board. The chief residency must be spent only in the parent or an integrated institution unless rotation to an affiliated institution has been approved by the Residency Review Committee for Surgery.

5. The Board expects a residency year to include no less than 48 weeks of full-time surgical training.

6. All phases of the graduate educational process must be in accordance with the Special Requirements for Residency Training in General Surgery as promulgated by the ACGME and approved by the Residency Review Committee for Surgery.

7. The Board believes that for optimal surgical education the resident should spend at least the final 2 residency years in the same program.

III. Operative Experience

Applicants for examination must meet the criteria established by the RRC, ie, a minimum of 500 procedures in the chief/senior year. This must include operative experience in each of the areas of primary responsibility included in the definition of surgery (general surgery) set forth previously.

Each applicant must submit a tabulation of the operative procedures performed as surgeon and those performed as first assistant or teaching assistant. The Board provides an operative experience form for this purpose when application material is obtained by the applicant. The resident’s record form, available to program directors for residents’ use through the Residency Review Committee for Surgery, may be submitted in lieu of the Board’s operative experience form.

In tabulating cases toward Board requirements, credit may be claimed “as surgeon” when the resident has actively participated in the patient’s care; has made or confirmed the diagnosis; has participated in selection of the appropriate operative procedure; has either performed or been responsibly involved in performing the critical portions of the operative procedure; and has been a responsible participant in both pre- and postoperative care.
Credit may be claimed as a “teaching assistant” only when the resident has actually been at the table, scrubbed, and has guided a more junior resident through at least the critical parts of an operation. All this must be accomplished under the supervision of the responsible member of the senior staff.

An individual cannot claim credit as both “surgeon” and as “teaching assistant.”

Applicants must also list the number of patients with multiple organ trauma and with critical surgical problems for whom they had primary management responsibility but operation was not required. Failure to submit a complete and properly authenticated list of operative procedures will constitute an incomplete application.

Applicants are advised to keep a copy of the lists of operative work they submit for their records, as the Board cannot furnish copies.

IV. Special Information for Program Directors

A. Program directors are cautioned that appointment of residents at advanced levels without being certain that their previous training is in accordance with the Board’s requirements may result in the affected residents not being accepted by the Board upon completion of the program. In any case in which there is question, program directors should make inquiry of the Board prior to taking action.

B. According to the Special Requirements for Residency Training in General Surgery promulgated by the ACGME, special approval of the Residency Review Committee for Surgery must be obtained (1) if a chief resident is assigned to an institution other than the parent one or an “integrated” one; (2) if rotations to any one approved “affiliate” exceed 6 months; (3) if more than 1 year of the total program is spent away from the parent and integrated institutions; or (4) if more than 6 months’ total is spent in any assignment outside the parent, the integrated, or approved affiliated institutions. The Board concurs in this and deviations from these stipulations will be considered unacceptable training.

C. Since the Residency Review Committee does not act upon the adequacy of postgraduate surgical education outside the United States, program directors must request the Board’s approval, in advance, if they wish periods of training abroad to be creditable toward the Board’s requirements. The Board will rule on individual requests.

Credit for Military Service

Credit will not be granted toward the minimum requirements of the Board for service in the armed forces, the Public Health Service, the National Institutes of Health, or other governmental agencies unless the service was as a duly appointed resident in an accredited program in surgery.

Credit for Foreign Graduate Education

Acceptance for examination and certification by the American Board of Surgery is based upon satisfactory completion of the stated requirements in accredited residency programs in surgery in the United States. Regardless of an individual’s professional attainments here or abroad, no credit will be granted directly to an applicant for surgical education in a foreign country. The Board will consider granting partial credit only upon the request of the program director of an accredited program who has observed the applicant as a junior resident for 9 to 12 months and wishes to advance the applicant to a higher level in that program. The credit granted will not be valid until the applicant has successfully completed that program. If the applicant moves to another program, the credit is not transferable and must again be requested by the new program director.

Applicants from accredited Canadian programs must have completed all of the requirements in the Canadian program or in combination with an accredited United States program. No credit for postgraduate surgical education outside the United States and Canada will be granted to those applicants seeking certification who completed a Canadian program. Applicants from Canadian programs must complete the Board’s stipulated requirements.

Requirements Governing Admissibility to Examinations for Certification in Surgery

1. An applicant is admissible to the examinations only when all of the preliminary and graduate educational requirements of the Board, currently in force at the time of receipt of the formal application, have been satisfactorily fulfilled; the operative experience has been reviewed and deemed acceptable; the general credentials are in order; the program director has certified to the Board in writing that the applicant has attained the required clinical skills; and the formal Application has been reviewed and approved. The applicant then must successfully complete the Qualifying Examination before becoming a candidate for certification and admissible to the Certifying Examination.

2. Applicants will be offered five opportunities for taking the Qualifying Examination within the 5-year period following approval of the formal Application, at centers designated by the Board in accord with their last recorded address. Applicants who do not take the Qualifying Examination within 2 years following approval of the application will no longer have any status with the Board and will not be considered for readmission to examination.

3. If Applicants are not successful in completing the Qualifying Examination within the stated admisibility period, the satisfactory completion of an additional year of residency in general surgery will be required in order to be considered for readmission to the Qualifying Examination under the same conditions as listed above. This must be in a general surgery program accredited by the ACGME and at an advanced level (not necessarily the senior/chief resident). The Board’s approval of the proposed experience must be secured in advance.

4. The Certifying Examination will be offered to those who have passed the Qualifying Examination and have thus become “candidates for certification,” at the earliest time consistent with the Board’s geographical examination schedule.

Candidates will be offered three, and only three, opportunities to appear for examination during the 5 academic years after completion of the Qualifying Examination. The admisibility expiration date shall be established as June 30 of the fifth calendar year after passing the Qualifying Examination. An opportunity offered that is refused or not taken will be counted as one of the three available.

After three opportunities (ie, failure at Certifying Examinations and/or opportunities refused including failure to appear for a scheduled examination), a candidate will no longer be admissible to examination, regardless of the original expiration date for admisibility. Satisfactory completion of at least 1 year of residency in general surgery at an advanced level in an accredited program, with a favorable endorsement to the Board from the program director, will be required before further consideration by the Board. This year must be approved in advance by the Board.

If the Board approves the candidate’s application for readmission to the Certifying Examination upon completion of the specified additional year of residency in general surgery, the candidate will then be offered three further opportunities within the ensuing 5 years. If not successful within that time, the candidate cannot again be considered until completion of a minimum
of 3 years of residency in general surgery, including a chief year, in an accredited program and favorable endorsement to the Board by the program director. The candidate must then reapply as a "new applicant." This necessitates submission of a reapplication for admission to examination and all supporting documents, payment of the established fees, and successful completion again of the Qualifying Examination before advancing to the status of "candidate for certification."

4. Those who, 10 years after approval of their original application or reapplication, have not become certified and who are not actively pursuing completion of the appropriate above-stated requirements applicable in each case will have their files destroyed. If they wish to reapply later they will be considered "new applicants" and must fulfill the requirements then in place.

5. The Board, on the basis of its judgment, may deny or grant an "applicant" or "candidate for certification" the privilege of examination whenever the facts in the case are deemed by the Board to so warrant. The Board does not use or sanction the terms "Board-eligible" or "Board-qualified." The standing of an individual with the Board varies according to the current status of credentials and will be so reported.

Special Certification

The Board has been authorized by the American Board of Medical Specialties to award certification of special or added qualifications in certain disciplines related to the overall specialty of surgery to those diplomates of this Board who meet the defined requirements. These disciplines include general vascular surgery, pediatric surgery, surgery of the hand, and surgical critical care.

The Board considers all of the above disciplines to be an integral part of the specialty of surgery and expects that all surgeons certified in surgery by this Board will be qualified to practice in these areas if they so desire and demonstrate the capability, even though they may not have obtained additional certification. The certificates of special or added qualifications are designed to recognize those diplomates who have acquired, through advanced education, experience, and other activities, qualifications in these disciplines beyond those expected of the well-trained general surgeon.

Those seeking the American Board of Surgery's certification of special or added qualifications must have a currently valid certificate in surgery issued by the Board; must have completed the required additional education in the discipline beyond that required for general certification; must have operative experience and/or patient care data acceptable to the Board; and must show evidence of dedication to the discipline by the means specified by the Board and receive favorable peer review by recognized diplomates in the particular discipline. Finally, successful completion of the prescribed examinations is required.

Those who are interested in obtaining information regarding certification in general vascular surgery, pediatric surgery, surgery of the hand, or surgical critical care may obtain it from the Board upon request.

Examinations Offered by the Board

The Board offers examinations leading to certification in surgery, general vascular surgery, pediatric surgery, surgery of the hand, and surgical critical care; also, in-training examinations in general surgery and in pediatric surgery.

The examinations for certification are offered to individuals, but the in-training examinations are offered to program directors for their use as an educational assessment of the individual resident's grasp of surgical fundamentals.

The Board notifies candidates for general and special certification of their performance on examinations. The Board also reports examinee performance to the director of the program in which the candidate completed the final year of residency. All reports pertaining to in-training examinations are provided only to program directors.

All examinations are developed by directors of the American Board of Surgery with contributions by invited examination consultants.

II. Examinations for Certification of Special or Added Qualifications

Examinations are held six times a year within the continental United States. Candidates for certification will receive an announcement of the examination to which they may be assigned, based on their geographic location, approximately 3 months prior to the examination session, with a reply card that must be returned at once if a candidate wishes to be included in that examination. Failure to return or late return of a card will result in that examination being counted as one of the three opportunities to be offered. If the Board cannot accommodate a candidate at that particular examination, it will not be counted as an opportunity. A candidate assigned to an examination will be sent an admission card indicating the specific time and place to report for examination.

The examinations are conducted by members of the American Board of Surgery and selected associate examiners who are diplomates of the Board and usually from the local geographic area.

The examinations consist of three oral sessions conducted by teams of two examiners each, directed toward determining the candidate's understanding of clinical entities, level of surgical judgment, and problem-solving ability. During all sessions, the ability to apply knowledge of anatomy, physiology, pathology, biochemistry, and bacteriology to clinical problems is also evaluated.
IIII. In-Training Examination
The Board offers annually to directors of accredited residency programs in surgery and in pediatric surgery written in-training examinations that are designed to measure the general level of knowledge attained by residents regarding the fundamentals of the basic sciences and management of clinical problems related to surgery and to pediatric surgery. The in-training examination in surgery is constructed to evaluate the knowledge of the resident who has completed 2 years of graduate education in surgery but, at the program director's discretion, may be administered to anyone. It is also designed to meet the first milestone required by the "Essentials" for residencies in general surgery. Directors of accredited programs in pediatric surgery should find the pediatric surgery in-training examination useful in the evaluation of all residents in their programs.

The Board will normally furnish pertinent information to the directors of all accredited programs in surgery and in pediatric surgery several months in advance of each year's examination and ascertain the number of test booklets desired. The examinations, administered by the participating program directors, take place each winter.

Program directors should take note of the fact that the Board does not contact each institution in which residents are located, but depends upon the director of the program to order an adequate number of test booklets for all residents in the total program, which includes not only the parent institution but also all those included under the program designation in the Graduate Medical Education Directory.

It is important to note that the in-training examinations are not offered to individuals, but only to program directors.

The in-training examinations are not required by the Board as part of the certification process.

The in-training examinations are prepared by the Board as a convenience to program directors, to be used as an assessment of residents' progress and not as a pool of questions for study or other purposes. Duplication and improper use of the examination materials defeats the purpose of the examinations and will not be tolerated by the Board. The examinations are protected under the copyright laws.

Application for Examination for Certification in Surgery
In the early spring, the Board will mail a booklet of information and a preliminary examination form to all residents who, according to the Board's records, will be expected to complete their residency that summer in surgery programs accredited by the ACGME. This form must be completed precisely and be received in the Board Office no later than May 1. Applicants should not submit documents, testimonials, letters of recommendation, case reports, or other information unless requested to do so by the Board.

If, after review of the information submitted on the preliminary examination form, it is determined by the Board that applicants have met, or will meet, the educational requirements for admission to examination in the past or current year, a formal application for admission to examination will be sent to the applicant.

The application for admission to examination must be completed and returned to be received in the Board Office by no later than July 15. An application is not considered to be complete unless the form is accompanied by all required documents, including a copy of the applicant's current registration of a valid and unrestricted state medical license, an identification form with a photograph attached, a completed American Board of Surgery operative experience list or a copy of the resident's record, and a check for $200.

If the completed application is received between July 15 and August 15, a late fee will be charged. No applications will be accepted after August 15.

Applicants who complete the educational requirements after September 30 will not be considered for admission to the Qualifying Examination in that year; but must wait until the following year.

The acceptability of an applicant does not depend solely upon the completion of an approved program of education, but also upon information available to the Board regarding professional maturity, surgical judgment, technical capabilities, and ethical standing.

Applicants who have submitted an application for examination form will be notified regarding admittance to examination.

Fees
Registration (prior to July 15)—US $200
(payable with application form and nonrefundable)
Registration (late—July 15 to August 15)—US $450
(payable with application form and nonrefundable)
Qualifying Examination—US $400
(payable with reply card)
Certifying Examination—US $600
(payable with reply card)
Fees for reexamination are the same as shown above for each examination.

Each fee for examination or reexamination includes a US $200 processing charge that is not refunded if an individual withdraws after being scheduled for an examination.

To withdraw, one must notify the Board Office at least 15 business days before a scheduled examination. Failure to appear for examination, or withdrawal without giving at least 15 business days' notice, will result in forfeiture of the entire fee for examination.

Fees are subject to change as directed by the Board.

The Board is a nonprofit organization. The directors of the Board, except those on the executive staff, serve without remuneration.

Issuance of Certificates
A candidate who has met all requirements and has successfully completed the examinations of the American Board of Surgery in one or another of the areas of certification will then be issued a certificate by this Board, signed by its officers, attesting to qualifications in that area.

The Board issues certificates in surgery, general vascular surgery, pediatric surgery, surgery of the hand, and surgical critical care. Those certified in surgery prior to December 31, 1975, were issued a certificate with no indication of time-limited validity. All certificates issued on or after January 1, 1976, bear a limiting date of 10 years, after which they are no longer valid.

Those whose certificates have expired and who have not achieved recertification will no longer be listed in the directory as diplomates in the discipline concerned.

Recertification
The American Board of Surgery offers recertification in surgery to its diplomates and in all the disciplines in which it offers certification of special or added qualifications. The Board considers recertification to be voluntary and the same connotation as is the original certification.

The purpose of recertification is to demonstrate to the profession and the public, through periodic evaluations, that the surgical specialist has maintained continuing qualifications on a currently acceptable level in the diplomate's chosen area of practice. The American Board of Surgery believes that such periodic evaluation of
ts diplomates is in their own interest as well as in the public interest.

A Diplomate can initiate the recertification process when certification has been held at least 7 years. Pamphlets outlining requirements for recertification in the various disciplines may be obtained from the Board upon request. To facilitate receiving the Board's mailings pertaining to the recertification process, it is important for all diplomates to notify the Board promptly whenever their addresses change.

Recertification in Special Disciplines

Recertification in special disciplines is offered to diplomates holding certificates in general vascular surgery, pediatric surgery, surgery of the hand, and surgical critical care.

Details concerning requirements for recertification in the disciplines mentioned above are similar to those for recertification in surgery, and pertinent pamphlets may be obtained from the Board upon request.

Inquiry as to Status

The Board considers an individual's record not to be in the public domain. When a written inquiry is received by the Board regarding an individual's status, a general but factual statement is provided that indicates the person's location within the examination process.

Special Situations

Irregularities

The furnishing of false information to the Board or examination irregularities may result in the rejection of an application, the barring of an applicant from examination, the denial or revocation of a certificate, or other appropriate sanctions, as set forth more fully in the application for admission to examination and the instructions to examinees.

Substance Abuse

Applicants with a history of substance abuse will not be admitted to any examination unless they present evidence satisfactory to the Board that they have successfully completed the program of treatment prescribed for their condition. Further, the Board must be satisfied that they are currently free of substance abuse.

Disabilities

The American Board of Thoracic Surgery complies with the Americans with Disabilities Act by making a reasonable effort to provide Board applicants who have documented disabilities with modifications in its examination process that are appropriate for such disabilities but that do not alter the measurement of the skills or knowledge that the examination process is intended to test. Any disability that an applicant believes requires such a modification in the Board's examination must be identified and documented by the applicant within 60 days after the applicant is notified of admisibility to examination or within 60 days after the applicant learns of such disability, whichever is later.

Reconsideration and Appeals

The Board has adopted a policy with regard to reconsideration and appeals of decisions adverse to applicants regarding their individual credentials and admisibility to the examinations and questions regarding the form, administration, and results of examinations. A copy of that policy is available from the Board office to anyone considering a request for reconsideration or an appeal. A request for reconsideration, which is the first step, must be made in writing to the Board office within 90 days of receipt of notice from the Board of the action in question.

Revocation of Certificate

Any certificate issued by the American Board of Surgery, Inc, shall be subject to revocation at any time that the directors shall determine, in their sole judgment, that a candidate who has received the certificate was in some respect not properly qualified to receive it.

American Board of Thoracic Surgery

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(These criteria and conditions are subject to change without notice. All applicants are advised to contact the American Board of Thoracic Surgery to ascertain whether the information below is current.)

General Requirements

Certification by the American Board of Thoracic Surgery may be achieved by fulfilling the following requirements:

1. Certification by the American Board of Surgery (for information, the applicant should see the current Booklet of Information available from the American Board of Surgery, 1617 John F Kennedy Blvd, Philadelphia, PA 19103);

2. Completion of a thoracic surgical residency, approved by the Residency Review Committee for Thoracic Surgery (RRC) that provides adequate education and operative experience in cardiovascular and general thoracic surgery;

3. An ethical standing in the profession and a moral status in the community that are acceptable to the Board;


Residency Requirements

Candidates must have fulfilled all of the residency requirements of the Board in force at the time their applications are received.
Candidates for certification must complete a minimum of 24 months of residency training in thoracic and cardiovascular surgery in a program approved by the Residency Review Committee for Thoracic Surgery. This must include 12 months of senior responsibility, which should be continuous. The director of the thoracic training program is required to approve the application form by signature, certifying that the candidate has satisfactorily completed the residency in thoracic surgery, of which the last 12 months consisted of senior responsibility.

Education and adequate operative experience in both general thoracic surgery and cardiovascular surgery are essential parts of any approved thoracic surgery residency program, irrespective of the area of thoracic surgery in which a candidate may choose to practice.

Operative Case Criteria

Effective for Candidates Applying in 1996

The operative experience requirement of the American Board of Thoracic Surgery has two parts. One has to do with the intensity or volume of cases, and the other has to do with the distribution of cases (index cases).

1. Surgical Volume (Intensity)

   The Board's operative experience requirements include an annual average of 125 major operations performed by each resident for each year that the program is approved by the Residency Review Committee for Thoracic Surgery. In a 2-year program, this requirement is met if a resident performs a total of 250 major cases over the course of his or her residency; in a 3-year program, the resident must perform 375 major cases.

   This guideline on intensity of cases conforms with the Special Requirements in Thoracic Surgery as published by the Accreditation Council for Graduate Medical Education and the Residency Review Committee for Thoracic Surgery.

   The application of any candidate whose supervised operative experience fails to meet the requirement of an annual average of 125 major operations with a minimal number of 100 in any one year will be referred to the Credentials Committee for review.

2. Index Cases (Distribution)

   The applications of candidates whose operative experience does not include the required number of index cases as listed below will be sent to the Credentials Committee for review. The number of index cases required to meet the minimal acceptable standards in the various areas are:

   - Lungs, pleura, chest wall—50
   - Pneumonectomy, lobectomy, segmentectomy—30
   - Other—20
   - Esophagus, mediastinum, diaphragm—15
   - Esophageal operations—8
   - Other—7
   - Congenital heart—20
   - Acquired valvar heart—20
   - Myocardial revascularization—35
   - Pacemaker implantations—10
   - Bronchoscopy and esophagogastroscopy—25

   Endoscopic procedures may be counted for credit whether they are performed as independent procedures or immediately preceding a thoracic operation.

   Major vascular operations outside the thorax should be listed.

   The Board recognizes that supervised operative experience in a well-organized teaching setting that is approved by the Residency Review Committee for Thoracic Surgery protects the patient, who, in most instances, is the personal and identifiable responsibility of a faculty surgeon. This supervised experience optimally prepares the candidate to begin the independent practice of cardiothoracic surgery after the completion of residency.

   The Credentials Committee has been authorized by the Board to reject a candidate if his or her operative experience during the thoracic surgery residency is considered to be inadequate. The candidate, the program director, and the Residency Review Committee for Thoracic Surgery will be notified if such action is taken.

   Even though emphasis on one or another facet of thoracic surgery (pulmonary, cardiovascular, esophageal, thoracic trauma, etc.) may have characterized a candidate's residency experience, the candidate is nevertheless held accountable for knowledge concerning all phases of the field, including extracorporeal perfusion (physiological concepts, techniques, and complications), cardiac devices, management of dysrhythmias, and thoracic oncology. In addition, a candidate should have had responsibility for the care of pediatric general thoracic surgical patients and be competent in video-assisted thoracoscopic surgery. The candidate should also have an in-depth knowledge of the management of acutely ill patients in the intensive care unit. This requires an understanding of cardiorespiratory physiology, respirators, blood gases, metabolic alterations, cardiac output, hyperalimentation, and many other areas. By virtue of his or her residency in thoracic surgery, the candidate is expected to be fully qualified in the surgical care of critically ill patients.

Operative Experience Credit

Credit will be allowed for supervised operative experience in a well-organized teaching setting only when the following criteria are met:

1. The resident participated in the diagnosis, preoperative planning, surgical indications, and selection of the appropriate operation;
2. The resident performed under appropriate supervision in a well-organized teaching setting approved by the Residency Review Committee for Thoracic Surgery those technical manipulations that constituted the essential parts of the procedure itself;
3. The resident was substantially involved in postoperative care.

Supervision and active participation by the thoracic surgery faculty are required in preoperative, intraoperative, and postoperative care.

The Board also emphasizes that first-assisting at operations is an important part of resident experience, particularly in complex or relatively uncommon cases, such as certain kinds of congenital heart operations to correct congenital heart defects or disorders of the esophagus.

Applications

Before applying for examination, prospective candidates should consider whether they are able to meet the minimum requirements of the Board, which includes certification by the American Board of Surgery. They should then submit a letter to the office of the Secretary of the Board, outlining briefly their thoracic surgery residency experience and requesting an application.

An application will be sent to candidates who have completed residency programs that have been approved by the Residency Review Committee for Thoracic Surgery. Each applicant should consult with his or her program director regarding the correct way to complete the operative case list forms.

The American Board of Thoracic Surgery takes particular note of the problems facing those with a disability and is ready to alter its examination procedures in such a way that individuals who are competent to practice thoracic surgery have the opportunity to take the Board's examination under circumstances that accommodate the individual's disability. Individuals requiring special consideration because of a disability should notify the Board at least 60 days before the August 1 deadline for submitting an application.
Candidates are notified of their eligibility for examination when their applications have been approved.

Examinations

It is the policy of the American Board of Thoracic Surgery to consider a candidate for examination only after he or she has completed a thoracic surgery residency program approved by the Residency Review Committee for Thoracic Surgery (RRC).

Separate written and oral examinations are held annually at times and places determined by the Board. Information regarding the dates and places of the examinations is published in the Examination and Licensure column of the Journal of the American Medical Association, the Journal of Thoracic and Cardiovascular Surgery, and the Annals of Thoracic Surgery.

Part I—Written Examination

The examination consists of a written examination designed primarily to assess cognitive skills.

Part II—Oral Examination

Successful completion of the Part I (written) examination is a requirement for admission to the Part II (oral) examination. The oral examination is designed to test the candidate's knowledge, judgment, and ability to correlate information in the management of clinical problems in general thoracic and cardiovascular surgery.

Examination Sequence

Candidates should apply for the examination within 5 years of the satisfactory completion of their thoracic surgery residency. Those applying after 5 years will need an additional year of training in a program approved in advance by the American Board of Thoracic Surgery before they will be eligible to apply for examination.

After a candidate is declared eligible for the written examination (Part I), he or she must pass Part I within 4 years. The candidate who successfully completes Part I of the examination then must pass Part II within the succeeding 4 years.

Candidates who fail an examination (Part I or Part II) are eligible to repeat the examination the following year.

Candidates who fail either Part I or Part II of the examination three times, or do not pass either part of the examination within the allotted time period of 4 years, will be required to complete an additional thoracic surgical educational program that must be approved in advance by the Board before they will be permitted to retake the examination. Candidates who complete the required additional training must file an addendum to their application, have their eligibility for examination reviewed by the Credentials Committee, and pay a new registration fee. They will be given two more opportunities to take the examination (Part I or Part II) within the succeeding 2 years.

Candidates who fail either Part I or Part II a fifth time will be required to complete another approved thoracic surgery residency before they will be eligible to reapply for examination by the Board.

Fees

Registration fee (not refundable)—$360
Part I examination fee—$850
Part I reexamination fee—$850
Part II examination fee—$800
Part II reexamination fee—$900

Candidates who do not appear for their scheduled examination (Part I or Part II) or who cancel less than 6 weeks prior to either examination may forfeit their examination fee.

The Board is a nonprofit corporation, and the fees from candidates are used solely to defray actual expenses incurred in conducting examinations and carrying out the business of the Board. The directors of the Board serve without remuneration.

Appeals

Individuals who receive an unfavorable ruling from a committee of the Board may appeal such determination by mailing a notice of appeal to the office of the American Board of Thoracic Surgery within 30 days of the date such ruling was mailed. A copy of the appeals procedures will be mailed to the candidate.

The only appeal permitted from failing the written examination is a request for a hand rescore to verify the accuracy of the score as reported. This request must be made within 30 days of the time the examination results are received by the candidate.

The only appeal with respect to the oral examination is the opportunity to request immediate reexamination following the completion of the oral examination. A candidate who believes that any of his or her examiners have been unfair or biased during a portion of the oral examination may request reexamination by another examiner. The grade on reexamination will be the final grade for that portion of the examination.

Chemical Dependency

Qualified applicants who have a history of chemical dependency that has been reported to the Board and who submit documentation suitable to the Board that their dependency has been under control for a period of at least 2 years will be admitted to the examination process.

For candidates who are already in the examination process and develop a chemical dependency as reported to the Board, the process will be suspended until the candidate can provide documentation suitable to the Board that the condition has been under control for a period of 2 years. At that time, the candidate will be readmitted to the examination process. The requirement to be accepted for examination within 5 years of completion of an approved thoracic surgery residency will not be waived.

Certification

After a candidate has met the requirements for eligibility and passed the examination, a certificate attesting to the candidate's qualifications in thoracic surgery will be issued by the Board. The certificate is valid for 10 years.

Recertification

Applicants who are certified in thoracic surgery are issued certificates that are valid for 10 years from the date of certification, after which the certificates will no longer be valid. Certificates can be renewed before expiration by fulfilling the requirements for recertification specified by the American Board of Thoracic Surgery at that time. A recertification booklet is available upon request.

Denial or Revocation of Certificate

No certificate shall be issued or a certificate may be revoked by the Board if it determines that:
1. The candidate for certification or diplomate did not possess the required qualifications and requirements for examination, whether such deficiency was known to the Board or any Committee thereof before examination or at the time of issuance of the certificate as the case may be;
2. The candidate for certification or diplomate withheld information in his or her application or made a material misstatement or any other misrepresentation to the Board or any Committee thereof, whether intentional or unintentional;
3. The candidate for certification or diplomate was convicted by a court of competent jurisdiction of any felony or misdemeanor involving moral turpitude and, in the opinion of the Board, having a material relationship to the practice of medicine;
4. The candidate for certification or diplomate had his or her license to practice medicine revoked or was disciplined or censured by any court or other body having proper jurisdiction and authority because of any act or omission arising from the practice of medicine; or
5. The candidate for certification or diplomate had a history of chemical dependency or developed such during the certification process and failed to report same to the Board.

American Board of Urology

David L McCullough, MD, President, Winston-Salem, North Carolina
W Scott McDougal, MD, President-Elect, Examination Committee Chairman, Boston, Massachusetts
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Correspondence should be addressed to
Alan D Perlmutter, MD, Executive Secretary
31700 Telegraph Rd/Suite 150
Bingham Farms, MI 48025
810-646-9720

(These criteria and conditions are subject to change without notice. All applicants are advised to contact the American Board of Urology to ascertain whether the information they have is current.)

Purpose
The objective of the American Board of Urology, Inc, hereinafter sometimes referred to as "the Board," is to identify for the public's knowledge those physicians who have satisfied the Board's criteria for certification and recertification in the specialty of urology. Certification by the Board does not guarantee competence in practice, but does indicate that the physician has completed certain basic training requirements and has demonstrated at the time of examination a fund of knowledge and competence in the care of those patients whose cases were reviewed by the Board, as described elsewhere in this publication.

Functions of the Board
The Board arranges and conducts examinations testing the qualifications of voluntary candidates, and grants and issues certificates to accepted candidates duly licensed to practice medicine. The Board holds the power to revoke such a certificate.

The Board endeavors to serve the public, hospitals, medical schools, medical societies, and practitioners of medicine by preparing lists of urologists whom it has certified. Lists of diplomates of this Board are published in the Directory of the American Medical Association (signified in biographical data by symbol "86") and the ABMS Compendium of Certified Medical Specialists.

The Board is not responsible for opinions expressed concerning an individual's credentials for the examinations or status in the accreditation process unless they are expressed in writing and signed by the president or executive secretary of the Board.

Associations of the Board
The nominating societies of this Board and sponsors of its activities are: the American Urological Association, the American Association of Genito-Urinary Surgeons, the American Association of Clinical Urologists, the Society of University Urologists, the American College of Surgeons, and the Urology Section of the American Academy of Pediatrics.

The American Board of Urology and the various other specialty boards are members of the American Board of Medical Specialties, which includes as associate members the Association of American Medical Colleges, the American Hospital Association, the Federation of State Medical Boards of the USA, the National Board of Medical Examiners, and the Council of Medical Specialty Societies.

The American Board of Medical Specialties, in conjunction with the Residency Review Committee for Urology and the Accreditation Council for Graduate Medical Education (ACGME), has established academic standards for specialization that the American Board of Urology, Inc, has adopted. Such standards are found in the Graduate Medical Education Directory published by the American Medical Association.

Training programs in urology are reviewed by the Residency Review Committee for Urology, which consists of representatives from the American Board of Urology, Inc, the Council on Medical Education of the American Medical Association, and the American College of Surgeons. Upon recommendation by the Residency Review Committee, the Accreditation Council for Graduate Medical Education (ACGME) determines the accreditation status of each program.

A list of approved residencies for training in urology may be found in Graduate Medical Education Directory published by the American Medical Association.

Limitations of Functions of the Board
Application for certification is entirely voluntary. Only one certificate for each qualified individual is issued by the Board.

The Board makes no attempt to control the practice of urology by license or legal regulation, and in no way interferes with or limits the professional activities of any duly licensed physician.

Requirements
An applicant may initiate application for certification by the American Board of Urology during the final year of his or her residency training or at some point thereafter. For details of the certification process see "Certification Process." Every applicant, however, must meet certain basic requirements as follows:

A. Prerequisites
1. Except as noted below, the applicant must be a graduate of a medical school approved by the Liaison Committee on Medical Education or a school of osteopathy approved by the Bureau of Professional Education of the American Osteopathic Association, and have completed an ACGME-accredited urology residency program as designated in the AMA Graduate Medical Education Directory, Section II, "The Essentials of Accredited Residencies in Graduate Medical Education."

A minimum of 5 years of postgraduate education is required of which 12 months must be spent in general surgery and 36 months must be spent in clinical urology in an ACGME-accredited program. Of the remaining 12 months, a minimum of 6 months must be spent in general surgery, urology, or other clinical disciplines relevant to urology. Irrespective of the training formal provided, the final 12 months of training must be spent as a senior/chief resident in urology with appropriate clinical responsibility under supervision in institutions that are an approved part of the program.
Any resident who intends to transfer to another urology residency program during the urologic portion of the training must obtain the approval of the Board prior to the change. The resident must petition the Board in advance for said approval. The Board also requires the written acknowledgment and approval of both program directors.

In regards to leaves of absence for parental leave, illness, injury, disability, and substance abuse during residency training, no more than 4 months of clinical training during residency can be omitted. At least 32 months of clinical training in a 3-year program or 44 months of clinical training in a 4-year program must be completed in order to enter the certification process of the Board; credit for absences of greater length must be justified by the program director and approved by the Board. Please contact the Board office if you have any questions on this matter.

To be admissible to the certification process of the Board, the resident must complete the requirements for his/her specific program in effect at the time of acceptance in the program, as established by the Residency Review Committee for Urology or the Accreditation Committee of the Royal College of Physicians and Surgeons of Canada.

2. To meet the requirements for admissibility to the certification process of the Board, a Canadian-trained urologist must have graduated from a United States or Canadian medical school approved by the Liaison Committee for Medical Education (LCME) and have completed the previously described pre-urology and urology requirements with the final year as chief resident, in programs approved by the Accreditation Council for Graduate Medical Education (ACGME) or the Accreditation Committee of the Royal College of Physicians and Surgeons of Canada. Upon successful completion of this training, the candidate may sit for the Qualifying (Part I) Examination of the American Board of Urology.

To be admissible to the Certifying (Part II) Examination, the Canadian-trained candidate must be certified by the Royal College of Physicians and Surgeons of Canada.

3. Foreign medical graduates from schools outside the United States providing an equivalent medical background, who have completed an approved urology residency in the United States, may also qualify for examination by the American Board of Urology, but pre-urology training taken outside the United States may be approved for no more than 1 year of the 2-year prerequisite non-urology training. All such candidates must have a valid ECFMG certificate and at least one year of surgical training in an accredited general surgery training program in the United States or Canada.

4. In addition to the training requirements noted above, applicants seeking certification by the American Board of Urology must also have a valid medical license that is not subject to any restrictions, conditions, or limitations, and must demonstrate competence in clinical practice. The Board will obtain evidence of this through a review of logs of cases performed by the applicant and by direct communication with the applicant’s peers.

5. Applicants who have a history of chemical dependency will not be admitted to the Qualifying (Part I) or Certifying (Part II) Examination unless they present evidence to the Board that they have satisfactorily completed the program of treatment prescribed for their condition. In addition, any such applicants for the Certifying (Part II) Examination may have a site visit of their practices by a representative of the Board as described in C.1.

6. Deviations from the requirements described above may be permitted at the discretion of the Board when the Board is satisfied that the deviation provides equivalent or superior education or training. Any such deviations must be approved by the board before the applicant enters the urological portion of training. A $300 administrative fee is assessed for Board review of non-ACGME-approved training. Notarized documentation of all such training must accompany the request. The Board office deadlines for receipt of agenda materials for the next Credentials Committee meeting are January 1 and June 1 of the current year.

B. Application

1. A special application form provided by the Executive Secretary shall be completed by the applicant and returned to the Board office by registered, certified, or express mail with return receipt requested. Application must be in the Board office by November 1 in order to permit the applicant to be admitted for the Qualifying Examination (Part I) the following May or June. Applications and documentation material postmarked before, but not received in the Board office by, November 1 will incur a late fee of $300. No applications will be accepted after December 1. No application will be considered by the Credentials Committee or the Board unless it is submitted by the deadline set forth and is complete and includes all supporting documentation described in this part. The Executive Secretary will determine if an application is complete.

2. The application must be accompanied by a notarized copy of a graduation certificate from a medical school approved by the Liaison Committee on Medical Education or from a school of osteopathy approved by the Bureau of Professional Education of the American Osteopathic Association and by specific verification (such as a notarized certificate or an original letter from that program’s director) of successful completion of the pre-urology postgraduate training requirement in a program approved by ACGME. Pre-urology must be documented separately and may not be included in the description of the urology program.

Graduates of medical schools not approved by the Liaison Committee on Medical Education, the Bureau of Professional Education of the American Osteopathic Association, or the Accreditation Committee of the Royal College of Physicians and Surgeons of Canada must furnish a notarized copy of a valid ECFMG Certificate (or Fifth Pathway certificate).

3. A portion of the examination fee shall be paid at the time the application is submitted as specified under Fees.

4. For each applicant, the director of the program where the applicant finished residency must complete an evaluation form supplied by the Board. This evaluation must be received in the Board office by March 1 preceding the Qualifying Examination (Part I) given the following May or June. An application from a senior resident must also be accompanied by a letter from the Program Director confirming that the applicant is expected to have completed successfully 1 year of training in the capacity of senior or chief resident during the calendar year in which the Qualifying Examination (Part I) is to be taken. The applicant is responsible for ensuring that these supporting documents are received in the Board Office at the indicated time.

5. Applicants for certification must be approved by the Credentials Committee and the Board. Additional information may be requested by the Executive Secretary. No duty or obligation to assist any applicant in completing the application is implied.

6. As a condition of application to the Qualifying (Part I) Examination, applicants and candidates sign a waiver allowing the Board to release examination results achieved in the Qualifying Examination to their residency program and to the Residency Review Committee for Urology.

7. If you require special aids or assistance due to a physical or mental disability during the Board examinations, please indicate this on the application. You will be expected to submit appropriate
documentation substantiating your disability. The Board reserves the right to verify your disability.

C. Fees
1. The current examination fee may be changed without notice. This fee reimburses the Board for expenses incurred in preparing and processing the applications and examinations of the candidates. No fees are refundable. Unused fees will be credited for the next available examination only, and if they are not utilized as the first available opportunity, credit will be disallowed.

2. Payment of $825 must accompany the initial application for the Qualifying (Part I) Examination except in the case of senior residents, who shall pay $575 as the fee for the initial application. Senior residents only may delay the fee payment until January 5. An additional fee of $825 must accompany application for the Certifying (Part II) Examination. An applicant or candidate secures no vested right to certification as a result of paying an examination fee.

3. Cancellation fees are as follows:
   $500 failure to appear
   $300 unexcused absence
   $200 excused absence (in cases of personal or family illness/death).

4. Only one excused absence is permitted at the discretion of the Board, which extends the period of eligibility for 1 year for that examination. The excused absence fee of $200 will be assessed and no reinstatement fee will be applied. Following an excused absence, only unexcused absences may be granted; there will be no further extensions of eligibility and the unexcused absence and reinstatement fees will be assessed. Applications will be considered inactive if two successive examination appointments are canceled by the applicant. If the candidate does not already exceed the 5-year time limit for the exam, he or she may regain active status by paying a reinstatement fee of $600 plus an additional $900 for an unexcused absence or $500 for a nonappearance.

5. A $300 late fee will be assessed for any application and/or documentation and/or fees not received in the Board Office by the prescribed deadlines. Express mail is recommended. A $100 fee will be assessed for all returned checks.

6. The fee for the Preliminary Examination is $400.

7. The application fee for recertification, as described in “Board Eligible Status,” is $900.

8. The fee for a site visit by a Board representative is $2,000 plus expenses.

Certification Process
Applicants approved by the Board to enter the certification process must complete both a written Qualifying Examination (Part I) and, after passing this examination, a subsequent Certifying Examination (Part II). Assessment of clinical competence through review of practice logs and peer review will also be carried out prior to admission to the Certifying Examination (Part II). Applicants who have not applied to take the Qualifying (Part I) Examination within 5 years of the completion of their urological residency will be required to pass a written Preliminary Examination before being permitted to enter the certification process. The Preliminary Examination is given each November during the annual In-Service Examination. Contact the Board Office before August 15 for information.

Applicants who have not passed the Qualifying (Part I) Examination within 5 years of the first scheduled Qualifying (Part I) Examination will be required to pass a written Preliminary Examination before being allowed to apply again (see paragraph above).

Certification must be achieved within 5 years of the first scheduled Qualifying (Part I) Examination after entering the certification process.

A. Qualifying Examination (Part I)
The Qualifying Examination is a written examination given in May or June of each year simultaneously at several different occasions. An applicant failing the Qualifying Examination (Part I) must repeat it the next year unless the absence is excused by the Board Office (see Fees). Failure to retake the examination at the first available opportunity will result in administrative withdrawal of the application.

An applicant must pass the Qualifying (Part I) Examination within 5 years of entering the certification process. Failure to do so will require successful completion of a written Preliminary Examination in order to reenter the certification process at the Qualifying (Part I) Examination level.

The Qualifying Examination is designed to assess knowledge of the entire field of urology and allied subjects.

This includes andrology (including infertility), calculous disease (including endourology and shock-wave lithotripsy), congenital anomalies, pediatric urology, female urology, infectious diseases, neurourology and urodynamics, obstructive diseases, psychological disorders, renovascular hypertension and renal transplantation, sexuality and impotence, adrenal diseases and endocrinology, trauma, and urologic oncology.

B. Certifying Examination (Part II)
Candidates for the Certifying Examination (Part II) must have met all training requirements and have passed the Qualifying Examination (Part I). The Certifying Examination includes assessment of clinical competence through review of practice logs and peer review and three practical examinations (an oral examination and written examinations in urologic imaging and pathology). In addition, the candidate must have engaged in a minimum of 18 months of urologic practice with primary patient responsibility in one community, an academic institution, or in the Armed Forces. Six months credit toward this 18-month practice period may be awarded an individual in a fellowship relevant to urology of 1 year or longer.

Application for admission to the Certifying Examination (Part II) is made by completing the Supplemental Application form available from the Board office. This application must be returned by registered, certified, or express mail with return receipt requested, and be received in the Board office by July 1 prior to the Certifying Examination of the following year. In addition, a minimum 1-year log of all major and minor cases performed as the primary surgeon, prepared in accordance with the form provided by the American Board of Urology and verified in writing by the administrator of every facility where the candidate practices, must be received in the Board office by November 15 prior to the Certifying Examination the following year. Express mail is recommended.

Applicants will be assessed $300 for logs received between November 16 and December 1. No surgical logs will be accepted after December 1.

The oral examination, urologic imaging examination, and pathology examination are all regarded as separate examinations. In the event of failure of any one of the three, only the failed examination need be repeated. The candidate must successfully complete all three parts of the Certifying Examination (Part II) within five years of the first scheduled Qualifying (Part I) Examination after entering the certification process or it will be necessary to pass a written Preliminary Examination and reenter the certification process at the Qualifying (Part I) Examination level. Extensions are granted by the Board because of extenuating or special circumstances (eg,
involvement in a fellowship of 1 or more years’ duration, subject to Board approval, and deferral for an inadequate surgical log).

C. Steps in the Certifying Examination

1. Assessment of Clinical Competence

Urology is the specialty that deals with the medical and surgical disorders of the genitourinary tract including the adrenal gland. Candidates must demonstrate knowledge, competence, and surgical experience in the broad domains of urology such as infertility, impotence, calculus disease, endourology, extra corporeal shock wave lithotripsy, neurourology, urodynamics, urologic imaging, uropathology, female urology, pediatric urology, infectious disease, obstructive disease, psychologic disorders, renovascular disease, transplantation, genitourinary sexuality, trauma, and oncology.

Candidates for the Certifying Examination (Part II) must be in the full-time practice of urology and must be licensed to practice medicine in the area of current practice activity. As evidence of competency, the candidate must submit a log of cases performed as primary surgeon during the most recent 22 to 18 months in the area of current practice as described earlier in this section.

In the case of military or public health physicians subject to unexpected changes of assignment, the Board may accept cases from the previous assignment. Photostatic copies of patient records from the patient care facility and/or office record of any one or more of the above cases may be requested by the Board. The candidate shall be responsible for obtaining patient consent for the disclosure of patient records to the Board, or for ensuring that the patient records disclosed to the Board do not contain any patient-identifying information. The candidate is expected to furnish such records within one month of the request.

Surgical log review is an important component of the certification process. While there is no minimum number of cases established for an acceptable log, a surgical experience well below the norm for the peer group may be a cause for the Trustees to delay the certification process until there is a sufficient experience to adequately assess a candidate’s practice pattern and management.

The Board will review the surgical logs of urologic subspecialists in the context of the expected subspecialty experience. The 5-year period of admissibility for completing certification will be extended by 1 year for candidates whose certification is delayed because of an inadequate surgical log.

To further ascertain and document the candidate’s qualifications for certification, the American Board of Urology will solicit information and comments from appropriate individuals, such as fellow practitioners, or from organizations, such as medical societies, licensing agencies, etc. The Board will be authorized by the candidate and will be held harmless to conduct investigations of professional ethics, reputation, and practice patterns. Under no circumstances will the source of peer review letters be revealed to any person other than members of the American Board of Urology.

Upon receipt of the practice logs and peer review information, the credentials of the candidate will be reviewed by the Credentials Committee of the Board. Evidence of ethical, moral, and professional behavior and an appropriate pattern of urologic practice including experience with an adequate volume and variety of clinical material will be sought. Areas of inadequacy may be a cause for deferment or discontinuation of the certifying process until these areas are clarified or corrected. Actions of the Board to achieve clarification may include:

a. Inquiry into practice irregularities by the Credentials Committee of the Board.
b. Request for certified copies of candidate’s health care facility and/or office records for review.
c. A site visit to the candidate’s community at the candidate’s expense.

d. Other appropriate measures that may be deemed necessary to assess apparent deviations from standard urologic practice.

The candidate will not be permitted to continue the certification process until the Board has satisfied itself of the appropriateness of the candidate’s practice pattern and professional behavior. The Board may elect to defer continuation of the certification process pending investigation and resolution of any inadequacies or deviations. It may deny certification when serious practice deviations or unethical conduct are involved. These include, but are not limited to, cheating on or improper or disruptive conduct during any examination conducted by the Board, the solicitation or distribution of examination materials, and misrepresentation of an applicant’s or candidate’s status in the certification process.

2. Oral Examination

These examinations are given annually in January or February at a single site. The pathology and urologic imaging examinations are written and are based on projected photographic slide material. The oral examination is an interactive process between the candidate and candidate during which an assessment is made of ability to diagnose and manage urologic problems. Since the candidate has passed the Qualifying Examination (Part I), the examiner presumes in the oral examination that the candidate has a satisfactory degree of cognitive knowledge of urology. Therefore, the oral examination will concentrate upon the following:

a. Problem Solving Ability. Evaluation is made of the candidate’s ability to collect pertinent information systematically, integrate it, assess the problem, and propose an appropriate solution.
b. Response to a Change in a Clinical Situation. The candidate’s ability to manage changing clinical conditions is evaluated through the flexible interaction between the examiner and the candidate.

c. Professional Behavior in the Role of a Urologist. The candidate’s attitude, interaction with the examiner, and expression of patient management concerns contribute to the assessment of professional behavior.

Unforeseeable Events

Certain unforeseeable events such as a natural disaster, war, government regulations, strikes, civil disorders, curtailment of transportation, and the like may make it inadvisable, illegal, or impossible for the Board to administer an examination to a candidate at the scheduled date, time, and location. In any such circumstance, the Board is not responsible for any expense the candidate may have incurred to be present for the examination or may incur for any future or substitute examination.

Final Action of the Board

Final action regarding each applicant is the sole prerogative of the Board and is based upon the applicant’s training, professional record, performance in clinical practice, and the results of the examinations given by the Board.

Regardless of the sequence by which the various steps of certification may have been accomplished, the process itself is not considered complete until the Board’s final action. At any point in the process, the Board may delay or even deny certification upon consideration of information that appears to the Board to justify such action.

The activities described under “Requirements” and “Certification Process” of this publication proceed from the certificate of incorporation and bylaws that state the nature of the business.
objects, and purposes proposed to be transacted and carried out by this corporation.

**Appeals Procedure**
The Board has established an appeals process for candidates denied certification, or for Diplomates with time-limited certificates denied recertification. An appeal must be initiated by a candidate or diplomate within 30 days after the mailing by the Board of the adverse decision. The candidate or diplomate must provide written notice requesting a hearing to appeal the Board’s decision, and cite the specific reasons given by the Board that are alleged to be erroneous. A copy of the appeals process may be obtained from the Board office upon written request by the affected party.

**Board Eligible Status**
The American Board of Urology does not use nor recognize the term “Board-eligible” in reference to its applicants or candidates. A candidate is not certified (i.e., does not become a diplomate) until all components of the certification process are successfully completed. Applicants who sit for the Qualifying (Part I) Examination become “active candidates” in the certification process and remain so for the 5 years of admissibility allowed to complete that process.

**Recertification**
Certificates issued by the American Board of Urology on or after January 1, 1985, expire on the anniversary of the date of issue and are valid for 10 years only. A physician who fails to be recertified by the expiration date is no longer a diplomate of the Board. It is recommended, therefore, that diplomates possessing a time-limited certificate make plans to obtain recertification beginning up to 3 years before the expiration date of their current certificate.

The office of the American Board of Urology will notify Diplomates holding a time-limited certificate 3 years prior to its expiration. At that time a handbook entitled “Information for Applicants for Recertification” will be provided that details the recertification process. This handbook is also available on request from the Board office.

**Revocation of Certificate**
Certificates issued by this Board are the property of the Board, and are issued pursuant to the rules and regulations of the Board. Each certificate is issued to an individual physician who, by signature, agrees to revocation of the certificate in the event that

1. The issuance of such certificate or its receipt by the physician so certified shall have been contrary to, or in violation of, any provision of the Certificate of Incorporation, Bylaws or rules and regulations of the Board in force at the time of issuance; or
2. The physician or party certified shall not have been eligible to receive such certificate, irrespective of whether the facts constituting ineligibility were known to, or could have been ascertained by, the Directors of the Board at the time of issuance of such certificate; or
3. The physician or party so certified shall have made a material misstatement of fact in application for such certificate or in any other statement or representation to the Board or its representatives; or
4. The physician so certified shall at any time have neglected to maintain the degree of competency in the practice of the specialty of urology as set up by the Board, and shall refuse to submit to reexamination by the Board; or
5. The physician so certified has been found by the Board to be guilty of unethulical practices or immoral conduct or of conduct leading to revocation of license. These objective standards include conduct that violates state medical laws, rules and regulations of local and state Medical Boards, and relevant AMA guidelines, and conduct leading to revocation of license to practice medicine in any state, regardless of continuing licensure in any other state.

The Board of Trustees of this corporation shall have the sole power, jurisdiction, and right to determine and decide whether the evidence and information before it is sufficient to constitute one of the grounds for revocation of any certificate issued by this Board.

When the Board is made aware of facts possibly constituting grounds for revocation, the Board will give the physician written notification identifying the specific facts that have come to its attention. The Board may require any physician so certified to appear before the Board of Trustees or before any one or more of them, or before an individual designated by the Board upon not less than 20 days’ written notice, and to show cause at that time and place specified in the notice why the certificate may not be revoked on any one of the grounds specified in such notice. The diplomate may bring to this hearing persons or documents in defense of any actions.

The failure of any physician so notified to appear as required in such notice, without due excuse deemed sufficient to the Board of Trustees, shall constitute ipso facto cause for revocation of the certificate. The decisions of the Board of Trustees relating to all matters under “Recertification” shall be final and binding.

The diplomate will be required to attest that he/she has read and understands the above provisions regarding the grounds for revocation of certificate issued and the procedures to be followed in determining whether or not a certificate should be revoked and to agree to hold the Board, its officers and agents harmless from any damage, claim, or complaint by reason of any action taken in good faith and consistent with such procedures.

**Trademark and Seal**
The trademark and seal of the American Board of Urology are registered. Any unauthorized use of the trademark and seal is prohibited without express permission of the Board.

**Examination Dates for 1994–1995**

**Qualifying (Part I) Examination**
June 2, 1994
June 1, 1995

**Certifying (Part II) Examination**
February 16–18, 1995
February 22–24, 1996 (Tentative)

**Change of Address**
Notifying the Board office of a change of address is the responsibility of the candidate for certification.
Appendix C

Medical Licensure Requirements

Information in Appendix C was provided by the American Medical Association (AMA) Department of Data Base Products in cooperation with the Office of Physician Credentials and Qualifications. Tables 1, 2, 3, 4, 5, and 6 summarize the licensure policies of state boards. It is strongly recommended that candidates contact the specific state board for the most current information on licensure requirements in that state. The name and address of each state board and the corresponding officers are listed in Table 7.

All tables are reprinted from *US Medical Licensure Statistics and Current Licensure Requirements*, 1995 edition, published by the AMA. Additional information can be obtained from the following resources.

Catherine M. Bideso
Department of Data Base Products
American Medical Association
515 N State St
Chicago, IL 60610
312 464-5129

Arthur Osteen, PhD
Office of Physician Credentials and Qualifications
American Medical Association
515 N State St
Chicago, IL 60610
312 464-4677

Policies for Initial Medical Licensure for Graduates of US Medical Schools

All states require a written examination for initial licensure. Certification by the National Board of Medical Examiners (NBME) can be used as an avenue to licensure in the United States for those certified as diplomates prior to implementation of the United States Medical Licensing Examination (USMLE) and for examinees taking a combination of NBME and/or USMLE examinations who have passed at least one part or step prior to December 31, 1994. The last regular administration of Part I of the NBME examination occurred in 1991, Part II in April 1992, and Part III in May 1994. The NBME certificate will no longer be issued following certification of these examinees.

Policies of state medical boards for initial medical licensure for graduates of US medical schools appear in Table 1. All licensing jurisdictions except Oklahoma, Texas, and the Virgin Islands will endorse certificates from the NBME earned prior to the USMLE under certain circumstances. The Oklahoma and Texas licensing boards will endorse NBME certificates and state licenses based on the NBME certificate for reciprocal endorsement candidates only. Oklahoma and Texas will not endorse the NBME certificate held by a candidate who has never been licensed. The reciprocal endorsement candidate must pass the Federation of State Medical Boards' Special Purpose Examination (SPLEX) in Texas or be American Specialty Board-certified or recertified. Those graduates who are not licensed by endorsement of the NBME certificate must have passed the Federation Licensing Examination (FLEX) prior to January 1994 or pass the USMLE, which is currently used by all states as the medical licensing examination. Most licensing authorities state that there is no limit to the length of time for which they endorse the NBME certificate.

Although some state medical boards allow physicians to take USMLE Step 3 with little or no graduate medical education, all of the boards require graduate training before issuing a license, usually one year. However, Connecticut, Guam, Maine, Michigan, New Hampshire, Pennsylvania, South Dakota, and Washington require two years. Illinois requires two years of graduate medical education.
for persons entering training programs after January 1, 1888, and Delaware and Nevada require three years.

Licensing boards require applicants to provide detailed personal information on an application form, plus letters of reference and other evidence of good moral character. They also require payment of a licensing fee. They may require photographs, fingerprints, or other means of identification.

**Policies for Licensure of Graduates of Non-US Medical Schools**

Most of the state medical boards will accept graduate training in Canada as equivalent to training undertaken in the United States. Forty-one states will issue a medical license to a graduate of a Canadian medical school who holds a license in one of the provinces of Canada. Thirty-four licensing boards, under certain specified conditions, endorse a Licentiate of the Medical Council of Canada certificate held by an international medical graduate.

In the most recent survey conducted by the AMA Department of Data Base Products, 45 states indicated that international medical graduates who hold a Fifth Pathway certificate, but do not hold a standard Education Commission for Foreign Medical Graduates (ECFMG) certificate, can be admitted to the licensing examination. Fifth Pathway Certificate holders must pass Steps 1 and 2 of the USMLE prior to entering ACGME-accredited graduate medical education programs.

Non-US educated candidates for licensure are permitted by 7 state boards to take the USMLE before they have had graduate medical education in a US or Canadian hospital. Although a passing score on the USMLE (which is used by the ECFMG for certification purposes) or the ECFMG certificate is required for licensure by most state medical boards, 18 boards now require both. Candidates are not awarded a license until they have undertaken 1 or more years of training in the United States and have met other specific requirements of the individual boards, e.g., an ECFMG certificate, personal interview, fees, etc. International medical schools must be state-approved in 26 US states or territories, including Alabama, Arizona, Arkansas, California, Colorado, Connecticut, District of Columbia, Georgia, Guam, Idaho, Indiana, Kentucky, Maryland, Minnesota, Mississippi, Missouri, Montana, Nevada, North Dakota, Oklahoma, Oregon, Puerto Rico, Rhode Island, South Dakota, Tennessee, and Wyoming.

**Current Board Standards for the Administration of the US Medical Licensure Examination**

In 1990, the Federation of State Medical Boards (FSMB) and the NBME established the USMLE, a single examination for assessment of US and international medical school students or graduates seeking initial licensure by US licensing jurisdictions. The USMLE replaced the two-examination sequences used in the medical licensing process, FLEX and the certifying examination of the NBME, as well as the Foreign Medical Graduate Examination in the Medical Sciences (FMGEMS), formerly used by the ECFMG for certification purposes.

The USMLE is a single-examination program with three steps. Each step is complementary to the others; no step can stand alone in the assessment of readiness for medical licensure. Each USMLE step is composed of multiple-choice questions, requires 2 days of testing, and is administered semiannually.

The USMLE Step 1 assesses whether an examinee understands and can apply key concepts of basic biomedical sciences, with an emphasis on principles and mechanisms of health, disease, and modes of therapy. Step 2 assesses whether an examinee possesses the medical knowledge and understanding of clinical science considered essential for the provision of patient care under supervision, including emphasis on health promotion and disease prevention. Step 3 assesses whether an examinee possesses the medical knowledge and understanding of biomedical and clinical science considered essential for the unsupervised practice of medicine.

Steps 1 and 2 are administered to students and graduates of US and Canadian medical schools at test centers established by the NBME, and application materials are usually available at these medical schools. Steps 1 and 2 are administered by the ECFMG to students and graduates of foreign medical schools; application materials are available only through the ECFMG. Step 3 is the responsibility of the individual medical licensing jurisdictions.

Step 3 application materials for physicians who have successfully completed Steps 1 and 2 are available from medical licensing authorities.

Students who enrolled in US medical schools beginning in the fall of 1990 and international medical graduates who applied for ECFMG examinations beginning in 1993 will have access to only the USMLE for purposes of licensure. The first Step 1 administration occurred in June 1992, and the first Step 2 occurred in September 1992. The first Step 3 occurred in June 1994. Because some medical students and physicians have already successfully completed some part of the NBME or the FLEX examination sequences before the implementation of USMLE, it is expected that certain combinations of the examination may be considered by medical licensing authorities as comparable to existing examinations. The USMLE program recommends that such combinations be accepted for medical licensure only if completed prior to the year 2000. Most medical licensing authorities require completion of Steps 1, 2, and 3 within a 7-year period. This 7-year period begins when the medical student or graduate first passes Step 1 or Step 2. Licensing authorities also set a limit on the number of attempts allowed to pass each step and have established an eligibility requirement for Step 3 the completion, or near completion, of at least 1 postgraduate training year. Information on specific examination requirements within each licensing jurisdiction, as well as the fee for the USMLE examination Step 3, are listed in Tables 4 and 5.

**Clerkship Regulations**

For purposes of this publication, clerkships are defined as clinical education provided to medical students. Table 6 lists the 24 states that evaluate the quality of clinical clerkships in connection with an application for licensure. In most cases, state medical boards report that clerkships must be in hospitals affiliated with Liaison Committee on Medical Education-accredited medical schools or ACGME-accredited residency programs. Fourteen states require additional and/or more specific bases of evaluation.

Sixteen state medical boards have state regulations for clerkships provided in their states to students of foreign medical schools. Of these, three state medical boards report that such clerkships are forbidden, and 11 states permit training only in hospitals with accredited residency programs.

**Restricted Licenses and Educational Permits**

Fifty-two boards issue educational permits, limited and temporary licenses, or other certificates for the restricted practice of medicine. The terms for the issuance of such certificates vary. Certificates may be issued for hospital training of those eligible for licensure; supervised employment in state or private hospitals; and full-time practice until the next regular session of the licensing board. Permits must generally be renewed once a year with a stipulated maximum number of renewals allowed (usually 5 years).

Amendments to the Immigration and Nationality Act made through Public Law 94-484 and the Health Professions Educational Assistance Act of 1976 establish requirements for the admission of
foreign national physicians to the United States, whether for permanent residence or for participation in graduate medical education programs. The amendments require that foreign national graduates of non-US medical schools pass an examination determined by the Secretary of Health and Human Services to be the equivalent to Parts I and II of the NBME examination. The amendments also require that foreign national medical graduates demonstrate competence in oral and written English.

The Secretary of Health and Human Services has determined that Steps 1 and 2 of the USMLE, which is prepared by the NBME and administered by the ECFMG, is the equivalent of Parts I and II of the NBME examination for purposes of the amendments to the Immigration and Nationality Act. This examination is given at examination centers abroad and in the United States. Applications for the examination and questions should be addressed to the Educational Commission for Foreign Medical Graduates, 3624 Market St, Philadelphia, PA 19104, USA.

Graduates of non-US medical schools who are citizens of the United States and lawful permanent residents of the United States also must pass the USMLE in order to be provided with the ECFMG certificate.
<table>
<thead>
<tr>
<th>State</th>
<th>Endorsement of National Boards (NB) Earned Prior to USMLE</th>
<th>Length of Time NBs Are Endorsed</th>
<th>To Take USMLE Step 3</th>
<th>For Licensure</th>
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<td>NL*</td>
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<td>1</td>
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<td>NL</td>
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<td>1</td>
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<td>10 yrs or see 2</td>
<td>1</td>
<td>1</td>
</tr>
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<td>1</td>
<td>1</td>
</tr>
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<td>1</td>
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<td>2</td>
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<td>1</td>
<td>3</td>
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<td>See 1</td>
<td>1</td>
</tr>
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<td>1</td>
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<td>2</td>
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<td>NL</td>
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<td>2</td>
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<td>1</td>
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<td>2</td>
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<td>1</td>
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<td>1</td>
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<td>NL</td>
<td>See 9</td>
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</table>

* NL—indicates no limit.

1 No information provided.
2 SPEX Examination.
3 Oral examination is required.
4 Prior to January 1, 1984, candidate must be board-certified or will be required to take USMLE Step 3 or SPEX.
5 Persons entering GME programs prior to January 1, 1988, need 1 year; from January 1, 1988 on, 2 years are required.
6 One additional year of GME is required if applicant failed an exam any part of an exam 3 or more times and did not pass prior to 10/1/92. The training must occur after the last failure.

7 For applications received on or after January 1, 1992.
8 SPEX required unless specialty board certified.
9 Must be enrolled in a GME program.
10 One year is required, if physician had no US training prior to July 1, 1987.
11 Canadian accepted only if graduated from a Canadian school.
Table 2. Policies of State Boards of Medical Examiners for Citizens of Canada who are Graduates of Accredited Canadian Medical Schools*

<table>
<thead>
<tr>
<th>State</th>
<th>Certification by Medical Council of Canada Approved for Licensure by Reciprocity or Endorsement</th>
<th>Accredited Canadian Internship and Residency Programs Accepted as Equivalent to Graduate Education in a US Hospital</th>
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*All State Boards of Medical Examiners consider Canadian citizens who have graduated from an accredited Canadian medical school on the same basis for licensure as graduates of accredited US medical schools.

<sup>1</sup> Applicant must have received LMCC in or after May 1970. If examination was taken prior to May 1970, applicant must be board-certified or must successfully complete USMLE Step 3 or the SPPE examination.

<sup>2</sup> Must be endorsed by provincial licensing board.

<sup>3</sup> LMCC will be considered only in conjunction with a valid Canadian provincial license.

<sup>4</sup> One year formal GME required, or its equivalent.

<sup>5</sup> Applicant must have received LMCC in or after May 1970. (After December 31, 1969 (WA); January 1, 1978 (W1).)

Graduate Medical Education Directory 1079
### Table 3. Policies of State Boards of Medical Examiners for Physicians Educated in Foreign Countries Other Than Canada*

<table>
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<tr>
<th>State</th>
<th>To Take USMLE</th>
<th>For Licensure</th>
<th>Pass on ECFMG Exam or ECFMG Certificate Required</th>
<th>Physicians Who Complete a Fifth Pathway Program Are Qualified Licensure Candidates</th>
<th>Endorses the Canadian Certificate (LMCC) When Held by an IMG</th>
<th>Years of Accredited US or Canadian Graduate Medical Education Required</th>
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<td>Endorses the Canadian Certificate (LMCC) When Holds by an IMG</td>
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This summary should be verified by direct communication with the corresponding officer of the licensing board in the state in which the physician is interested. In all states licenses based on the endorsement/acceptance of a physician's credentials are granted to those physicians meeting all state requirements—at the discretion of the licensing board.

* Both a passing score on the ECFMG exam and the ECFMG Certificate are required.

1 Oral examination is required.
2 No information provided.
3 Must include 4 months of general medicine.
4 Oral examination may be required.
5 ECFMG certificate is required if applicant is not a graduate of a foreign medical school certified by the Florida Board of Medicine and none have been approved yet. Graduates of certified foreign medical schools where the language of instruction is other than English must demonstrate competency in English.
6 Varies by specialty. Canadian training not accepted.
7 One year residency required for physicians entering residency prior to January 1, 1998. January 1, 1998 or after 2 years is required.
8 Near completion of 2 years.
9 Only in conjunction with a valid Canadian provincial license and provided all other licensure requirements are met.
10 May be counted as 1 year of required GME.
11 GME taken outside the US or Canada may be found qualifying under certain circumstances.
12 One year if graduated prior to 7/1/92 from an International Medical School approved by the Board.
13 a) If an applicant has not completed 3 years of GME but has met all other licensing requirements and has successfully completed 1 year of GME in the US or Canada in a program approved by the Board, and if the Board finds that the applicant has other professional experience and training that is substantially equivalent to the second and third years of GME, the applicant may be deemed eligible for licensure. b) Three years of GME in the United Kingdom is considered to be equivalent to 1 year of GME in the US or Canada. The Board requires American Board Certification or successful passage of SPEX in order to be considered for one of these two exceptions.
14 Training to the second-year level.
15 If passed in or after May 1970 (PA); January 1, 1976 (WI), it passed before January 1, 1978 (TN). If passed after December 31, 1969 (WA).
16 Must be enrolled in a GME program.
17 One year is required, if physician had US GME prior to July 1, 1987.
18 American Specialty Board Certification required within 10 years.
19 Just United States.
### Table 4. Fees for Issuing Medical Licenses by Examination and by Endorsement and Licensure Reregistration Intervals and Fees

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<th>State</th>
<th>Examination USMLE Step 3</th>
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<th>Registration Interval (Yrs)</th>
<th>Fee</th>
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X indicates yes.

1. Step 2 fees include exam costs and exam processing fees.
2. Plus $175 application fee. Oral exam is $400 (ALL); plus $50 application fee (AK); plus $50 fee to fund Physician Rehabilitation Program (MI); plus $325 nonrefundable application fee (NJ).
3. No information provided.
4. If less than 10 years since passing a written examination for licensure in another state, $550 for endorsement requiring SPEX exam.
5. A late penalty fee of $350 is charged if renewal is not submitted by February 1 of each year. License automatically expires May 1, if renewal and late penalty fee are not submitted.
6. Nonresidents $600. Penalty fee of $100 is charged if renewal is not submitted by July 31 in the year of renewal.
7. Federation of State Medical Boards administers examination.
8. Undetermined at this time.
9. $140 active; $55 inactive (MT); $150 inactive (NV); $270 biennial inactive or out-of-state (OR); $50 inactive (NV).
11. U.S./Canadian is $20; IMG is $80.
12. Plus $25 if initial applicant.
<table>
<thead>
<tr>
<th>State</th>
<th>Graduates of US/Canadian Medical Schools</th>
<th>Graduates of International Medical Schools</th>
<th>Number of Times Candidates for Licensure May Take USMLE</th>
<th>Number of Years in Which All Steps of USMLE Must Be Passed</th>
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### Table 5. Current Board Standards for Administration of the USMLE Examination (continued)

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* NL indicates no limit.

¹ No information provided.
² There are, however, requirements for remedial training after 2 failed attempts.
³ Near completion of 2 years.
⁴ Varies by specialty. Canadian training not accepted.
⁵ An applicant who has passed the ECFMG exam before 7/1/84 shall have satisfactorily completed 3 years of GME in a program approved by the Board in a board-approved hospital or institution.
⁶ An applicant who fails to achieve a passing score on USMLE Step 3 within 5 years from the first time he or she sat for USMLE Step 3 shall not be eligible to again sit for USMLE Step 3 until the applicant has completed 1 year of postgraduate clinical training in a program approved by the Board in a board-approved hospital or institution.
⁷ After 5 attempts, candidate must demonstrate additional education, training or experience acceptable to the Board, before being permitted to repeat the examination (NJ); after 3 attempts, further training is required (OK).
⁸ Must repeat the entire sequence if not passed within 7 years.
⁹ Must be enrolled in a GME program.
### Table 6. Clerkship Regulations

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<th>Evaluate the Quality of Clinical Clerkships in Connection with an Application for Licensure</th>
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1. In most cases, boards reported that clerkships must be in hospitals affiliated with LCME-accredited medical schools or ACGME-accredited residency training programs. States requiring additional and/or more specific bases for evaluation are noted with an asterisk (*).

2. Includes US citizens who are studying medicine in foreign medical schools.

3. Under certain circumstances.
<table>
<thead>
<tr>
<th>State</th>
<th>Contact Information</th>
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<tbody>
<tr>
<td>Alabama</td>
<td>Larry D. Dixon, Executive Director, Alabama State Board of Medical Examiners, PO Box 946, Montgomery 36101</td>
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<tr>
<td>Alaska</td>
<td>Leslie G. Haywood, Executive Secretary, Licensing Division of Occupational Licensing, Alaska Board of Medical Examiners, 3601 C St, #722, Anchorage 99503</td>
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<tr>
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<td>Mark R. Speicher, Executive Director, Arizona Board of Medical Examiners, 1651 E Morton, Ste 210, Phoenix 85020</td>
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<td>Arkansas</td>
<td>Peggy P. Cryer, Executive Secretary, Arkansas State Medical Board, 2100 River Front Dr, Suite 200, Little Rock 72202</td>
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<tr>
<td>California</td>
<td>Dixon Arnett, Executive Director, Medical Board of California, 1426 Howe Ave, Ste 54, Sacramento 95825</td>
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<tr>
<td>Colorado</td>
<td>Susan Miller, Program Administrator, Board of Medical Examiners, 1660 Broadway, Ste 1300, Denver 80222</td>
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<td>Connecticut</td>
<td>Joseph Gillen, PhD, Section Chief, Connecticut Department of Health and Addiction Services, Medical Quality Assurance, 150 Washington St, Hartford 06106</td>
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<tr>
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<td>Rosemarie S. Vanderhoogt, Administrative Officer, Board of Medical Practice, O'Neill Bldg, 3rd Fl, Box 1401, Dover 19903</td>
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<td>James Granger, Acting Executive Director, Board of Medicine, 606 G Street NW, Rm L202, Washington, DC 20001</td>
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<tr>
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<td>Marn M. Harris, EdD, Executive Director, Board of Medical Examiners, 1940 N Monroe St, Tallahassee 32399</td>
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<tr>
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<td>Andrew Watry, Executive Director, Composite State Board of Medical Examiners, 166 Peay St SW, Rm 424, Atlanta 30303</td>
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<td>Darlene Thorsted, Executive Director, State Board of Medicine, PO Box 33720-0058, Boise 83720</td>
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<td>Pat Eubanks, Manager, Medical Unit, Department of Professional Regulations, Illinois Board of Medical Examiners, 320 W Washington, 3rd Fl, Springfield 62706</td>
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<td>Indiana</td>
<td>Laura Langford, Executive Director, Indiana Health Professions Bureau, 402 W Washington St, Rm 041, Indianapolis 46204</td>
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<td>Iowa</td>
<td>Ann Martino, PhD, Executive Director, Board of Medical Examiners, Capitol Complex, Executive Hills West, 1200 E Court Ave, Des Moines 50319</td>
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<td>Kansas</td>
<td>Charlene K. Abbott, Licensing Administrator, State Board of Healing Arts, 235 S Topeka Blvd, Topeka 66603</td>
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<td>C. Wm. Schmidt, Executive Director, Board of Medical Licensure, 310 Whittington Pkwy, Louisville 40222</td>
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<td>Maine</td>
<td>Randal C. Manning, Executive Director, Maine Board of Registration in Medicine, 2 Bangor St, State House Station, 137, Augusta 04333</td>
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<td>Maryland</td>
<td>Michael Compton, Acting Executive Director, Board of Physician Quality Assurance, 4201 Patterson Ave, Baltimore 21215</td>
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<td>Alexander Fleming, Executive Director, Massachusetts Board of Registration in Medicine, 10 West St, 3rd Fl, Boston 02111</td>
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<td>Leonard Boche, Executive Director, Board of Medical Practice, 2700 University Ave W, #106, St Paul 55114</td>
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<td>Patricia England, Executive Secretary/ Legal Counsel, Board of Medical Examiners, 111 N Jackson, PO Box 200518, Helena 59620</td>
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<td>Katherine A. Brown, Associate Director, Nebraska State Board of Examiners in Medicine and Surgery, PO Box 95007, Lincoln 68509</td>
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<td>Patricia R. Perry, Executive Director, Nevada State Board of Medical Examiners, PO Box 7238, 1106 Terminal Way, Ste 301, Reno 89510</td>
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New York
Thomas J. Monahan, Associate Executive Secretary, State Board for Medicine, Cultural Education Center, Empire State Plaza, Albany, 12230

North Carolina
Bryant D. Paris, Jr, Executive Secretary, North Carolina Board of Medical Examiners, PO Box 26808, Raleigh 27611

North Dakota
Rolf P. Selten, Executive Secretary and Treasurer, Board of Medical Examiners, 418 E Broadway Ave, Ste 12, Bismarck 58501

Ohio
Ray O. Bumgarner, Executive Director, Ohio State Medical Board, 77 S High St, 17th Fl, Columbus 43266

Oklahoma
Carole A. Smith, Executive Director, Oklahoma State Board of Licensure and Sup, PO Box 18256, Oklahoma City 73154

Oregon
Kathleen Haley, Executive Director, Board of Medical Examiners, Crown Plaza, 1500 SW 1st Ave, Ste 620, Portland 97201

Pennsylvania
Cindy L. Warner, Administrative Assistant, Pennsylvania State Board of Medicine, PO 2649, Harrisburg 17105

Puerto Rico
Pablo Valentin Torres, JD, Executive Director, Division of Medical Examiners, Call Box 13969, Santurce 00908

Rhode Island
Milton Hamolsky, MD, Chief Administrative Officer, Rhode Island Board of Medicine and Discipline, Joseph E Cannon Bldg, Rm 205, 3 Capital Hill, Providence 02903

South Carolina
Henry D. Foster, Jr, JD, Executive Director, South Carolina Board of Medical Examiners, Department of Labor, Licensing, and Regulation, PO Box 212269, Columbia 29221-2269

South Dakota
Robert D. Johnson, Executive Secretary, South Dakota Department of Medical Examiners, 1223 S Minnesota Ave, Sioux Falls 57105

Tennessee
Jerry Kostin, Administrator, Tennessee State Board of Medical Examiners, 2333 Us Park Blvd, Nashville 37247-1010

Texas
Bruce A. Levy, MD, JD, Executive Director, Texas State Board of Medical Examiners, PO Box 149134, Austin 78714-9134

Utah
David E. Robinson, Director, Utah Division of Occupational and Professional Licensing, 160 E 300 St, PO Box 45805, Salt Lake City 84145-0805

Vermont
Barbara Newman, Executive Director, Vermont Board of Medical Practice, Redstone Bldg, 109 State St, Montpelier 05609-1106

Virginia
Eugenia Dorson, Deputy Executive Secretary, Virginia State Board of Medicine, 5806 W Broad St, 4th Fl, Richmond 23230-1717

Virgin Islands
Jane Aubain, MD, Office Manager, Virgin Islands Board of Medical Examiners, Dept of Health, 48 Sugar Estate, St Thomas 00802

Washington
Keith O. Shafer, Executive Director, Washington Department of Health, Medical Quality Assurance Division, 1390 Quince St SE, PO Box 47866, Olympia 98504

West Virginia
Ronald D. Walton, Executive Director, West Virginia Board of Medicine, 100 Dee Dr, Ste 104, Charleston 25311

Wisconsin
Patrick D. Braatz, Director, Bureau of Health Professions, Department of Health and Licensing, Wisconsin Board of Medical Examiners, 1400 E Washington Ave, PO Box 8985, Madison 53708

Wyoming
Carole Shoewell, Executive Secretary, Wyoming Board of Medical Examiners, Barrett Bldg, 2nd Fl, Cheyenne 82002
Appendix D

Graduate Medical Education Programs Offering Shared Residency Positions

In a shared residency, two resident physicians share one position, usually alternating months on clinical rotations with time off to devote to family, research, or other interests. To obtain a shared residency position through the National Residency Matching Program (NRMP), two applicants who have enrolled separately in the NRMP must indicate their interest in sharing a single position. Further information on shared residency positions can be obtained from individual program directors or from the NRMP; 2450 N St NW/Ste 201, Washington, DC 20037-1141, 202 828-0566.

Additional information on programs included in this list can be found in Section III, Appendix A, and in the AMA-FREIDA (Fellowship and Residency Electronic Database Access system), available from the American Medical Association at the following address: AMA Order Department, PO Box 109060, Chicago, IL 60610 (800 621-9385).
Allergy and Immunology

Alabama
Birmingham
University of Alabama Medical Center Program
Program ID: 020-01-31-109

California
Sacramento
University of California (Davis) Program
Program ID: 020-05-21-048
San Diego
University of California (San Diego) Program
Program ID: 020-05-21-066
Stanford
Stanford University Program
Program ID: 020-05-21-066

Florida
Tampa
University of South Florida Program
Program ID: 020-11-31-093

Georgia
Atlanta
Emory University Program
Program ID: 020-12-21-101

New York
Brooklyn
SUNY Health Science Center at Brooklyn Program
Program ID: 020-35-21-092

Ohio
Cleveland
Cleveland Clinic Foundation Program
Program ID: 020-38-21-194

Texas
Galveston
University of Texas Medical Branch Hospitals Program B
Program ID: 020-48-11-027

Washington
Seattle
University of Washington Program
Program ID: 020-54-21-079

Anesthesiology

Arizona
Tucson
University of Arizona Program
Program ID: 040-03-21-012

Illinois
Chicago
McGaw Medical Center of Northwestern University Program
Program ID: 040-19-21-042
University of Chicago Program
Program ID: 040-16-11-044

Maywood
Loyola University Program
Program ID: 040-16-11-046

Iowa
Iowa City
University of Iowa Hospitals and Clinics Program
Program ID: 040-18-21-046

Massachusetts
Boston
Brigham and Women's Hospital Program
Program ID: 040-24-21-066
Massachusetts General Hospital Program
Program ID: 040-34-31-064

Michigan
Detroit
Henry Ford Hospital Program
Program ID: 040-25-21-185

Missouri
St Louis
Washington University Program
Program ID: 040-25-11-081

New York
Brooklyn
SUNY Health Science Center at Brooklyn Program
Program ID: 040-35-21-110

Ohio
Cleveland
Cleveland Clinic Foundation Program
Program ID: 040-38-22-120
Youngstown
Western Reserve Care System/NEOUCOM Program
Program ID: 040-38-11-127

Pennsylvania
Hershey
Milton S Hershey Medical Center of Pennsylvania State University Program
Program ID: 040-41-11-100

Tennessee
Nashville
Vanderbilt University Program
Program ID: 040-47-11-146

Texas
El Paso
Texas Tech University (El Paso) Program
Program ID: 040-48-21-187

Washington
Tacoma
Madigan Army Medical Center Program
Program ID: 040-54-21-186

West Virginia
Morgantown
West Virginia University Program
Program ID: 040-55-11-163
Wisconsin
Madison
University of Wisconsin Program
Program ID: 940-56-21-164

California
Pasadena
Southern California Kaiser Permanente
Medical Care (Los Angeles) Program
Program ID: 141-05-12-041

Florida
Jacksonville
University of Florida Health Science
Center/Jacksonville Program
Program ID: 141-11-21-027

Georgia
Atlanta
Emory University Program
Program ID: 141-12-21-161

Illinois
Chicago
Illinois Masonic Medical Center Program
Program ID: 141-16-11-120

New York
Harlem Hospital Center Program
Program ID: 141-35-11-106

Stony Brook
SUNY at Stony Brook Program
Program ID: 141-35-21-014

Valhalla
New York Medical College at St
Vincent's Hospital and Medical Center of
New York Program
Program ID: 141-35-11-033

Ohio
Cleveland
Case Western Reserve University
(MetroHealth) Program
Program ID: 141-38-11-106
Case Western Reserve University
Program
Program ID: 141-38-21-104

Tennessee
Memphis
University of Tennessee Program
Program ID: 141-47-21-175

Nashville
Vanderbilt University Program
Program ID: 141-47-31-018

Virginia
Richmond
Medical College of Virginia/Virginia
Commonwealth University Program
Program ID: 141-51-21-202

West Virginia
Huntington
Marshall University School of Medicine
Program
Program ID: 141-55-21-098

Wisconsin
Milwaukee
University of Wisconsin (Milwaukee)
Program
Program ID: 141-56-21-072

Cardiovascular Disease (Internal Medicine)

Arizona
Tucson
University of Arizona Program
Program ID: 141-03-21-131
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Dartmouth-Hitchcock Medical Center Program
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New Jersey
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Program ID: 406-33-21-160
Piscataway
UMDNJ-Robert Wood Johnson Medical School Program
Program ID: 406-33-21-074

New Mexico
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University of New Mexico Program
Program ID: 406-34-21-144

New York
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Albert Einstein College of Medicine Program
Program ID: 406-35-21-077
Brooklyn
Brookdale Hospital Medical Center Program
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SUNY Health Science Center at Brooklyn Program
Program ID: 406-35-21-094
Buffalo
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Manhasset
North Shore University Hospital Program
Program ID: 406-35-11-076

New Hyde Park
Albert Einstein College of Medicine at Long Island Jewish Medical Center Program
Program ID: 406-35-11-082

New York
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Program ID: 406-35-11-080
Mount Sinai School of Medicine Program
Program ID: 406-35-11-086
New York Hospital-Westchester Division/Cornell Medical Center Program
Program ID: 406-35-21-098
St Luke's-Roosevelt Hospital Center Program
Program ID: 406-35-31-196

Rochester
University of Rochester Program
Program ID: 406-35-11-096

North Carolina
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East Carolina University Program
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Ohio
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Case Western Reserve University Program
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Columbus
Ohio State University Program
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Dayton
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Oregon
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Oregon Health Sciences University Program
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Pennsylvania
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Albert Einstein Medical Center Program
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 MCPHU/Medical College of Pennsylvania Hospital Program
Program ID: 406-41-21-110

Thomas Jefferson University Program
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Rhode Island
Providence
Brown University Program
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South Carolina
Columbia
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South Dakota
Sioux Falls
University of South Dakota Program
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Tennessee
Memphis
University of Tennessee Program
Program ID: 406-47-21-120

Texas
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Austin State Hospital Program
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Dallas
Timberlawn Psychiatric Hospital Program
Program ID: 406-48-21-151
University of Texas Southwestern Medical School Program
Program ID: 406-48-21-123

Galveston
University of Texas Medical Branch Hospitals Program
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Houston
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San Antonio
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Pennsylvania
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Milton S Hershey Medical Center of Pennsylvania State University Program
Program ID: 045-11-21-038

Illinois
Chicago
McGaw Medical Center of Northwestern University Program
Program ID: 307-16-21-007

Texas
Houston
University of Texas at Houston Program
Program ID: 045-43-21-032

Wisconsin
Madison
University of Wisconsin Program
Program ID: 045-06-21-008

Critical Care Medicine (Internal Medicine)

New Jersey
Camden
UMDNJ-Robert Wood Johnson Medical School (Camden) Program
Program ID: 142-33-21-061

New York
Valhalla
New York Medical College at St Vincent's Hospital and Medical Center of New York Program
Program ID: 142-35-11-008

Cytopathology (Pathology-Anatomic and Clinical)

Alabama
Birmingham
University of Alabama Medical Center Program
Program ID: 307-01-21-041

Dermatopathology (Dermatology and Pathology)

Colorado
Denver
University of Colorado Program
Program ID: 100-07-21-022

Massachusetts
Boston
Harvard Medical School Program
Program ID: 100-24-31-002

West Virginia
Morgantown
West Virginia University Program
Program ID: 100-55-21-049

Emergency Medicine

California
San Diego
Naval Medical Center (San Diego) Program
Program ID: 110-05-12-067

Florida
Jacksonville
University of Florida Health Science Center/ Jacksonville Program
Program ID: 110-11-12-068

Georgia
Atlanta
Emory University Program
Program ID: 120-12-12-012

Illinois
Chicago
Cook County Hospital Program
Program ID: 110-16-21-083
Shared Residency Positions in Emergency Medicine

**Louisiana**
- Baton Rouge
  - Louisiana State University (Baton Rouge) Program
    Program ID: 110-21-21-117

**Texas**
- El Paso
  - Texas Tech University (El Paso) Program
    Program ID: 110-48-12-070

**New Mexico**
- Albuquerque
  - University of New Mexico Program
    Program ID: 143-54-21-113

**Michigan**
- Kalamazoo
  - Kalamazoo Center for Medical Studies/Michigan State University Program
    Program ID: 110-25-21-124

**New York**
- New Hyde Park
  - Albert Einstein College of Medicine at Long Island Jewish Medical Center Program
    Program ID: 110-35-12-062

**Endocrinology, Diabetes, and Metabolism (Internal Medicine)**
- California
  - Los Angeles (Sepulveda)
    - UCLA San Fernando Valley Program
      Program ID: 143-05-21-106

**North Carolina**
- Durham
  - Duke University Program
    Program ID: 143-38-21-116

**Ohio**
- Akron
  - Akron General Medical Center/NEOUCOM Program
    Program ID: 110-38-12-035

**Colorado**
- Denver
  - University of Colorado Program
    Program ID: 143-07-21-050

**Ohio**
- Cleveland
  - Cleveland Clinic Foundation/St Vincent Charity Hospital Program
    Program ID: 143-38-12-132

**Oregon**
- Portland
  - Oregon Health Sciences University Program
    Program ID: 110-40-12-042

**Connecticut**
- Farmington
  - University of Connecticut Program
    Program ID: 143-08-31-001

**Oregon**
- Portland
  - Oregon Health Sciences University Program
    Program ID: 143-40-31-147

**South Carolina**
- Columbia
  - Richland Memorial Hospital-University of South Carolina School of Medicine Program
    Program ID: 110-45-12-047

**Tennessee**
- Memphis
  - University of Tennessee Program
    Program ID: 143-47-21-117
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<td>Stamford</td>
<td>St Joseph Medical Center Program</td>
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<td>Indiana</td>
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<td>Fort Wayne Medical Education Program</td>
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<td>Indianapolis</td>
<td>Methodist Hospital of Indiana Program</td>
<td>120-17-11-126</td>
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### Iowa
- **Davenport**
  - Genesis Medical Center Program
    - Program ID: 120-18-21-133
- **Mason City**
  - North Iowa Mercy Health Center Program
    - Program ID: 120-18-21-373
- **Waterloo**
  - Northeast Iowa Medical Education Foundation Program
    - Program ID: 120-18-21-138

### Massachusetts
- **Fitchburg**
  - University of Massachusetts (Fitchburg) Program
    - Program ID: 120-24-31-159
- **Lawrence**
  - Greater Lawrence Family Health Center Program
    - Program ID: 120-24-21-528
- **Malden**
  - Malden Hospital Program
    - Program ID: 120-24-21-506

### Minnesota
- **Minneapolis**
  - Health One Corporation Program
    - Program ID: 120-26-21-506
  - Hennepin County Medical Center Program
    - Program ID: 120-26-11-177
- **St Paul**
  - St Paul-St Paul-Ramsey Medical Center Program
    - Program ID: 120-26-11-180

### Kansas
- **Kansas City**
  - University of Kansas Medical Center Program
    - Program ID: 120-19-11-130
- **Wichita**
  - University of Kansas (Wichita)/Wesley Medical Center Program
    - Program ID: 120-19-11-142

### Kentucky
- **Lexington**
  - University of Kentucky Medical Center Program
    - Program ID: 120-20-21-144
- **Louisville**
  - University of Louisville Program
    - Program ID: 120-20-21-145

### Louisiana
- **Baton Rouge**
  - Baton Rouge General Medical Center Program
    - Program ID: 120-21-31-550
  - Louisiana State University (Baton Rouge) Program
    - Program ID: 120-21-31-126

### Maine
- **Augusta**
  - Maine-Dartmouth Family Practice Program
    - Program ID: 120-22-22-154
  - Bangor
    - Eastern Maine Medical Center Program
      - Program ID: 120-22-22-152

### Michigan
- **Ann Arbor**
  - University of Michigan Program
    - Program ID: 120-25-21-425
- **Detroit**
  - Henry Ford Hospital Program
    - Program ID: 120-25-31-484
  - Wayne State University/Detroit Medical Center Program
    - Program ID: 120-25-21-164
- **Flint**
  - Genesys Regional Medical Center-St Joseph Campus Program
    - Program ID: 120-25-31-156
- **Grand Rapids**
  - Grand Rapids Program
    - Program ID: 120-25-21-167
  - Kalamazoo
    - Kalamazoo Center for Medical Studies/Michigan State University Program
      - Program ID: 120-25-21-169
- **Lansing**
  - Sparrow Hospital Program
    - Program ID: 120-25-21-170
  - St Lawrence Hospital and HealthCare Services/Michigan State University Program
    - Program ID: 120-25-31-165
  - **Marquette**
    - Marquette General Hospital Program
      - Program ID: 120-25-21-370
  - **Royal Oak**
    - William Beaumont Hospital Program
      - Program ID: 120-25-21-374

### Missouri
- **Columbia**
  - University of Missouri-Columbia Program
    - Program ID: 120-28-11-162
- **Kansas City**
  - University of Missouri at Kansas City Program
    - Program ID: 120-28-21-422

### New Jersey
- **Montclair**
  - Mountainside Hospital Program
    - Program ID: 120-29-21-169
- **Mount Holly**
  - Memorial Hospital of Burlington County Program
    - Program ID: 120-33-31-444
- **Phillipsburg**
  - Warren Hospital Program
    - Program ID: 120-33-21-436
- **Piscataway**
  - UMDNJ-Robert Wood Johnson Medical School Program
    - Program ID: 120-33-31-419
- **Woodbury**
  - Underwood-Memorial Hospital Program
    - Program ID: 120-33-21-445

### New Mexico
- **Albuquerque**
  - University of New Mexico Program
    - Program ID: 120-34-21-197
New York

Binghamton
Wilson Memorial Regional Medical Center (United Health Services) Program
Program ID: 120-35-11-203

Bronx
Albert Einstein College of Medicine Program
Program ID: 120-35-21-209

Buffalo
SUNY at Buffalo Graduate Medical-Dental Education Consortium Program
Program ID: 120-35-21-489

Jamaica
Catholic Medical Center of Brooklyn and Queens Program
Program ID: 120-35-21-420
Jamaica Hospital Program
Program ID: 120-35-11-205

Rochester
University of Rochester/Highland Hospital of Rochester (Finger Lakes) Program
Program ID: 120-36-31-535
University of Rochester/Highland Hospital of Rochester Program
Program ID: 120-36-21-214

Schenectady
St Clare's Hospital of Schenectady Program
Program ID: 120-36-15-215

Syracuse
SUNY Health Science Center at Syracuse/ST Joseph's Hospital Health Center Program
Program ID: 120-36-21-216

Utica
St Elizabeth Hospital Program
Program ID: 120-36-11-217

North Carolina

Chapel Hill
University of North Carolina Hospitals Program
Program ID: 120-36-31-220

Durham
Duke University Program
Program ID: 120-36-21-222

Winston-Salem
Bowman Gray School of Medicine Program
Program ID: 120-36-31-226

North Dakota

Grand Forks
University of North Dakota (Bismarck) Program
Program ID: 120-37-21-227
University of North Dakota (Fargo) Program
Program ID: 120-37-21-228
University of North Dakota (Minot) Program
Program ID: 120-37-31-230

Ohio

Canton
Aultman Hospital/NEUCOM Program
Program ID: 120-38-11-234

Cleveland
Case Western Reserve University (MetroHealth) Program
Program ID: 120-38-11-237
Case Western Reserve University Program
Program ID: 120-38-11-236

Columbus
Riverside Methodist Hospitals Program
Program ID: 120-38-21-242

Sylvania
Flower Memorial Hospital Program
Program ID: 120-38-11-246

Toledo
Medical College of Ohio at Toledo Program
Program ID: 120-38-31-247

Oklahoma

Oklahoma City
University of Oklahoma Health Sciences Center Program
Program ID: 120-39-31-254

Tulsa
In His Image at Hillcrest Medical Center Program
Program ID: 120-39-21-469
University of Oklahoma College of Medicine-Tulsa Program
Program ID: 120-39-21-256

Oregon

Portland
Oregon Health Sciences University (Cascades East) Program
Program ID: 120-40-21-540

Pennsylvania

Altoona
Altoona Hospital Program
Program ID: 120-41-11-260

Hershey
Pennsylvania State University/Good Samaritan Hospital Program
Program ID: 120-41-31-504

Kingston
United Health and Hospital Services Program
Program ID: 120-41-21-284

Lancaster
Lancaster General Hospital Program
Program ID: 120-41-12-270

Pittsburgh
Shadyside Hospital Program
Program ID: 120-41-12-280

Reading
Reading Hospital and Medical Center Program
Program ID: 120-41-12-281

St. Joseph Hospital Program
Program ID: 120-41-11-282

Upland
Delco Family Health Associates Program
Program ID: 120-41-21-477

Rhode Island

Pawtucket
Brown University Program
Program ID: 120-43-21-288

South Carolina

Charleston
Medical University of South Carolina Program
Program ID: 120-45-21-290
Shared Residency Positions in Family Practice

Columbia
Richland Memorial Hospital-University of South Carolina School of Medicine Program
Program ID: 120-45-11-291

South Dakota
Sioux Falls
University of South Dakota (Brookings/Watertown) Program
Program ID: 120-46-21-531
University of South Dakota Program
Program ID: 120-46-11-204

Texas
Amarillo
Texas Tech University (Amarillo) Program
Program ID: 120-48-21-511

Baytown
San Jacinto Methodist Hospital Program
Program ID: 120-48-21-482

El Paso
Texas Tech University (El Paso) Program
Program ID: 120-48-11-306

Houston
Baylor College of Medicine Program
Program ID: 120-45-11-306

Lubbock
Texas Tech University (Lubbock) Program
Program ID: 120-48-21-310

Odessa
Texas Tech University (Odessa) Program
Program ID: 120-48-21-467

Port Arthur
University of Texas Medical Branch (Port Arthur) Program
Program ID: 120-48-21-434

Waco
McLennan County Medical Education and Research Foundation Program
Program ID: 120-48-11-313

Virginia
Richmond
Medical College of Virginia/Virginia Commonwealth University Program
Program ID: 120-01-21-485

Washington
Renton
Valley Medical Center Program
Program ID: 120-54-21-470

West Virginia
Charleston
West Virginia University (Charleston Division) Program
Program ID: 120-55-11-337

Clarksburg
United Hospital Center Program
Program ID: 120-55-22-334

Huntington
Marshall University School of Medicine Program
Program ID: 120-55-21-335

Wheeling
Wheeling Hospital Program
Program ID: 120-56-22-338

Wisconsin
Appleton
University of Wisconsin (Appleton) Program
Program ID: 120-56-31-368

Eau Claire
University of Wisconsin (Eau Claire) Program
Program ID: 120-56-21-342

Milwaukee
University of Wisconsin (Milwaukee) Program
Program ID: 120-56-21-348

Wausau
University of Wisconsin (Wausau) Program
Program ID: 120-56-21-350

Forensic Pathology (Pathology-Anatomic and Clinical)

Alabama
Birmingham
University of Alabama Medical Center Program
Program ID: 310-01-21-049

California
Los Angeles
County of Los Angeles-Department of Coroner Program
Program ID: 310-06-12-002

Minnesota
Minneapolis
Hennepin County Medical Examiner Program
Program ID: 310-36-12-014

Tennessee
Memphis
University of Tennessee Program
Program ID: 310-47-21-027

Gastroenterology (Internal Medicine)

California
Orange
University of California (Irvine) Program
Program ID: 144-05-21-151

District of Columbia
Washington
Washington Hospital Center Program
Program ID: 144-10-21-212
Florida
Jacksonville
University of Florida Health Science Center/Jacksonville Program
Program ID: 144-11-21-024

Iowa
Iowa City
University of Iowa Hospitals and Clinics Program
Program ID: 144-18-21-095

Kansas
Kansas City
University of Kansas Medical Center Program
Program ID: 144-19-21-115

Massachusetts
Boston
Boston University Program
Program ID: 144-24-21-157

Missouri
St Louis
Barnes Hospital Group Program
Program ID: 144-28-21-158

New York
Manhasset
North Shore University Hospital Program
Program ID: 144-35-21-170

Valhalla
New York Medical College at St Vincent's Hospital and Medical Center of New York Program
Program ID: 144-35-11-029

Ohio
Cleveland
Case Western Reserve University Program
Program ID: 144-38-21-164

Geriatric Medicine (Family Practice)

Arizona
Tucson
University of Arizona Program
Program ID: 125-03-12-002

Michigan
Lansing
St Lawrence Hospital and Health Care Services/Michigan State University Program
Program ID: 125-25-31-021

Missouri
Columbia
University of Missouri-Columbia Program
Program ID: 125-28-21-026

Kansan City
University of Missouri at Kansas City Program
Program ID: 125-28-31-027

New Jersey
Piscataway
UMDNJ-Robert Wood Johnson Medical School Program
Program ID: 125-38-21-009

North Carolina
Greenville
East Carolina University Program
Program ID: 125-38-21-011

Ohio
Cincinnati
University of Cincinnati Hospital Group Program
Program ID: 125-38-21-012

Pennsylvania
Pittsburgh
St Margaret Memorial Hospital Program
Program ID: 125-41-12-016

Geriatric Medicine (Internal Medicine)

Arizona
Phoenix
Good Samaritan Regional Medical Center Program
Program ID: 151-03-21-102

Arkansas
Little Rock
University of Arkansas for Medical Sciences Program
Program ID: 151-04-21-003

California
San Diego
University of California (San Diego) Program
Program ID: 151-05-21-046

San Francisco
University of California (San Francisco)/Mount Zion Program
Program ID: 151-05-31-007

District of Columbia
Washington
George Washington University Program
Program ID: 151-10-21-056

Hawaii
Honolulu
University of Hawaii Program
Program ID: 151-14-21-047

Kansas
Kansas City
University of Kansas Medical Center Program
Program ID: 151-19-21-056

Maryland
Baltimore
Johns Hopkins University Program
Program ID: 151-23-11-018
Massachusetts

Boston
Beth Israel Hospital Program
Program ID: 161-24-21-010

Worcester
University of Massachusetts Medical Center Program
Program ID: 161-24-21-022

Missouri

St Louis
Washington University Program
Program ID: 161-28-21-027

New York

Bronx
Albert Einstein College of Medicine Program
Program ID: 161-35-21-083

Buffalo
SUNY at Buffalo Graduate Medical-Dental Education Consortium Program
Program ID: 151-35-31-040

New York
Mount Sinai School of Medicine Program
Program ID: 161-35-31-062

Stony Brook
SUNY at Stony Brook Program
Program ID: 161-35-52-100

Valhalla
New York Medical College at St Vincent's Hospital and Medical Center of New York Program
Program ID: 151-56-21-090

North Carolina

Chapel Hill
University of North Carolina Hospitals Program
Program ID: 161-36-21-057

Ohio

Cleveland
Case Western Reserve University (MetroHealth) Program
Program ID: 161-38-11-006

Oregon

Portland
Oregon Health Sciences University Program
Program ID: 151-40-31-038

Pennsylvania

Philadelphia
MCPHU/Medical College of Pennsylvania Hospital Program
Program ID: 151-41-21-008

Pittsburgh
University Health Center of Pittsburgh Program
Program ID: 161-41-21-077

Tennessee

Memphis
University of Tennessee Program
Program ID: 161-47-21-061

Utah

Salt Lake City
University of Utah Program
Program ID: 161-49-21-062

Virginia

Richmond
Medical College of Virginia/Virginia Commonwealth University Program
Program ID: 151-51-21-043

West Virginia

Huntington
Marshall University School of Medicine Program
Program ID: 151-55-21-096

Wisconsin

Milwaukee
University of Wisconsin (Milwaukee) Program
Program ID: 151-56-21-076

Hand Surgery
(Orthopaedic Surgery)

Massachusetts
Boston
Harvard Medical School Program
Program ID: 263-24-21-034

Hematology (Internal Medicine)

California

Los Angeles
University of Southern California Program
Program ID: 145-05-21-046

District of Columbia

Washington
Georgetown University Program
Program ID: 145-10-21-078

Maryland

Bethesda
National Institutes of Health Clinical Center Program
Program ID: 145-13-21-177

New Jersey

South Orange
Seton Hall University School of Graduate Medical Education Program
Program ID: 145-33-11-138

New York

Manhasset
North Shore University Hospital Program
Program ID: 145-35-21-447
Hematology (Pathology-Anatomic and Clinical)

Arkansas
Little Rock
University of Arkansas for Medical Sciences Program
Program ID: 311-04-21-038

Connecticut
Hartford
Hartford Hospital Program
Program ID: 311-08-11-021

Michigan
Ann Arbor
University of Michigan Program
Program ID: 311-25-21-025

Missouri
St Louis
Washington University Program
Program ID: 311-28-21-050

Hematology and Oncology (Internal Medicine)

California
Sacramento
University of California (Davis) Program
Program ID: 155-05-31-005
San Diego
Naval Medical Center (San Diego) Program
Program ID: 155-05-11-006

New York
Brooklyn
Brookdale Hospital Medical Center Program
Program ID: 155-35-21-041

Stony Brook
SUNY at Stony Brook Program
Program ID: 155-35-13-054

Valhalla
New York Medical College (St Vincent) Program
Program ID: 155-35-12-053

North Carolina
Durham
Duke University Program
Program ID: 155-35-31-056

South Carolina
Charleston
Medical University of South Carolina Program
Program ID: 155-45-21-063

Infectious Disease (Internal Medicine)

California
Pasadena
Southern California Kaiser Permanente Medical Care (Los Angeles) Program
Program ID: 146-05-12-032

Florida
Tampa
University of South Florida Program
Program ID: 146-11-21-034

Illinois
Chicago
University of Illinois College of Medicine at Chicago Program
Program ID: 146-16-21-101

Iowa
Iowa City
University of Iowa Hospitals and Clinics Program
Program ID: 146-18-21-006

Massachusetts
Boston
Brigham and Women's Hospital Program
Program ID: 146-34-21-021

Michigan
Detroit
Henry Ford Hospital Program
Program ID: 146-25-11-133

New Jersey
Piscataway
UMDNJ-Robert Wood Johnson Medical School Program
Program ID: 146-33-21-026

South Orange
Seton Hall University School of Graduate Medical Education Program
Program ID: 146-35-11-152

New Mexico
Albuquerque
University of New Mexico Program
Program ID: 146-34-21-134

New York
East Meadow
SUNY at Stony Brook (East Meadow) Program
Program ID: 146-35-21-093

New Hyde Park
Albert Einstein College of Medicine at Long Island Jewish Medical Center Program
Program ID: 146-35-21-135

Valhalla
New York Medical College at St Vincent's Hospital and Medical Center of New York Program
Program ID: 146-35-11-174

North Carolina
Winston-Salem
Bowman Gray School of Medicine Program
Program ID: 146-36-21-014
Pennsylvania

Philadelphia
MCPHU/Medical College of Pennsylvania Hospital Program
Program ID: 146-41-21-119

Tennessee

Nashville
Vanderbilt University Program
Program ID: 146-47-31-017

Utah

Salt Lake City
University of Utah Program
Program ID: 146-49-21-158

Virginia

Charlottesville
University of Virginia Program
Program ID: 146-51-21-019

West Virginia

Morgantown
West Virginia University Program
Program ID: 146-55-21-188

Internal Medicine

Arizona

Phoenix
Good Samaritan Regional Medical Center Program
Program ID: 140-03-21-025
Maricopa Medical Center Program
Program ID: 140-03-11-028

California

Bakersfield
Kern Medical Center Program
Program ID: 140-05-31-031
Los Angeles
Cedars-Sinai Medical Center Program
Program ID: 140-05-11-040
UCLA Medical Center Program
Program ID: 140-05-11-046

Colorado

Denver
Presbyterian-St Luke's Medical Center Program
Program ID: 140-07-31-071
University of Colorado Program
Program ID: 140-07-21-073

Connecticut

Danbury
Danbury Hospital Program
Program ID: 140-08-11-076

Farmington
University of Connecticut (New Britain) Program
Program ID: 140-08-21-489
University of Connecticut Program
Program ID: 140-08-31-078

New Haven
Hospital of St Raphael Program
Program ID: 140-08-31-084

District of Columbia

Washington
Georgetown University Program
Program ID: 140-10-21-091
Washington Hospital Center Program
Program ID: 140-10-11-097

Florida

Jacksonville
University of Florida Health Science Center/Jacksonville Program
Program ID: 140-11-21-099

Hawaii

Honolulu
University of Hawaii Program
Program ID: 140-14-21-109

Illinois

Chicago
Cook County Hospital Program
Program ID: 140-16-12-113
Ravenswood Hospital Medical Center Program
Program ID: 140-16-11-129
 Rush-Presbyterian-St Luke's Medical Center Program
Program ID: 140-16-11-121
St Joseph Hospital and Health Care Center Program
Program ID: 140-16-11-122
University of Illinois College of Medicine at Chicago Program
Program ID: 140-16-21-124
University of Illinois College of Medicine at Chicago/Christ Hospital Program
Program ID: 140-16-21-129

Evanston
St Francis Hospital of Evanston Program
Program ID: 140-16-11-126
Maywood
Loyola University Program
Program ID: 140-16-21-128

Oak Park
West Suburban Hospital Medical Center Program
Program ID: 140-16-21-467

Park Ridge
University of Chicago (Park Ridge) Program
Program ID: 140-16-21-130

Springfield
Southern Illinois University Program
Program ID: 140-16-21-132

Urbana
University of Illinois College of Medicine at Urbana Program
Program ID: 140-16-21-456

Iowa

Iowa City
University of Iowa Hospitals and Clinics Program
Program ID: 140-18-21-138

Kentucky

Lexington
University of Kentucky Medical Center Program
Program ID: 140-20-21-141

Louisiana

Baton Rouge
Louisiana State University (Baton Rouge) Program
Program ID: 140-21-21-507

New Orleans
Tulane University Program
Program ID: 140-21-21-147

Maryland

Baltimore
Franklin Square Hospital Center Program
Program ID: 140-23-12-161
Sinai Hospital of Baltimore Program
Program ID: 140-23-12-167
Union Memorial Hospital Program
Program ID: 140-23-12-169

Massachusetts

Boston
Brigham and Women's Hospital Program
Program ID: 140-24-21-172
Carney Hospital Program
Program ID: 140-24-11-166
St Elizabeth's Medical Center of Boston Program
Program ID: 140-24-21-173

Cambridge
Cambridge Hospital Program
Program ID: 140-24-11-178
Mount Auburn Hospital Program
Program ID: 140-24-11-176

Framingham
MetroWest Medical Center Program
Program ID: 140-24-21-177

Newton Lower Falls
Newton-Wellesley Hospital Program
Program ID: 140-24-21-178

Pittsfield
Berkshire Medical Center Program
Program ID: 140-24-21-179

Salem
Salem Hospital Program
Program ID: 140-24-12-180

Springfield
Baystate Medical Center Program
Program ID: 140-24-11-181

Worcester
Medical Center of Central Massachusetts Program
Program ID: 140-24-31-182
St Vincent Hospital Program
Program ID: 140-24-11-183
University of Massachusetts Medical Center Program
Program ID: 140-24-21-184

Michigan

Ann Arbor
St Joseph Mercy Hospital Program
Program ID: 140-25-12-186

Detroit
Henry Ford Hospital Program
Program ID: 140-25-11-189

East Lansing
Michigan State University Program
Program ID: 140-25-21-185

Flint
Hurley Medical Center/Michigan State University Program
Program ID: 140-25-31-196

Pontiac
St Joseph Mercy Hospital Program
Program ID: 140-25-11-200

Royal Oak
William Beaumont Hospital Program
Program ID: 140-25-12-201

Minnesota

Minneapolis
Hennepin County Medical Center Program
Program ID: 140-26-31-207

Mississippi

Jackson
University of Mississippi Medical Center Program
Program ID: 140-27-21-200

Missouri

Kansas City
University of Missouri at Kansas City Program
Program ID: 140-28-31-214

St Louis
Deaconess Hospital Program
Program ID: 140-28-11-216
Washington University Program
Program ID: 140-28-21-221

Nevada

Reno
University of Nevada (Reno) Program
Program ID: 140-31-21-483

New Hampshire

Lebanon
Dartmouth-Hitchcock Medical Center Program
Program ID: 140-32-21-225
New Jersey

Camden
UMDNJ-Robert Wood Johnson Medical School (Camden) Program
Program ID: 140-39-21-227

Long Branch
Monmouth Medical Center Program
Program ID: 140-39-11-233

New Mexico

Albuquerque
University of New Mexico Program
Program ID: 140-34-21-247

New York

Binghamton
Wilson Memorial Regional Medical Center (United Health Services) Program
Program ID: 140-35-31-255

Brooklyn
Brookdale Hospital Medical Center Program
Program ID: 140-35-11-264

Buffalo
SUNY at Buffalo Graduate Medical-Dental Education Consortium Program
Program ID: 140-35-31-253

Cooperstown
Mary Imogene Bassett Hospital Program
Program ID: 140-35-11-253

Forest Hills
La Guardia Hospital/Syosset Community Hospital Program
Program ID: 140-35-21-468

Manhasset
North Shore University Hospital Program
Program ID: 140-35-21-271

New York

Presbyterian Hospital in the City of New York Program
Program ID: 140-35-11-297

Rochester
St Mary's Hospital Program
Program ID: 140-35-11-312
University of Rochester (Rochester General) Program
Program ID: 140-35-31-314

Staten Island
Staten Island University Hospital Program
Program ID: 140-35-11-304

Stony Brook
SUNY at Stony Brook Program
Program ID: 140-35-21-315

Syracuse
SUNY Health Science Center at Syracuse Program
Program ID: 140-35-21-316

Valhalla
New York Medical College at St Vincent's Hospital and Medical Center of New York Program
Program ID: 140-35-11-302

North Carolina

Chapel Hill
University of North Carolina Hospitals Program
Program ID: 140-35-21-318

Durham
Duke University Program
Program ID: 140-35-11-320

Greensboro
Moses H Cone Memorial Hospital Program
Program ID: 140-35-11-321

Greenville
East Carolina University Program
Program ID: 140-35-11-323

North Dakota

Grand Forks
University of North Dakota Program
Program ID: 140-37-21-326

Ohio

Cincinnati
Good Samaritan Hospital Program
Program ID: 140-38-31-332

Cleveland
Case Western Reserve University (MetroHealth) Program
Program ID: 140-38-31-336
Case Western Reserve University Program
Program ID: 140-38-31-335

Cleveland Clinic Foundation/St Vincent Charity Hospital Program
Program ID: 140-38-12-339

Mercy Huron Hospital Program
Program ID: 140-38-21-476

Columbus
Riverside Methodist Hospitals Program
Program ID: 140-38-12-343

Dayton (Kettering)
Kettering Medical Center Program
Program ID: 140-38-21-347

Oklahoma

Oklahoma City
University of Oklahoma Health Sciences Center Program
Program ID: 140-39-21-351

Tulsa
University of Oklahoma College of Medicine-Tulsa Program
Program ID: 140-39-21-352

Oregon

Portland
Emanuel Hospital and Health Center Program
Program ID: 140-40-11-353
Oregon Health Sciences University Program
Program ID: 140-40-31-357
Providence Medical Center Program
Program ID: 140-40-31-355
St Vincent Hospital and Medical Center Program
Program ID: 140-40-31-356

Pennsylvania

Allentown
Lehigh Valley Hospital/Pennsylvania State University Program
Program ID: 140-41-21-359

Bala Cynwyd
Mercy Catholic Medical Center Program
Program ID: 140-41-11-375

Johnstown
Temple University/Columbia Valley Memorial Hospital Program
Program ID: 140-41-31-367

Philadelphia
Albert Einstein Medical Center Program
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Texas
Houston
University of Texas at Houston Program
Program ID: 140-48-31-423

Utah
Salt Lake City
University of Utah Program
Program ID: 140-49-21-427

Virginia
Norfolk
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Program ID: 140-51-21-432
Richmond
Medical College of Virginia/Virginia Commonwealth University Program
Program ID: 140-51-21-433

Washington
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University of Washington Program
Program ID: 140-54-21-434
Virginia Mason Medical Center Program
Program ID: 140-54-12-435
Spokane
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Program ID: 140-54-31-436

West Virginia
Charleston
West Virginia University (Charleston Division) Program
Program ID: 140-55-11-438
Huntington
Marshall University School of Medicine Program
Program ID: 140-55-21-439
Morgantown
West Virginia University Program
Program ID: 140-55-11-440

Wisconsin
La Crosse
Gundersen Medical Foundation-La Crosse Lutheran Hospital Program
Program ID: 140-56-12-442
Madison
University of Wisconsin Program
Program ID: 140-56-21-443
Milwaukee
Medical College of Wisconsin Program
Program ID: 140-56-31-445
University of Wisconsin (Milwaukee)
Program ID: 140-56-21-446

Internal Medicine/Emergency Medicine
Illinois
Chicago
University of Illinois College of Medicine at Chicago Program
Program ID: 805-16-44-012

Indiana
Indianapolis
Methodist Hospital of Indiana Program
Program ID: 805-17-44-007

New York
New Hyde Park
Albert Einstein College of Medicine at Long Island Jewish Medical Center Program
Program ID: 805-35-44-011

Internal Medicine/Neurology
West Virginia
Morgantown
West Virginia University School of Medicine Program
Program ID: 845-55-44-002
Shared Residency Positions in Internal Medicine/Pediatrics

Internal Medicine/Pediatrics

Arizona
Phoenix
Maricopa Medical Center Program
Program ID: 800-03-44-084

California
Los Angeles
Los Angeles County-USC Medical Center Program
Program ID: 800-05-44-005

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Chicago
Cook County Hospital Program
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University of Chicago Program
Program ID: 800-16-44-012
University of Illinois Program
Program ID: 800-16-44-013

Missouri
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University of Missouri-Kansas City School of Medicine Program
Program ID: 800-28-44-023

Mississippi
Jackson
University of Mississippi Program
Program ID: 800-27-44-035

New Jersey
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Cooper Hospital/University Medical Center Program
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Program ID: 800-35-44-044

North Carolina
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Program ID: 800-36-44-056

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Greenville
East Carolina University Program
Program ID: 800-36-44-057

Ohio
Cleveland
Cleveland Clinic Foundation Program
Program ID: 800-38-44-060
MetroHealth Medical Center Program
Program ID: 800-38-44-061

Toledo
Medical College of Ohio at Toledo Program
Program ID: 800-38-44-065

Oklahoma
Oklahoma City
University of Oklahoma Health Sciences Center Program
Program ID: 800-38-44-090

Tulsa
University of Oklahoma College of Medicine-Tulsa Program
Program ID: 800-36-44-067

Tennessee
Nashville
Vanderbilt University Program
Program ID: 800-47-44-070

Texas
Houston
University of Texas at Houston Program
Program ID: 800-48-44-075

Louisiana
New Orleans
Louisiana State University Program
Program ID: 800-21-44-022

Maryland
Baltimore
University of Maryland Program
Program ID: 800-23-44-096

Massachusetts
Springfield
Baystate Medical Center Program
Program ID: 800-24-44-024
West Virginia
Huntington
Marshall University School of Medicine Program
Program ID: 800-55-44-079

Morgantown
West Virginia University Hospitals Program
Program ID: 800-55-44-080

Wisconsin
Milwaukee
Medical College of Wisconsin Program
Program ID: 800-56-44-096

Internal Medicine/Physical Medicine and Rehabilitation

Louisiana
New Orleans
Louisiana State University Program
Program ID: 810-21-44-002

Ohio
Cleveland
Case Western Reserve University Program
Program ID: 810-38-44-016

Pennsylvania
Philadelphia
Albert Einstein Medical Center Program
Program ID: 819-41-44-013

Pittsburgh
St Francis Medical Center Program
Program ID: 810-41-44-008

Internal Medicine/Psychiatry

Illinois
Springfield
Southern Illinois University Program
Program ID: 815-16-44-009

Iowa
Iowa City
University of Iowa Hospitals and Clinics Program
Program ID: 815-18-44-003

Louisiana
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Tulane University Program
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New York
Rochester
University of Rochester Program
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North Carolina
Durham
Duke University Program
Program ID: 815-36-44-012

Greenville
East Carolina University Program
Program ID: 815-36-44-006

Pennsylvania
Philadelphia
Albert Einstein Medical Center Program
Program ID: 815-41-44-001

Pittsburgh
St Francis Health System Program
Program ID: 815-41-44-910

West Virginia
Charleston
West Virginia University Program
Program ID: 815-51-44-014

Morgantown
West Virginia University Program
Program ID: 815-55-44-006

Neonatal-Perinatal Medicine (Pediatrics)

Alabama
Birmingham
University of Alabama Medical Center Program
Program ID: 329-01-21-001

California
Los Angeles
Cedars-Sinai Medical Center Program
Program ID: 329-05-21-113

University of Southern California Program
Program ID: 329-06-21-004

Stanford
Stanford University Program
Program ID: 329-05-21-010

Colorado
Denver
University of Colorado Program
Program ID: 329-07-21-012

District of Columbia
Washington
Georgetown University Program
Program ID: 329-10-21-066

Illinois
Chicago
University of Chicago Program
Program ID: 329-16-11-008

Missouri
Columbia
University of Missouri-Columbia Program
Program ID: 329-28-21-035
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<td>Milton S Hershey Medical Center of Pennsylvania State University Program</td>
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<td>Nephrology (Internal Medicine)</td>
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<td>SUNY at Buffalo Graduate Medical-Dental Education Consortium Program</td>
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- St Louis: 329-28-21-057
- New Hampshire: 329-32-21-111
- Lebanon: 329-35-21-188
- New York: 329-36-21-078
- North Carolina: 329-38-21-047
- Ohio: 329-39-21-079
- Oklahoma: 329-41-21-050
- Pennsylvania: 329-51-21-084
- Virginia: 329-53-21-084
- Arkansas: 148-09-21-091
- California: 148-04-21-002
- Iowa: 148-05-11-110
- Los Angeles: 148-05-11-110
- Pakadena: 148-06-12-029
- Iowa City: 148-18-21-093
- New Haven: 148-26-11-118
- New Mexico: 148-29-21-192
- New York: 148-34-21-119
- Buffalo: 148-35-31-094
- Manhasset: 148-35-21-143
- Valhalla: 148-35-11-024
- Cleveland: 148-38-21-137
- Nashville: 148-47-31-014
- New Haven: 160-08-21-015
- Bronx: 160-35-21-051
- Galveston: 160-48-21-083
Virginia
Charlottesville
University of Virginia Program
Program ID: 160-51-21-089

West Virginia
Morgantown
West Virginia University Program
Program ID: 160-55-11-091

Neurology
California
Orange
University of California (Irvine) Program
Program ID: 180-05-21-009

Illinois
Springfield
Southern Illinois University Program
Program ID: 180-16-21-134

Louisiana
New Orleans
Tulane University Program
Program ID: 180-21-21-644

Massachusetts
Boston
Harvard Medical School Program
Program ID: 180-24-21-049

New York
Rochester
University of Rochester Program
Program ID: 180-35-31-082

Valhalla
New York Medical College at St Vincent’s Hospital and Medical Center of New York Program
Program ID: 180-35-11-078

Tennessee
Nashville
Vanderbilt University Program
Program ID: 180-47-21-107

Texas
San Antonio
University of Texas Health Science Center at San Antonio Program
Program ID: 180-48-21-112

Neuroradiology (Radiology-Diagnostic)
California
San Francisco
University of California (San Francisco) Program
Program ID: 423-05-21-044

Illinois
Chicago
University of Illinois College of Medicine at Chicago/Michael Reese Hospital Program
Program ID: 423-16-21-007

Pennsylvania
Philadelphia
Thomas Jefferson University Program
Program ID: 423-41-21-083

Nuclear Medicine
California
Stanford
Stanford University Program
Program ID: 200-05-21-018

Michigan
Detroit
Henry Ford Hospital Program
Program ID: 200-25-21-106

Minnesota
Minneapolis
University of Minnesota Program
Program ID: 200-35-31-041
Nebraska
Omaha
University of Nebraska Program
Program ID: 200-50-11-044

New York
Manhasset
North Shore University Hospital Program
Program ID: 200-55-21-102

Pennsylvania
Philadelphia
University of Pennsylvania Program
Program ID: 200-41-21-067

Utah
Salt Lake City
University of Utah Program
Program ID: 200-49-21-107

Wisconsin
Madison
University of Wisconsin Program
Program ID: 200-56-21-079

Nuclear Radiology (Radiology-Diagnostic)
Pennsylvania
Philadelphia
University of Pennsylvania Program
Program ID: 425-41-21-043

Obstetrics and Gynecology
California
Torrance
Los Angeles County-Harbor-UCLA Medical Center Program
Program ID: 220-05-21-050

Connecticut
New Haven
Yale-New Haven Medical Center Program
Program ID: 220-08-21-060

Georgia
Atlanta
Emory University Program
Program ID: 220-12-21-076

Illinois
Springfield
Southern Illinois University Program
Program ID: 220-16-21-097

Maryland
Baltimore
University of Maryland Program
Program ID: 220-33-21-121

New York
Jamaica
Catholic Medical Center of Brooklyn and Queens Program
Program ID: 220-35-21-183

Rochester
Rochester General Hospital Program
Program ID: 220-35-31-343

Syracuse
SUNY Health Science Center at Syracuse Program
Program ID: 220-35-21-215

Tennessee
Memphis
University of Tennessee Program
Program ID: 220-47-21-276

Virginia
Richmond
Medical College of Virginia/Virginia Commonwealth University Program
Program ID: 220-51-11-296

West Virginia
Charleston
West Virginia University (Charleston Division) Program
Program ID: 220-55-11-303

Oncology (Internal Medicine)
Illinois
Chicago
Cook County Hospital Program
Program ID: 147-16-12-034

Mississippi
Jackson
University of Mississippi Medical Center Program
Program ID: 147-37-21-070

New Jersey
South Orange
Seton Hall University School of Graduate Medical Education Program
Program ID: 147-33-21-043

New York
Albany
Albany Medical Center Program
Program ID: 147-35-91-026

Manhasset
North Shore University Hospital Program
Program ID: 147-35-21-152
Pennsylvania
Philadelphia
Thomas Jefferson University Program
Program ID: 147-41-21-025

Ophthalmology
Louisiana
New Orleans
Tulane University Program
Program ID: 240-21-21-062

New York
Manhasset
North Shore University Hospital Program
Program ID: 240-35-11-092

New York
Manhattan Eye Ear and Throat Hospital Program
Program ID: 240-35-21-188

Valhalla
New York Medical College at Westchester County Medical Center Program
Program ID: 240-35-21-197

Texas
Galveston
University of Texas Medical Branch Hospitals Program
Program ID: 240-48-21-149

Virginia
Norfolk
Eastern Virginia Graduate School of Medicine Program
Program ID: 240-61-21-157

Orthopaedic Surgery
Alabama
Mobile
University of South Alabama Program
Program ID: 260-01-11-182

Orthopaedic Surgery of the Spine (Orthopaedic Surgery)
Illinois
Springfield
Southern Illinois University Program
Program ID: 267-18-21-091

Otolaryngology
Louisiana
Shreveport
Louisiana State University (Shreveport) Program
Program ID: 280-21-21-121

Pain Management (Anesthesiology)
Florida
Tampa
University of South Florida Program
Program ID: 048-11-21-050

Illinois
Chicago
University of Illinois College of Medicine at Chicago/Michael Reese Hospital Program
Program ID: 048-16-31-006

New York
Valhalla
New York Medical College at Westchester County Medical Center Program
Program ID: 048-35-32-010

Ohio
Cleveland
Cleveland Clinic Foundation Program
Program ID: 048-38-31-022

Pennsylvania
Hershey
Milton S Hershey Medical Center of Pennsylvania State University Program
Program ID: 048-41-21-024

Philadelphia
Thomas Jefferson University Program
Program ID: 048-41-21-041

Pathology-Anatomic and Clinical
Alabama
Birmingham
University of Alabama Medical Center Program
Program ID: 300-01-31-018
Arizona
Tucson
University of Arizona Program
Program ID: 300-09-21-028

Arkansas
Little Rock
University of Arkansas for Medical Sciences Program
Program ID: 300-04-21-024

California
Loma Linda
Loma Linda University Program
Program ID: 300-05-21-028

District of Columbia
Washington
George Washington University Program
Program ID: 300-10-21-069

Georgia
Fort Gordon
Dwight David Eisenhower Army Medical Center Program
Program ID: 300-12-21-006

Illinois
Chicago
University of Illinois College of Medicine at Chicago Program
Program ID: 300-16-21-098

Michigan
Ann Arbor
University of Michigan Program
Program ID: 300-25-21-158

Missouri
Kansas City
University of Missouri at Kansas City Program
Program ID: 300-28-21-408

New York
Buffalo
SUNY at Buffalo Graduate Medical-Dental Education Consortium Program
Program ID: 300-35-21-224

Manhasset
North Shore University Hospital Program
Program ID: 300-35-11-228

New York
Presbyterian Hospital in the City of New York Program
Program ID: 300-35-11-237

Rochester
University of Rochester Program
Program ID: 300-35-21-263

Oklahoma
Oklahoma City
Oklahoma City University Program
Program ID: 300-05-21-028

Pennsylvania
Philadelphia
St Christopher's Hospital for Children Program
Program ID: 305-41-11-042

West Virginia
Morgantown
West Virginia University Program
Program ID: 300-55-21-068

Pediatric Critical Care Medicine (Pediatrics)
District of Columbia
Washington
George Washington University Program
Program ID: 323-10-21-055

Florida
Jacksonville
University of Florida Health Science Center/Jacksonville Program
Program ID: 320-11-21-046
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New York

Rochester

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Program ID: 328-36-21-050

Texas

Houston

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Program ID: 328-48-21-041

Wisconsin

Madison

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Pediatric Pulmonology (Pediatrics)

Florida

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Program ID: 330-11-21-017

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Tulane University Program
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Minnesota

Minneapolis

University of Minnesota Program
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District of Columbia

Washington

George Washington University Program
Program ID: 424-16-21-024

Missouri

Kansas City

University of Missouri at Kansas City Program
Program ID: 424-38-21-028

New York

New York

Presbyterian Hospital in the City of New York Program
Program ID: 424-35-21-011

Rochester

University of Rochester Program
Program ID: 424-36-21-012

North Carolina

Durham

Duke University Program
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Ohio

Cincinnati

University of Cincinnati Hospital Group Program
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Pediatric Radiology (Radiology-Diagnostic)

California

Los Angeles

Children's Hospital of Los Angeles Program
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UCLA Medical Center Program
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Program ID: 400-35-11-147
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Program ID: 400-35-21-149
Rochester
University of Rochester Program
Program ID: 400-35-11-158
Stony Brook
SUNY at Stony Brook Program
Program ID: 400-35-21-255
Syracuse
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Program ID: 400-35-21-166
Waltham
New York Medical College (Metropolitan) Program
Program ID: 400-35-11-148
North Carolina
Durham
Duke University Program
Program ID: 400-36-21-167
Greenville
East Carolina University Program
Program ID: 400-36-21-169
Ohio
Cincinnati
University of Cincinnati Hospital Group Program
Program ID: 400-38-21-173
Cleveland
Case Western Reserve University (MetroHealth) Program
Program ID: 400-38-21-240
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Program ID: 400-38-21-214
Cleveland Clinic Foundation Program
Program ID: 400-38-22-175
Dayton
Wright State University Program
Program ID: 400-38-21-178
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Pulmonary Disease and Critical Care Medicine (Internal Medicine)

Massachusetts

Boston
St Elizabeth's Medical Center of Boston Program
Program ID: 156-34-31-031

Missouri

Kansas City
University of Missouri at Kansas City Program
Program ID: 156-28-31-036

New York

Valhalla
New York Medical College (St Vincent) Program
Program ID: 156-35-11-052

Ohio

Columbus
Ohio State University Program
Program ID: 156-36-12-059

Radiation Oncology

Arizona

Tucson
University of Arizona Program
Program ID: 430-03-11-003

New York

Buffalo
SUNY at Buffalo Graduate Medical-Dental Education Consortium Program
Program ID: 430-35-21-122

Radiology-Diagnostic

Massachusetts

Boston
Boston University Program
Program ID: 420-24-21-081

Michigan

Detroit
Henry Ford Hospital Program
Program ID: 420-25-11-083

New Hampshire

Lebanon
Dartmouth-Hitchcock Medical Center Program
Program ID: 420-32-11-113

Pennsylvania

Philadelphia
Pennsylvania Hospital Program
Program ID: 420-41-31-171

Virginia

Richmond
Medical College of Virginia/Virginia Commonwealth University Program
Program ID: 430-51-21-203

Rheumatology (Internal Medicine)

California

Sacramento
University of California (Davis) Program
Program ID: 150-06-21-066

Selective Pathology

Massachusetts

Boston
Brigham and Women's Hospital Program
Program ID: 301-24-11-003
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University of Oklahoma Health Sciences Center Program
Program ID: 990-39-00-100

Pennsylvania
Allentown
Lehigh Valley Hospital/Pennsylvania State University Program
Program ID: 990-41-00-103

Johnstown
Conemaugh Valley Memorial Hospital Program
Program ID: 990-41-00-108

Philadelphia
Albert Einstein Medical Center Program
Program ID: 990-41-00-224

Pittsburgh
St Francis Medical Center Program
Program ID: 990-41-06-116
University Health Center of Pittsburgh Program
Program ID: 990-41-00-115

Reading
Reading Hospital and Medical Center Program
Program ID: 990-41-00-110

South Dakota
Sioux Falls
University of South Dakota Program
Program ID: 990-40-00-230

Washington
Seattle
Virginia Mason Medical Center Program
Program ID: 990-54-00-144

West Virginia
Huntington
Marshall University School of Medicine Program
Program ID: 990-65-00-194

Wisconsin
La Crosse
Gundersen Medical Foundation-La Crosse Lutheran Hospital Program
Program ID: 990-56-00-147

Urology

Indiana
Indianapolis
Indiana University Medical Center Program
Program ID: 480-17-21-051

Louisiana
Shreveport
Louisiana State University (Shreveport) Program
Program ID: 480-21-21-059

Michigan
Ann Arbor
University of Michigan Program
Program ID: 480-25-21-066

Vascular and Interventional Radiology (Radiology-Diagnostic)

Indiana
Indianapolis
Methodist Hospital of Indiana Program
Program ID: 427-17-21-087

Utah
Salt Lake City
University of Utah Program
Program ID: 427-49-21-045
Appendix E

Medical Schools in the United States

Connecticut
00301 Yale University School of Medicine
New Haven, CT 06510
00802 University of Connecticut School of Medicine
Farmington, CT 06032

District of Columbia
01001 George Washington University School of Medicine
Washington, DC 20037
01002 Georgetown University School of Medicine
Washington, DC 20007
01003 Howard University College of Medicine
Washington, DC 20059

Florida
01102 University of Miami School of Medicine
Miami, FL 33101
01103 University of Florida College of Medicine
Gainesville, FL 32610
01104 University of South Florida College of Medicine
Tampa, FL 33612

Georgia
01201 Medical College of Georgia
Augusta, GA 30912
01202 Emory University School of Medicine
Atlanta, GA 30322
01221 Morehouse School of Medicine
Atlanta, GA 30314
01222 Mercer University School of Medicine
Macon, GA 31207

Hawaii
01401 University of Hawaii John A Burns School of Medicine
Honolulu, HI 96822

Illinois
01601 Rush Medical College of Rush University
Chicago, IL 60612
01602 University of Chicago, Pritzker School of Medicine
Chicago, IL 60637
01606 Northwestern University School of Medicine
Chicago, IL 60611
01611 University of Illinois College of Medicine
Chicago, IL 60612
01645 Rush University School of Health Sciences
Chicago, IL 60612
01643 Loyola University Chicago, Stritch School of Medicine
Maywood, IL 60153
01645 Southern Illinois University School of Medicine
Springfield, IL 62708

Indiana
01720 Indiana University School of Medicine
Indianapolis, IN 46223

Iowa
01803 University of Iowa College of Medicine
Iowa City, IA 52242

Kansas
01802 University of Kansas School of Medicine
Kansas City, KS 66103

Kentucky
02002 University of Louisville School of Medicine
Louisville, KY 40202
02012 University of Kentucky College of Medicine
Lexington, KY 40536

Louisiana
02101 Tulane University School of Medicine
New Orleans, LA 70112
02105 Louisiana State University School of Medicine
New Orleans, LA 70112
02106 Louisiana State University School of Medicine
Shreveport, LA 71130

Maryland
02301 University of Maryland School of Medicine
Baltimore, MD 21201
02307 Johns Hopkins University School of Medicine
Baltimore, MD 21205
02312 Uniformed Services University of the Health Sciences
Bethesda, MD 20814

Massachusetts
02401 Harvard Medical School
Boston, MA 02115
02405 Boston University School of Medicine
Boston, MA 02118
02407 Tufts University School of Medicine
Boston, MA 02111
02416 University of Massachusetts Medical School
Worcester, MA 01605

Michigan
02501 University of Michigan Medical School
Ann Arbor, MI 48109
New Mexico

03401 University of New Mexico School of Medicine
Albuquerque, NM 87131

New York

03601 Columbia University College of Physicians and Surgeons
New York, NY 10032
03503 Albany Medical College of Union University
Albany, NY 12208
03506 State University of New York at Buffalo School of Medicine
Buffalo, NY 14214
03508 State University of New York Health Science Center at Brooklyn College of Medicine
Brooklyn, NY 11203
03509 New York Medical College
Valhalla, NY 10595
03515 State University of New York Health Science Center at Syracuse College of Medicine
Syracuse, NY 13210
03519 New York University School of Medicine
New York, NY 10016
03520 Cornell University Medical College
New York, NY 10021
03546 University of Rochester School of Medicine and Dentistry
Rochester, NY 14642
03546 Albert Einstein College of Medicine of Yeshiva University
New York, NY 10461
03547 Mount Sinai School of Medicine of City University of New York
New York, NY 10029
03548 State University of New York at Stony Brook, School of Medicine
Stony Brook, NY 11794

North Carolina

03601 University of North Carolina at Chapel Hill School of Medicine
Chapel Hill, NC 27514
03605 Bowman Gray School of Medicine of Wake Forest University
Winston-Salem, NC 27103
03607 Duke University School of Medicine
Durham, NC 27710
03608 East Carolina University School of Medicine
Greenville, NC 27834

North Dakota

03701 University of North Dakota School of Medicine
Grand Forks, ND 58202

Ohio

03806 Case Western Reserve University School of Medicine
Cleveland, OH 44106
03810 Ohio State University College of Medicine
Columbus, OH 43210
03841 University of Cincinnati College of Medicine
Cincinnati, OH 45267
03843 Medical College of Ohio at Toledo
Toledo, OH 43699
03844 Northeastern Ohio Universities College of Medicine
Rootstown, OH 44272
03846 Wright State University School of Medicine
Dayton, OH 45401

Oklahoma

03901 University of Oklahoma College of Medicine
Oklahoma City, OK 73190

Oregon

04002 Oregon Health Sciences University School of Medicine
Portland, OR 97201

Pennsylvania

04101 University of Pennsylvania School of Medicine
Philadelphia, PA 19104
04102 Jefferson Medical College of Thomas Jefferson University
Philadelphia, PA 19107
04107 Medical College of Pennsylvania
Philadelphia, PA 19129
04109 Hahnemann University College of Medicine
Philadelphia, PA 19102
04112 University of Pittsburgh School of Medicine
Pittsburgh, PA 15261
04113 Temple University School of Medicine
Philadelphia, PA 19140
04114 Pennsylvania State University College of Medicine
Hershey, PA 17033

Puerto Rico

04201 University of Puerto Rico School of Medicine
San Juan, PR 00906
04202 Ponce School of Medicine
Ponce, PR 00732
04208 Universidad Central del Caribe Escuela de Medicina
Caguay, PR 00633

Rhode Island

04301 Brown University Program in Medicine
Providence, RI 02912
South Carolina
04501 Medical University of South Carolina
College of Medicine
Charleston, SC 29425
04504 University of South Carolina School of Medicine
Columbia, SC 29208

South Dakota
04601 University of South Dakota School of Medicine
Vermillion, SD 57069

Tennessee
34705 Vanderbilt University School of Medicine
Nashville, TN 37232
04706 University of Tennessee College of Medicine
Memphis, TN 38163
04707 Meharry Medical College School of Medicine
Nashville, TN 37208
04720 East Tennessee State University,
James H Quillen College of Medicine
Johnson City, TN 37614

Texas
04802 University of Texas Medical Branch at Galveston
Galveston, TX 77550
04804 Baylor College of Medicine
Houston, TX 77030
04812 University of Texas Southwestern Medical School at Dallas
Dallas, TX 75235
04813 University of Texas Medical School at San Antonio
San Antonio, TX 78284
04814 University of Texas Medical School at Houston
Houston, TX 77225
04815 Texas Tech University Health Science Centre School of Medicine
Lubbock, TX 79430
04816 Texas A & M University College of Medicine
College Station, TX 77843

Utah
04901 University of Utah School of Medicine
Salt Lake City, UT 84132

Vermont
05002 University of Vermont College of Medicine
Burlington, VT

Virginia
05107 Eastern Virginia Medical School of the Medical College of Hampton Roads
Norfolk, VA 23501
05404 University of Virginia School of Medicine
Charlottesville, VA 22908
05104 Virginia Commonwealth University, Medical College of Virginia
Richmond, VA 23298

Washington
05404 University of Washington School of Medicine
Seattle, WA 98195

West Virginia
05502 Marshall University School of Medicine
Huntington, WV 25701
05501 West Virginia University School of Medicine
Morgantown, WV 26506

Wisconsin
05605 University of Wisconsin Medical School
Madison, WI 53706
05606 Medical College of Wisconsin
Milwaukee, WI 53226
Appendix F

Abbreviations

Medical School Affiliation Codes
M Major
L Limited
G Graduate

Specialty and Subspecialty Codes for ACGME-Accredited Programs
AI Allergy and Immunology
ALI Clinical and Laboratory Immunology (Allergy and Immunology)
AM Preventive Medicine-Aerospace Medicine*
AN Anesthesiology
APM Pain Management (Anesthesiology)
BK Blood Banking/Transfusion Medicine (Pathology-Anatomic and Clinical)
CCA Critical Care Medicine (Anesthesiology)
CCM Critical Care Medicine (Internal Medicine)
CCP Critical Care Medicine (Pediatrics)
CCS Surgical Critical Care (Surgery-General)
CD Cardiovascular Disease (Internal Medicine)
CHN Child Neurology (Neurology)
CHP Child and Adolescent Psychiatry (Psychiatry)
CRS Color and Rectal Surgery
D Dermatology
DMP Dermatopathology (Dermatology and Pathology)
DR Radiology-Diagnostic
EM Emergency Medicine
END Endocrinology, Diabetes, and Metabolism (Internal Medicine)
FOP Forensic Pathology (Pathology-Anatomic and Clinical)
FP Family Practice
FPG Geriatric Medicine (Family Practice)
GE Gastroenterology (Internal Medicine)
GFM Preventive Medicine-General
GS Surgery-General
HFM Hematology (Internal Medicine)
HMP Hematology (Pathology-Anatomic and Clinical)
H0 Hematology and Oncology (Internal Medicine)
HSO Hand Surgery (Orthopaedic Surgery)
HSP Hand Surgery (Plastic Surgery)
HSS Hand Surgery (Surgery-General)
ID Infectious Disease (Internal Medicine)
IM Internal Medicine
IMG Geriatric Medicine (Internal Medicine)
MM Medical Microbiology (Pathology-Anatomic and Clinical)
MPH Preventive Medicine-Public Health and General Preventive Medicine*
N Neurology
NEP Nephrology (Internal Medicine)
NM Nuclear Medicine
NP Neuropathology (Pathology-Anatomic and Clinical)
NPM Neonatal-Perinatal Medicine (Pediatrics)
NR Nuclear Radiology (Radiology-Diagnostic)
NS Neurological Surgery
OA Adult Reconstructive Orthopaedics (Orthopaedic Surgery)
OGB Obstetrics and Gynecology

OM Preventive Medicine-Occupational Medicine*
OMO Musculoskeletal Oncology (Orthopaedic Surgery)
OII Oncology (Internal Medicine)
OP Pediatric Orthopaedics (Orthopaedic Surgery)
OPH Ophthalmology
ORS Orthopaedic Surgery
OSM Orthopaedic Sports Medicine (Orthopaedic Surgery)
OSS Orthopaedic Surgery of the Spine (Orthopaedic Surgery)
OTO Otolaryngology
OTR Orthopaedic Trauma (Orthopaedic Surgery)
P Psychiatry
PCC Pulmonary Disease and Critical Care Medicine (Internal Medicine)
PCH Chemical Pathology (Pathology-Anatomic and Clinical)
CP Cytopathology (Pathology-Anatomic and Clinical)
PD Pediatrics
PDC Pediatric Cardiology (Pediatrics)
PDE Pediatric Endocrinology (Pediatrics)
PDP Pediatric Pulmonology (Pediatrics)
PDR Pediatric Radiology (Radiology-Diagnostic)
PS Pediatric Surgery (Surgery-General)
PG Pediatric Gastroenterology (Pediatrics)
PH Preventive Medicine-Public Health*
PIO Pediatric Hematology/Oncology (Pediatrics)
PIP Immunopathology (Pathology-Anatomic and Clinical)
PM Physical Medicine and Rehabilitation
PN Pediatric Nephrology (Pediatrics)
PS Plastic Surgery
PTH Pathology-Anatomic and Clinical
PUD Pulmonary Disease (Internal Medicine)
RHU Rheumatology (Internal Medicine)
RNR Neuroradiology (Radiology-Diagnostic)
RG Radiation Oncology
SP Selective Pathology (Pathology-Anatomic and Clinical)
TS Thoracic Surgery
TY Transitional Year
U Urology
UP Pediatric Urology (Urology)
VIR Vascular and Interventional Radiology (Radiology-Diagnostic)
VS Vascular Surgery (Surgery-General)

Specialty Codes for Non-ACGME-Accredited Programs
CPP Pediatrics/Psychiatry/Child and Adolescent Psychiatry
EMP Pediatrics/Emergency Medicine
MN Internal Medicine/Neurology
MEM Internal Medicine/Emergency Medicine
MP Internal Medicine/Psychiatry
MPD Internal Medicine/Pediatrics
MFM Internal Medicine/Physical Medicine and Rehabilitation
NPR Neurology/Physical Medicine and Rehabilitation
PMP Pediatrics/Physical Medicine and Rehabilitation
PYN Psychiatry/Neurology
SPS Surgery/Plastic Surgery

* Areas of specialization in preventive medicine; not accredited subspecialties.